

August 16, 2024

The Honorable Cathy McMorris Rodgers
Chair
House Energy & Commerce Committee
U.S. House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515

RE: Reforming the National Institutes of Health Framework for Discussion
via email: NIHReform@mail.house.gov

Dear Chair McMorris Rodgers,

On behalf of the Gerontological Society of America (GSA), I appreciate the opportunity to submit this public comment to the "Reforming the National Institutes of Health (NIH) Framework for Discussion" (Framework).

GSA is the nation's oldest and largest interdisciplinary organization devoted to research, education, and practice in the field of aging. The principal mission of the Society — and its 5,400+ members — is to cultivate excellence in interdisciplinary aging research and education to advance innovations in practice and policy. GSA has worked very closely with researchers at many of the institutes and centers at NIH, but none more than at the National Institute on Aging (NIA). In this letter, GSA provides preliminary feedback while looking forward to participating in the forthcoming work to be undertaken by the independent commission proposed in the Framework and in subsequent congressional hearings, where we hope additional input will be sought.

GSA acknowledges and supports the Framework's broad goals of bringing greater efficiency and transparency to NIH. As the nation's premier biomedical research institution, NIH's role in our nation's well-being cannot be overstated. As well, with a long history of working closely with researchers at NIA, GSA has in-depth knowledge of the institute's contributions and scientific enterprise to our understanding of the physical, mental, social, and medical challenges that we face over the life course. GSA supports examination, assessment, and judicious and insightful improvements.

We strongly support the role of congressional oversight for NIH and all of its institutes. To remain a leader in research around the world, we believe that it is critical to regularly evaluate NIH priorities, strategies, and efficiencies. GSA has carefully read the Framework and its proposal to restructure NIH and understands that the goal of the restructuring is "to utilize a holistic life stage approach" and to consider the "whole individual and all populations across the life span." GSA believes that the current design of the National Institute on Aging (NIA) already achieves this goal.

The NIA has played a pivotal role in advancing aging-related research over its 50-year history, investing significantly in genetic, biological, clinical, behavioral, and social research aimed at understanding and improving the health outcomes of us all as we age. NIA has been at the forefront of groundbreaking studies that have shaped our understanding of aging processes and informed policies and practices across healthcare and public health sectors. NIA's comprehensive approach has not only fostered innovation, but also cultivated a rich network of researchers and clinicians dedicated to addressing the multifaceted challenges of aging.

Aging does not begin at any particular age. It is a process that occurs across our lifetimes. The goal of NIA is to support research to understand the very nature of aging and to extend the healthy active years of life. Concerns about dementia in the aging process is just one aspect of aging. The transformation of NIA into a National Institute on Dementia (NID) risks misrepresenting the dynamic experience of aging as just a process of decline and disease. Careful

consideration must be given to changes that could create silos that fragment and destabilize current and future research collaborations.

GSA has serious concerns that the current proposal will undermine the historic multidisciplinary networks and collaborations that have successfully operated for decades, having the unintended consequence of delaying, interrupting, or eliminating research that is indispensable to the health of all of us as we age. Without clear evidence that the current structure is widely failing, GSA would not support proposals that may jeopardize aging-related research at precisely the moment when unprecedented numbers of people are aging into very late life, living healthier lifestyles.

Further, under the current structure, the NIA and the National Institute of Neurological Diseases and Stroke (NINDS) collaborate closely with nearly all other NIH institutes and centers to conduct vital research on Alzheimer's disease and related disorders (ADRD). The proposed reorganization raises concerns about the fate of this collaborative research. Specifically, there is uncertainty about whether the newly proposed NID would absorb ADRD-relevant work from other NIH institutes and centers, or if collaborative funding across institutes would continue at current or expanded levels. Without these critical collaborations, the NIH's ability to conduct comprehensive, multi-disciplinary research addressing the full spectrum of aging and age-related diseases could be significantly diminished. The proposed shifts within the NIH could lead to gaps in knowledge and research needed to support our overall health and well-being as we age. The proposed changes threaten to dismantle the robust, interconnected research ecosystem that the NIH has built over decades, thereby compromising future innovations and breakthroughs that are essential for improving health outcomes for older people and their families.

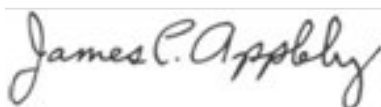
As a multidisciplinary professional membership society, GSA members work with multiple institutes within NIH to support ongoing research. For example, oral health professionals seek support from the National Institute for Dental and Craniofacial Research (NIDCR). NIDCR has been on a mission to improve oral health and eradicate oral diseases, the treatment of which pose enormous economic and healthcare burdens. NIDCR continues to lead the way in advancing fundamental knowledge about dental, oral, and craniofacial health and disease and translates those research findings into strategies for prevention, early detection, and treatment that improve both oral and overall health.

NIDCR's research has a real, tangible impact on patient care, bridging the gap between scientific discovery and the treatments patients receive in the dentist's chair. Through NIDCR funded research we have seen breakthroughs in the treatment of conditions like periodontal disease, oral cancers, and craniofacial anomalies, directly improving the quality of care available to patients. Moreover, the now well-established connection between oral health and overall health makes clear that poor oral health is linked to serious conditions like heart disease, diabetes, and complications in pregnancy. These discoveries highlight the importance of maintaining a focused research agenda that continues to explore these vital links. Shifting NIDCR to a broader neuroscience and brain research context will dilute its focus and undermine its entire mission of advancing oral health for all through research.

As a trusted, respected scientific voice in aging research, GSA stands ready to provide further assistance or information to aid Congress in making an informed decision on NIH restructuring, including participation in an open and robust process led by the Framework's proposed independent commission. We are committed to advancing aging-related research and improving health outcomes for all people, ensuring that as we age, our diverse needs and challenges are addressed through robust scientific inquiry.

Thank you for the opportunity to offer our comments regarding the Framework. If you have any questions, please contact Patricia D'Antonio, Vice President of Policy and Professional Affairs at pdantonio@geron.org or 202-587-5880, or Jordan Miles, Director of Policy at jmiles@geron.org or 202-587-5884.

Sincerely,



James C. Appleby, BSPHarm, MPH, ScD (Hon)
Chief Executive Officer