

Wednesday, April 30, 2025

Senator Susan Collins
Chair
Senate Committee on Appropriations
413 Dirksen Senate Office Building
Washington, D.C. 20510

Senator Patty Murray
Vice-Chair
Senate Committee on Appropriations
154 Russell Senate Office Building
Washington, D.C. 20510

Dear Chair Collins and Ranking Member Murray,

On behalf of the [Gerontological Society of America \(GSA\)](http://www.geron.org), we appreciate you holding a hearing on April 30, 2025, titled, "Biomedical Research: Keeping America's Edge in Innovation," before the full Senate Appropriations Committee.

The National Institutes of Health (NIH) is the cornerstone of biomedical research in the U.S. and renowned as the crown jewel research institution in the world. Its funding supports groundbreaking discoveries that improve health and save lives. It drives innovation, creates jobs, and strengthens our economy. The return on investment in biomedical research is substantial, both in terms of improved health outcomes and economic growth. **Proposed cuts to NIH Funding, along with the termination of ongoing research, will have a deep and lasting impact on global scientific research, the economy and the health and wellbeing of U.S. residents.**

GSA's mission is to foster excellence, innovation, and collaboration to advance aging research, education, practice, and policy, and our vision is "meaningful lives as we age." GSA's 6,000 members include gerontologists, health professionals, behavioral & social scientists, biologists, demographers, economists, and many other disciplines. These experts study all facets of aging with a life-course orientation. The multidisciplinary nature of the GSA membership is a valued strength, enabling the Society to provide a 360-degree perspective on the issues facing our population as we age. Our members come from more than 50 countries.

More than 80% of our members are receiving funding from the federal government, much of that coming from the NIH and the National Institute on Aging (NIA).

The NIA, recently celebrating 50 years, was formed to support the cross-disciplinary study of aging across the life course. NIH and NIA have funded cutting-edge research that has helped advance the field of aging research, with many of our GSA members receiving funding from the institution. Research, supported by the NIA and conducted by GSA members, includes studies on how calorie restriction builds strong muscle and stimulates healthy aging genes, bridging the divide between aging and chronic diseases with geroscience, the importance of screening people with dementia and those who care for them for loneliness, and how overweight and obesity are now recognized as chronic health conditions with specific pathophysiologic causes.

GSA appreciates the emphasis placed on the importance of the innovation in biomedical research in the U.S. There is also innovation in social scientific and psychological scientific research. In *The Journals of Gerontology, Psychological Sciences and Social Sciences, Series B*, we highlight such research innovations, including findings that shed light on the potential of social internet use in facilitating network maintenance in later life, which is complicated by the decreasing availability of energy due to health declines (Janssen, et. al.). A separate research study funded by NIH suggests that multivariate health and lifestyle factors may profoundly shape trajectories of cognitive change from middle to later life, with potential extension of several years of cognitive health span (Reas, et. al.).

In Fiscal Year 2023, NIH funding generated an estimated \$92.9 billion in economic activity. NIH funding supports more than 412,000 U.S. jobs, including 300,000 researchers, at more than 2,500 institutions across all 50 states. More than

80% of the NIH budget goes toward the funding of research at the local level across the country, including nearly 50,000 competitive grants to research institutions and small businesses. Every \$1 invested in NIH-funded research generates \$2.5 in economic activity (Research!America, *NIH Fast Facts*).

Without this critical funding, we wouldn't have the novel, innovative treatments supported by research in the U.S, such as knowing that hearing loss is a risk factor for developing Alzheimer's disease and related dementias (ADRD), bridging the divide between aging and chronic diseases with geroscience, why it's important to screen people with dementia and those who care for them for loneliness, and how overweight and obesity are now recognized as chronic health conditions with specific pathophysiologic causes.

In collecting anecdotes, GSA members have reported that the proposed 15% cap will drastically limit university research resources that are essential, especially for early career scientists. These resources include biostatistical support, recruitment centers, library support, and training opportunities. Further, this may limit universities' ability to take on doctoral students and postdoctoral fellows, leading to a dearth of innovation and next generation leaders.

Aging touches all aspects of human existence. Over its 50-year history, NIA-funded research has cast a wide and critical net over many of these factors, benefiting all of us as we age. Maintaining robust support for scientific inquiry is essential to keeping us productive and healthy as we experience the benefits of longevity.


Cuts to NIH, along with reductions in workforce, will limit and cease lifesaving biomedical research. NIA funds critical research that improves the quality of life for older people, including studies on ADRD, mobility, and social engagement.

GSA [publishes five peer-reviewed journals](#) with research that can advance the focus on biomedical research, as well as [more than 60 interest groups](#) formed around a topic or issue that cuts across disciplines.

We encourage robust support for the health and aging research ecosystem at NIH, along with advancement of the careers of early researchers. We encourage reevaluation of the proposed cap on indirect research costs, along with agency reorganization that does not involve Congressional oversight, input, and transparency.

Thank you for the opportunity to provide input. If you have any questions, please contact Patricia D'Antonio, Vice President of Policy and Professional Affairs at pdantonio@geron.org or 202-587-5880 or Jordan Miles, Director of Policy at jmiles@geron.org or 202-587-5884.

Sincerely,



James C. Appleby, BSPHarm, MPH, ScD (Hon)
Chief Executive Officer

Citations

Research!America. (2024, August). *NIH Fast Facts*. <https://www.researchamerica.org/wp-content/uploads/2024/08/NIH-Fast-Facts-ResearchAmerica.pdf>

Jeroen H M Janssen, Theo G van Tilburg, Erik J van Ingen, Rense Corten, G M E E (Geeske) Peeters, Social Connectedness in Older Adults: The Potential of Social Internet Use to Maintain a Strong and Stable Personal Network, *The Journals of Gerontology: Series B*, Volume 80, Issue 4, April 2025, gbaf014, <https://doi.org/10.1093/geronb/gbaf014>

Emilie T Reas, Humberto Parada, Jaclyn Bergstrom, Linda K McEvoy, Modifiable Risk Factors for Cognitive Decline in Community-Dwelling Older Adults Differ by Sex and *APOE4*, *The Journals of Gerontology: Series B*, Volume 80, Issue 5, May 2025, gbaf005, <https://doi.org/10.1093/geronb/gbaf005>