

DEPARTMENT OF HEALTH AND HUMAN SERVICES

NATIONAL INSTITUTES OF HEALTH

Hearing on FY 2019 National Institutes of Health Budget Request

Witness appearing before the

House Appropriations Subcommittee on Labor, HHS, Education, and Related Agencies

Francis S. Collins, M.D., Ph.D.

Director, National Institutes of Health

Accompanied by

Diana W. Bianchi, M.D.

Director, Eunice Kennedy Shriver National Institute of Child Health and Human Development

Anthony S. Fauci, M.D.

Director, National Institute of Allergy and Infectious Diseases

1 R U P D Q (3 1 H G M . D . K D U S O H V V

Director, National Cancer Institute

Nora Volkow, M.D.

Director, National Institute on Drug Abuse

April 11, 2018

Good morning, Chairman Cole, Ranking Member DeLauro, and distinguished Members of the Subcommittee. I am Francis S. Collins, M.D., Ph.D., and I have served as the Director of the National Institutes of Health (NIH) since 2009. It is an honor to appear before you today.

~~B8702~~ I discuss

JUDQW G R O O D U V W R I X Q G U H V H D U F K L Q Y H V W L Q 1 , + ¶ V E >

priority areas including combatting the opioid epidemic, advancing Precision Medicine, and investing in translational research.

The FY 2019 Budget consolidates HHS research programs into three new institutes within the NIH. The Budget provides \$380 million for the activities of the Agency for Healthcare Research and Quality (AHRQ), consolidated into the National Institute for Research on Safety and Quality. The National Institute for Occupational Safety and Health (NIOSH), including the Energy Employees Occupational Illness Program (EEOCIPA), currently administered by the Centers for Disease Control and Prevention, and the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR), currently administered by the Administration for Community Living, are also proposed for consolidation into the NIH.

\$ P H U L F D ¶ V

of NIH laboratories ranks near the lowest in the federal government due to the high likelihood of floods, power outages, and mechanical failures. Items on the backlog list include: install steam and chilled water distribution systems; conduct structural repairs to older buildings; upgrade plumbing systems; repair elevators; upgrade heating, ventilating, and air conditioning systems; replace deteriorated electrical systems, and more. In addition, due to the age and use of NIH facilities, NIH must invest funds in removing contaminants and hazardous waste before construction or capital repairs can begin in most of its buildings. The Budget will allow NIH to track what contaminants are being cleared from each of our buildings, which will ultimately help NIH do a better job of anticipating the cost and time required to begin new projects in existing buildings.

Truly exciting, world class science is taking place. I would like to provide just a few examples of the depth and breadth of the amazing research the FY 2019 Budget supports across the Institutes and Centers of NIH.

Over the past 15 years, communities across our Nation have been devastated by increasing prescription and illicit opioid misuse, addiction, and overdose. This Committee made a historic investment of \$500 million in our work in FY 2018, and the FY 2019 Budget builds on that with an investment of \$850 million to support a range of activities to advance research on pain and addiction. NIH has and will continue to support cutting-edge research on pain, opioid misuse, addiction, and overdose. Drug addiction is a complex neurological condition, driven by many biological, environmental, social, and developmental factors. Continued research will be key to understanding the crisis and informing future efforts. Pain is an equally complex condition affecting millions of Americans. NIH will: explore new formulations for overdose reversal medications capable of combatting powerful synthetic

opioids; search for new options for treating addiction and maintaining sobriety; continue to research how best to treat babies born in withdrawal through our ACT NOW trial; develop biomarkers to objectively measure pain; build a clinical trial network for pain research; and attempt to find non-addictive and non-pharmacological approaches to chronic pain. Thanks to your support, all hands are on deck at NIH for this public health crisis.

Another exciting area of continued investment in FY 2019, building on this
& R P P L ~~Low-stand~~g support, is Precision Medicine. In a few weeks, NIH will officially launch the national roll-out of the *All of Us* Research Program. This program will partner with one million or more people across the United States to pro

