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AMERICAN ACADEMY OF SLEEP MEDICINE AMERICAN ASSOCIATION OF NEUROLOGICAL

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

AMERICAN COLLEGE OF CARDIOLOGY AMERICAN DIABETES ASSOCIATION AMERICAN HEART ASSOCIATION AMERICAN LUNG ASSOCIATION

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SOCIETY FOR CARDIOVASCULAR MAGNETIC RESONANCE

SOCIETY FOR MATERNAL-FETAL MEDICINE

SOCIETY FOR VASCULAR SURGERY SOCIETY FOR WOMEN'S HEALTH RESEARCH

SOCIETY OF CARDIOVASCULAR COMPUTED TOMOGRAPHY

SOCIETY OF INTERVENTIONAL RADIOLOGY SOCIETY OF THORACIC SURGEONS

WOMEN'S HEART ALLIANCE WOMENHEART

April 26, 2024

The Honorable Robert Aderholt Chairman Subcommittee on Labor-HHS-ED U.S. House of Representatives Washington, DC 20515

The Honorable Rosa DeLauro Ranking Member Subcommittee on Labor-HHS-ED U.S. House of Representatives Washington, DC 20515

Dear Chair Aderholt and Ranking Member DeLauro:

On behalf of the 69 member organizations of the National Heart, Lung, and Blood Institute (NHLBI) Constituency Group, we encourage you to include a robust allocation for the National Institutes of Health, including at least \$4.281 billion for the NHLBI in the FY 2025 Labor, HHS, Education Appropriations bill. This investment will allow the NIH to maintain progress on mission-critical research addressing cardiovascular, respiratory, blood, and sleep-related disorders. Unfortunately, despite research advances, these conditions continue to be among the leading causes of death and disability in the United States.

With recent stagnation of funding, the NHLBI will be unable to keep pace with the rising cost of research. Our recommendation reflects the Biomedical Research Development Price Index, which is projected to be 2.7% in FY2025, plus 5% real growth, allowing the NHLBI to sustain its research portfolio. There are real warning signs that the NIH cannot keep pace with inflationary pressures. For example, the National Heart, Lung, and Blood Institute reports that although its budget has increased by 22% since 2016, this new funding has only been able to keep pace with inflation. The cost of

conducting research under major R01 grants, for example, has also increased by 22%¹ because of cost increases for personnel, laboratory space, equipment, and supplies.

Over 75 years, NHLBI has supported groundbreaking research that has helped improve longevity and quality of life for people in the United States and worldwide. The institute will continue to conduct major initiatives and pursue critical scientific opportunities to prevent and develop new treatments for heart, lung, blood, and sleep diseases and conditions.

For example:

- NHLBI-funded CRISPR technology was used to develop the first treatments to cure Sickle Cell Anemia, demonstrating the power of gene-editing therapy and the promise of this and other biomedical technologies in prevention and treatment and the potential to focus communitylevel interventions for those who are most vulnerable.
- Recognizing that those living in rural communities face a disproportionate burden of heart and lung disease, the NHLBI developed the Risk Underlying Rural Areas Longitudinal (RURAL)
 Cohort Study in ten rural communities, using community-engaged partners and high-tech mobile research units to collect data from these population for use in precision medicine research and interventions to reduce health disparities.
- NHLBI continues to focus on community-driven initiatives such as the Maternal Health, Community Implementation Project (MH-CIP), and Early Intervention to Promote Cardiovascular Health of Mothers and Children (ENRICH) to address women's health before, during, and after pregnancy.
- Furthermore, the NHLBI is carrying forward its sleep research plan to study sleep health across
 the life cycle. Through this work, a more accurate tool has been developed for diagnosing
 obstructive sleep apnea, a condition estimated to affect over 30 million people, increasing
 their risk for cardiovascular disease and mortality.

As Congress works to pass legislation to fund the federal government, it must ensure that the NIH is provided with sufficient resources to conduct vital basic, clinical, and translational research. This resourcing will lead to advances in the treatment of cardiovascular disease, including heart failure and congenital heart disease, lung diseases such as chronic obstructive pulmonary disease (COPD) and asthma, blood disorders such as sickle cell disease and hemophilia, and sleep health.

We thank you for considering our appropriations recommendation. Please contact Valerie Adelson with the American Thoracic Society at vadelson@thoracic.org or John Laughner with the American Heart Association at John.Laughner@heart.org if you need additional information.

Sincerely,

Valerie Adelson Co-chair, NHLBI Constituency Group John Laughner Co-chair, NHLBI Constituency Group

¹ NHLBI Director's Report, NHLBI Advisory Council Meeting, February 8, 2023