

March 15, 1966

The President
The White House
Washington, D. C.

Dear Mr. President,

The House Appropriations Subcommittee on Health, Education and Welfare has just finished receiving testimony from the National Institutes of Health on the proposed Administration recommendations for fiscal 1967.

I sincerely believe that I am conveying to you the general reaction of Subcommittee members of both parties when I state that the experience was a most depressing one as we listened to one Institute Director after another outline exciting goals promising reductions in human disability and suffering which cannot be achieved under the very tight fiscal 1967 budget.

We do not contend that the professional judgment budgets of the various Institutes are sacrosanct -- they asked for approximately \$337 million over the amount which was finally recommended for their activities. However, we were impressed with the fact that these professional judgments were solidly predicated upon their knowledge as doctors of what it would take in the coming year to turn the tide against many of the major cripples and killers of our time.

As you well know, heart disease is the number one enemy of the American people, claiming almost a million lives a year and also removing from our productive economy thousands upon thousands of our citizens who then become, through no fault of their own, tax-eaters rather than tax-payers.

In signing the landmark Heart Disease, Cancer and Stroke legislation of 1965, which would not have come into fruition without your magnificent support, you remarked that the goal of this legislation was simple: "to speed the miracles of medical research from the laboratory to the bedside."

The proposed fiscal 1967 budget for the National Heart Institute does not provide for many miracles. In actual fact, in the coming year the Institute will be able to support less research grants than it did in fiscal 1966, or even in fiscal 1965. Furthermore, it will not be able to pursue several exciting research leads which hold enormous promise in reducing the toll of our number one killer.

For example, in fiscal 1965 the Heart Institute presented to us a carefully worked seven-year protocol to test a number of drugs which show a great potential in reducing cholesterol levels and thereby preventing second and third attacks among heart victims. We provided the monies for this program in both fiscal 1965 and fiscal 1966, but the program is now expanding to the point where an extra \$2 million is needed in the coming year to move this challenging work forward at its projected level. This increase is not contained in the Administration budget.

You are undoubtedly familiar with the increasing optimism among such distinguished research investigators as Dr. Michael E. DeBakey of Baylor University and many of his colleagues, that we can develop a totally implantable artificial heart within the next five years. However, we have received testimony of the past two or three years that this will be a very expensive endeavor involving sophisticated engineering talents, contracts for expensive hardware, etc. The National Heart Institute requested an additional \$15 million in the coming year to get this program off the ground; this request was denied.

The budget for the National Cancer Institute is even tighter. The actual amount of the increase over the current year is only \$251,000; since research costs go up at a rate of about five percent annually, this so-called "increase" is actually a sharp cut. As the testimony brought out, the number of research awards which go to investigators in all parts of the country will be far below the number awarded in fiscal 1966. It will be obviously impossible for the National Cancer Institute to fund even the backlog of scientifically-approved research grants which were awarded, but could not be paid, because of insufficient funds last year.

The Congress has been following with considerable interest the development of scientific task forces zeroing in on the major forms of cancer. The prototype task force -- on viruses and

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and leukemia -- was started in fiscal 1965. In its report to the Congress in fiscal 1966, the Committee on Appropriations recommended a task force on breast cancer, the leading killer of women. Because of insufficient funds, this task force could not be activated. The request of the Cancer Institute Director for one million dollars to get it going in fiscal 1967 has also been denied.

Cancer is a ruthless, world-wide killer of people. Last year, it cut down 300,000 Americans, many of them young children, young mothers, fathers in their 40's and 50's, etc.

A recent national poll disclosed the fact that it was the disease most feared by people in all walks of life. Vice President Humphrey recently pointed out that if American scientists developed a cure for cancer we would win the eternal gratitude of suffering people in all parts of the world.

But we cannot make any progress against this monstrous killer when we are faced with a budget for the coming year which cuts the funding for research and training programs in cancer below that of the current year.

