

FRIENDS OF THE NATIONAL INSTITUTE ON AGING

A broad-based coalition of aging, disease, research, and patient groups supporting the mission of the National Institute on Aging (NIA).

November 13, 2014

Francis S. Collins, M.D., Ph.D. Director National Institutes of Health 9000 Rockville Pike Bethesda, MD 20892

Dear Dr. Collins:

We, the undersigned aging and Alzheimer's disease researchers, educators and clinicians strongly urge you to include an additional \$500 million in the FY 2016 National Institutes of Health (NIH) Budget to support aging research. We believe that this funding is the minimum essential to sustain research needed to make progress in attacking the chronic diseases that are driving significant increases in our national healthcare costs. The institutes that make up the NIH, in particular the National institute on Aging (NIA), lead national scientific efforts to understand the nature of aging in order to promote the health and well-being of older adults, whose numbers are projected to increase dramatically in the coming years due to increased life expectancy and the aging of a baby boom generation.. According to results from the 2010 Decennial Census, "the U.S. population 65 and older is now the largest in terms of size and percent of the population." Further, the U.S. Census Bureau currently estimates that the number of people age 65 and older is 13.7 percent of the population and will rise to 88.5 million or 20 percent of the population by 2050. Those 85 and older will reach 19 million by 2050, a three-fold increase from just three years ago.

Increased investment in preventing, treating or curing chronic diseases of aging is perhaps the single most effective strategy in reducing national spending on health care. According to the Centers for Medicare & Medicaid Services, in 2011 approximately 23 percent of beneficiaries had 4 or 5 multiple chronic diseases associated with aging. Medicare spends an average of \$9,738 per beneficiary per year. Beneficiaries with 4 or more chronic conditions have Medicare spending higher than this average, as much as \$13,000 per year. Unprecedented increases in age-related chronic diseases as the population ages are one reason the Congressional Budget Office projects that total spending on healthcare will rise to 25 percent of the U.S. GDP by 2025. Simply put, our nation does not have the luxury of time to wait to address the health research needs of this population.

Alzheimer's disease and related dementias and the tremendous toll it places on caregivers are a dramatic example of the crisis ahead. The NIA reports that as many as 5.1 million Americans over 65 are today dying with Alzheimer's disease and the numbers of Americans that will die of this disease are projected to increase dramatically in the coming years. It is estimated that over 10 million baby boomers will develop Alzheimer's in addition to today's victims. Alzheimer's disease will also cause physical and emotional impairments on more and more families and caregivers. The growing numbers of Alzheimer's victims and the rapidly-rising costs associated with the disease will put a heavy economic burden on families, businesses and government. Estimates are that the costs of Alzheimer's care will amount to \$2 trillion by 2020. In stark contrast to the increasing costs of healthcare for the aging population, we as a nation are making a miniscule, and declining, investment in the prevention, treatment or cure of aging conditions. We appreciate that despite a budget shortfall, NIH dedicated an additional \$100 million for Alzheimer's disease research with support from the Administration last year. This funding has been allocated to many worth Alzheimer's disease research programs, but as you know there are many recommendations that grew out of the NIH's 2012 Alzheimer's Disease Research Summit that still have not been supported to meet the goal of finding effective therapies by 2025 set out in our National Plan to Address Alzheimer's Disease. As you know, there is also an upcoming Alzheimer's Disease Research Summit in February 2015 that will no doubt result in additional research recommendations.

In addition to increased opportunities to make advances against Alzheimer's disease, NIH is also poised to accelerate other scientific discoveries that we as a nation are counting on. Twenty of the 27 institutes and centers at the NIH are now working more closely under the banner of the Trans-NIH Geroscience Interest Group (GSIG) to understand basic cellular and molecular underpinnings of aging as a principal risk factor for chronic disease and to explore common mechanisms governing relationships between aging and chronic disease. Activities organized by the GSIG like regular meetings, quarterly seminars and the recommendations from the 2013 Advances in Geroscience Summit have identified new pathways for research collaboration. Research that can be translated quickly into effective prevention and efficient health care will reduce the burden of a "Silver Tsunami" of age-associated chronic diseases. Breakthroughs from NIH research can lead to treatments and public health interventions that could delay the onset or slow the progression of costly conditions such as heart disease, stroke, diabetes, bone fractures, age-related blindness, and neurological diseases. Such advances could save trillions of dollars by the middle of the current century.

As you develop a proposed FY 2016 NIH budget that includes cost-effective health research for all Americans, we look forward to working with you. Thank you for considering our views, and please do not hesitate to contact Sue Peschin, Chair, Friends of the NIA, at (202) 688-1246 or email <u>speschin@agingresearch.org</u> if you have any questions or would like additional information.

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