

Verbal Statement of Dr. Karla Zadnik
March 27, 2007, House LHHS Appropriations Subcommittee

Good morning Mr. Chairman, Ranking Member Walsh and members of the subcommittee. I am Dr. Karla Zadnik, Associate Dean for Research and Graduate Studies at the Ohio State University, College of Optometry and a member of the American Optometric Association (AOA).

On behalf of the 35,000 members of the AOA, America's frontline providers of eye and vision care, I want to thank you for the opportunity to appear at today's hearing. It is a pleasure to have a chance to report to you on the research and funding priorities of the nation's doctors of optometry and the patients we serve. Doctors of optometry (ODs) are the primary health care professionals for the eye. Optometrists examine, diagnose, treat, and manage diseases, injuries, and disorders of the visual system, the eye, and associated structures, as well as identify related systemic conditions affecting the eye

The American Optometric Association (AOA) requests Fiscal Year (FY) 2008 National Institutes of Health (NIH) funding at \$31 billion, or a 6.7 percent increase over FY2007, to balance the biomedical inflation rate of 3.7 percent and to maintain the momentum of discovery. Although AOA commends the leadership's actions in the 110th Congress to increase FY2007 NIH funding by \$620 million, this was just an initial step in restoring the NIH's purchasing power, which had declined by more than 13 percent since FY2005. That power would be eroded even further under the administration's FY2008 budget proposal. Funding would also be eroded even further under the administration's FY2008 budget proposal. AOA commends NIH Director, Dr. Elias Zerhouni, who has articulately described his agenda to foster collaborative, cost-effective research and to transform the health care research and delivery paradigm into one that is predictive, preemptive, preventive, and personalized. NIH is the world's premier institution and must be adequately funded so that its research can reduce health care costs, increase productivity, improve quality of life, and ensure our nation's global competitiveness.

AOA requests that Congress make eye and vision health a top priority by funding the National Eye Institute (NEI) at \$711 million in FY2008, or a 6.7% increase over FY2007. This level is necessary to fully advance the breakthroughs resulting from NEI's basic and clinical research that are resulting in treatments and therapies to prevent eye disease and restore vision. Vision impairment/eye disease is a major public health problem that is growing and that disproportionately affects the aged and minority populations, costing the United States at least \$68 billion annually in direct and societal costs, let alone the indirect costs of reduced independence and decreased quality of life. Adequately funding the NEI is a cost-effective investment in our nation's health, as it can delay, save, and prevent expenditures, especially to the Medicare and Medicaid programs.

Funding NEI at \$711 million in FY2008 represents the judgment of the AOA and its partners in the eye and vision research community as the level necessary to fully advance breakthroughs resulting from NEI's basic and clinical research that are resulting in treatments and therapies to prevent eye disease and restore vision.

VISION IMPAIRMENT/EYE DISEASE IS A MAJOR PUBLIC HEALTH PROBLEM THAT IS INCREASING HEALTH CARE COSTS, REDUCING PRODUCTIVITY AND DIMINISHING QUALITY OF LIFE

The 2000 US Census reported that more than 119 million people in the United States were age 40 years or older, which is the population most at risk for age-related eye disease. The NEI estimates that, currently, more than 38 million Americans age 40 years and older experience blindness, low vision or an age-related eye disease such as AMD, glaucoma, diabetic retinopathy, or cataracts. This is expected to grow to more than 50 million Americans by 2020. The economic and societal impact of eye disease is increasing not only due to the aging population, but to its disproportionate incidence in minority populations and as a co-morbid condition of other chronic, common disease, such as diabetes.

Although the NEI estimates that the current annual cost of vision impairment and eye disease to the US is \$68 billion, this number does not fully quantify the impact of direct health care costs, lost productivity, reduced independence, diminished quality of life, increased depression, and accelerated mortality. The continuum of vision loss presents a major public health problem and financial challenge to both the public and private sectors.

In public opinion polls over the past 40 years, Americans have consistently identified fear of vision loss as second only to fear of cancer. As a result, federal funding for the NEI is a vital investment in the health, and vision health, of our nation, especially our seniors, as the treatments and therapies emerging from research can preserve and restore vision. Adequately funding the NEI can delay, save, and prevent expenditures, especially those associated with the Medicare and Medicaid programs, and is, therefore, a cost-effective investment.

AOA urges FY2008 NIH and NEI funding at \$31 billion and \$711 million, respectively.

Of course, Mr. Chairman, vision impairment and eye disease are not limited to the middle-aged and the elderly. Public health experts recommend that children visit an eye care professional in the first year of life – one of the most critical stages of visual development – to identify the potential for eye and vision problems.

In fact, current research shows us that:

- One in 10 children is at risk from undiagnosed eye and vision problems, which, if undetected, could lead to permanent vision impairment, and in rare cases, life-threatening health risks.
- Only 14% of children from infancy to age 6 have had a comprehensive eye assessment from an eye care professional.

In an effort to encourage early detection and treatment, in 2005 the American Optometric Association launched in a national public health initiative to provide no-cost vision assessments for infants. The program is called InfantSEE®, and it's achieving remarkable results for children and their families. Thanks to the more than 7,500 of my colleagues from across the country who

have volunteered their time and expertise to make this optometry's most successful vision saving and lifesaving public health initiative, more than 80,000 babies have received a vision assessment at no cost from their local optometrist.

The NEI has funded several clinical trials in the area of children's vision. The VIP Study (Vision in Preschoolers) evaluated the best screening tests to identify preschool children in need of vision care for amblyopia ("lazy" eye), strabismus (crossed eyes) and significant refractive errors (e.g., nearsightedness or farsightedness). The CLEERE Study (Collaborative Longitudinal Evaluation of Ethnicity and Refractive Error) evaluated the role of ethnicity in children's vision conditions. The CITT Study (Convergence Insufficiency Treatment Trial) is studying the success rates of treatments for convergence insufficiency. The NEI budget should be sufficient to permit funding of grants at a high level in the areas of strabismus, amblyopia and refractive error. Since about 60 percent of Americans have refractive errors requiring eyeglasses or contact lenses, research in the cause and prevention of refractive error should continue.

The value of clinical research to the public cannot be overestimated. NEI has a remarkable record of scientific breakthroughs attributed to clinical trial research, beginning with studies of diabetic retinopathy in the 1970s. NEI clinical trials involve collaboration with many institutions, health professionals and thousands of patients. Although significant progress has been made, further clinical trial research is needed to determine the causes of refractive error and amblyopia in children and subsequent prevention of visual impairment.

Your support in funding the National Eye Institute (NEI) at \$711 million in FY2008, or a 6.7% increase over FY2007, would contribute significantly toward the achievement of these and other eye research goals.

Thank you.