The American Medical Association has described mental illness as "America's most pressing and complex health problem." Its victims fill more than 50% of our hospital beds; last year, it cost our economy more than \$4 billion. Of those rejected by Selective Service for induction into our Armed Forces, more than half are turned down because of mental disturbance or mental defect.

The saddening thing is that we have a considerable amount of research knowledge which can cut down these manpower and economic losses, but we still lack the trained personnel to bring this precious knowledge to people. The National Institute of Mental Health requested an increase of \$15 million in its training programs so that it could continue its efforts to supply desperately needed psychiatrists and other skilled personnel for state hospitals, mental health clinics, new community mental health centers, and so on. However, the Administration budget provides only about 20% of this requested increase, with the result that 2,000 young men and young women fully qualified to pursue careers in psychiatry, psychology, social work and psychiatric nursing will receive notices this coming year telling them we cannot use them.

They are ready and eager, we need them, but we will not supply the funds to train them.

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We cannot mount a major research offensive against the big killers unless we have the highly sophisticated laboratories and other facilities to house investigative work. Since 1956, we have been building these facilities at a very slow pace. In 1965, on your recommendation, the Congress accelerated this program by authorizing \$280 million over the next three years to catch up with the backlog of applications from medical schools, hospitals and private research laboratories in every part of this land. However, the Administration budget for fiscal 1967 provides only \$15 million for these facilities -- the lowest amount in the last ten years, and \$35 million under the current year's level.

In fiscal 1966, because of insufficient funds, the National Institutes of Health moved a \$70 million scientifically-approved backlog over to the coming year. On top of this, it is conservatively estimated that another \$60 million in research facility applications will be approved in fiscal 1967. As a result, the National Institutes of Health will have \$15 million with which to meet an obligation of \$130 million in carefully screened applications for new research facilities. This sharp cut will fall with particular harshness upon the 10 or 12 new medical schools which are struggling to open their doors. A research facility is an absolute necessity in the medical education of today, so the cut in facility funds will delay the opening of many of these schools.

Mr. President, in 1964 you appointed the Commission on Heart Disease, Cancer and Stroke. Reporting to you in December of the same year, it pointed out that two-thirds of all Americans now living will suffer or die from one of these three diseases unless we do something about it. Your Commission also noted the staggering economic costs of this death and disease -- an estimated \$45 billion last year alone.

Upon your recommendation, the Congress authorized \$340 million for this great program over the next three years. However, only one-half of the \$50 million authorized was requested in your fiscal 1966 supplemental submission, and for fiscal 1967 the request is for only \$45 million -- one-half of the amount authorized by the Congress. We cannot galvanize the medical and scientific community into the all-out attack on these diseases which you have demanded unless we provide them with the funds necessary to set up these regional medical center programs.

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Mr. President, I submit this documentation in no spirit of caviling criticism. This is my 26th year in the Congress and my 20th year of service on the House Appropriations Subcommittee on Labor-H.E.W., and I say to you in all sincerity that no President in that length of time has exhibited more leadership than you in the quest for a healthier America. Your compassionate concern for the millions of American families rent asunder by disability and disease is evident in the monumental health enactments which you proposed and guided through the 88th and 89th Congresses.

On a personal note, I am grateful beyond measure for your many public expressions of appreciation for the role I, and my colleagues in the Congress, have played in the building of a healthier and happier America.

However, as I have listened to the distinguished doctors testifying before our committee over the past two months on the fiscal 1967 budget for the National Institutes of Health, I have become more and more concerned that the proposed budget will fall far short of meeting the immediate challenges which you have outlined so eloquently in your three Health Messages and in the truly historic health legislation which provides the blueprint for an unprecedented war upon disease.

Deeply confident that we share common aspirations in the health field, I would very much appreciate an early opportunity to come and talk to you about these matters of mutual concern before the Committee on Appropriations makes its report to the Congress.

With warmest personal regards,

Sincerely,

John E. Fogarty
Member of Congress