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June 11, 2007

The Honorable David Obey
Chairman
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Jerry Lewis
Ranking Member
Committee on Appropriations
United States House of
Representatives
Washington, DC 20515

Re: NIH & NIDCR FY08 Funding Levels

Dear Chairman Obey:

The members of the *Friends of the National Institute of Dental and Craniofacial Research* (FNIDCR), a leading coalition of individuals, corporations, and institutions that understands the importance of dental, oral, and craniofacial health to our society, are disappointed that your Mark as Chairman of the Appropriations Subcommittee on Labor, Health and Human Services, and Education fell below our recommended FY08 funding levels of \$420 million and \$30.2 billion for NIDCR and NIH, respectively.

The proper funding of NIH and NIDCR will transform the future of medical and dental practice to the benefit of our fellow citizens and ease the burden on our nation's healthcare system. I point to only a few examples where we have seen, or are beginning to see, the fruits of the research conducted at NIDCR:

Tooth Decay. Fluorides and sealants have cut the rate of the number of American adults, aged 45 and older, who are without teeth by more than half since 1950s.

Oral Cancer Detection. Twenty-two Americans die each day from oral cancer, and 39,000 people develop it every year. Survival rates are among the lowest of all the major cancers. It is difficult to detect and hard to predict its outcome. NIDCR-supported research has yielded initial success with developing an optical device that can alert dentists if oral cancer is in the early stages of development in a patient.

Salivary Diagnostics. The promising prospect of using saliva as a diagnostic fluid to identify an emerging disease is an example of the type of cutting-edge research being conducted and supported by NIDCR. Salivary Diagnostics possesses advantages over traditional blood testing, including the absence of needles and the ability to be administered on-the-spot. FY08 funding will go toward the completion of a device used to conduct salivary diagnostic tests.

Moreover, NIDCR research benefits millions of Americans with:

- Periodontal Disease
- Chronic Dry Mouth
- Chronic Facial and Oral Pain, and
- Bone and Cartilage Regeneration.

All of these diseases and ailments lead to two million hospitalizations and 100,000 deaths annually at a cost of \$100 billion to our nation's healthcare system.

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Finally, through community-based disparities research funded by NIDCR, a difference is being made in meeting the health needs of our nation's low-income, underserved, and high-risk populations. This need was solemnly made apparent with the recent, tragic passing of 12-year-old Deamonte Driver, who died from a tooth infection.

Furthermore, we applauded the 109th Congress when it passed, with overwhelming bipartisan support, the NIH Reform Act of 2006. This reauthorization legislation affirmed the importance of NIH and the crucial role it plays in advancing biomedical research to the benefit of our nation.

Although under your Mark, NIH funding would grow by 2.6 percent for FY08, it is still woefully short of the 8.2 percent increase over FY07 level as authorized by the NIH Reform Act of 2006. Such an increase would place FY08 NIH funding at \$30.2 billion which is in the best interest of the United States.

Therefore, based upon the merits of the research conducted by NIDCR, and the reauthorizing language in the NIH Reform Act of 2006, we respectfully request the Appropriations Committee to increase the Appropriations LHHs Education Mark for NIDCR to \$420 million and for NIH to \$30.2 billion.

Thank you for your consideration of this very important matter.

Respectfully submitted,

A handwritten signature in blue ink that reads "Bruce Donoff". The signature is written in a cursive, flowing style.

R. Bruce Donoff, D.M.D., M.D.
FNIDCR President