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Opening Statement of Rep. Henry A. Waxman
Ranking Member, Committee on Energy and Commerce
Hearing on “The National Institutes of Health –
A Review of Its Reforms, Priorities, and Progress”
Subcommittee on Health
June 21, 2012

Today, we have the great pleasure of hearing from the Director of the National Institutes of Health, Dr. Francis Collins. In addition to his responsibilities as the head of NIH, Dr. Collins is a renowned researcher who, among many other scientific achievements, led the government’s effort to map the human genome.

Regardless of our political persuasions, I know all Members agree that NIH is one of the federal government’s real gems. Indeed, across the country and around the globe, NIH is viewed as the preeminent biomedical research institution.

And with good reason. NIH research has resulted not only in cutting edge scientific breakthroughs; it has also led to real and meaningful improvements in the public’s health.

From its work on cancer to Hepatitis B; hypertension to the H1N1 virus; HIV/AIDS to Alzheimer’s disease -- to name just a few of our most pressing medical concerns -- NIH researchers have made discoveries; developed treatments; and even found cures allowing us to live longer, healthier, and more productive lives.

But the work of NIH is never done. As we learn more about disease and the human condition, the list of research challenges grows exponentially. Some 40 years ago, for example, we thought a single, targeted war on cancer was all that was needed to wipe out that illness.

Today, of course, through the efforts of NIH and others, we understand that cancer -- in all of its many forms -- is a far more complex disease. It is, in fact, a series of diseases with some unexpected commonalities in tumors from one disease site to the next. Thus, the NIH portfolio of cancer research has grown significantly, and become more sophisticated and multifaceted.

Because of its outstanding work, we continue to look to NIH to help solve the trickiest of medical riddles such as diabetes, autism, MS, spinal cord injury, and Parkinson's disease, among others.

We must also look to NIH to figure out how to prevent disease and disability wherever we can.

Meeting these expectations demands nothing less than the best researchers, exceptional grant applications, strong leadership, and sustained funding.

Our job -- the job of Congress -- is to ensure that NIH has the stable funding it needs to continue its world-class work and global leadership. Money is in short supply, I know, but federal support for NIH is not where we can afford to cut back.

At this juncture of endless research possibilities -- both basic and translational -- and tough economic times, Dr. Collins comes before us to discuss how he and NIH expect to address these major challenges.

Dr. Collins, thank you for coming to share your plans and priorities for NIH with us today. I look forward to hearing your testimony.