

March 16, 2008**EDITORIAL**

No Way to Run Health Research

The National Institutes of Health, the main supporter of biomedical research at universities and medical schools, has an annual budget of more than \$29 billion. That is far above what any other nation spends on such research, and far higher than the budgets of other agencies that support work in other scientific fields.

Yet academic institutions are complaining that the N.I.H. cannot support all of the worthy research being proposed. They warn that young scientists with the potential for breakthrough work are being frozen out.

The academic leaders are likely right. The percentage of grant proposals that get financed has dropped from one in three early in the decade to one in four. The average age of investigators when they get their first N.I.H. grant has risen to 43, especially old for fields in which younger people often do the best work.

Between 1998 and 2003, with bipartisan support, the N.I.H.'s budget doubled. Universities and medical schools built new laboratories and expanded their cadres of researchers, who flooded the N.I.H. with applications. The increased spending helped spur completion of the human genome project and led to new diagnostic tests and therapies for a variety of diseases.

Then the spigot was turned down. For the past five years, the N.I.H. budget has been essentially flat. Adjusted for the rising costs of equipment, supplies and personnel, the agency has lost 13 percent in purchasing power.

There is no easy way out. Neither the government nor academia gave much thought to what might happen when the flush times came to an end, hastened by the huge costs of the Iraq war and tax cuts. Yet it seems foolish to waste the talent and laboratories that have been built up over the last decade. Biology may be the most rapidly progressing of the sciences, and an aging population and a too-costly health care system would benefit from better and cheaper treatments.

Congress needs to provide the N.I.H. with enough money to keep up with biomedical inflation and preferably somewhat more. Then the government and research institutions need to do better with what they get.

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