

May 2, 2001

ON THE RETIREMENT OF LINDA M. JOHNSON

HON. STEPHEN HORN

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 2, 2001

Mr. HORN. Mr. Speaker, all of us here know and appreciate the important role that a strong and capable staff plays in accomplishing the work of the House. Obviously, the same is true throughout government and the private sector and that point will be well illustrated next week with a ceremony in Long Beach, California, to honor a person who has long been a quiet but crucial part of our community.

Linda M. Johnson will retire on May 11, after more than 35 years as assistant to the Executive Director of the Port of Long Beach. Across more than three decades of service, Linda has seen the Port grow from a modest operation next to the U.S. Navy base into one of the largest port complexes in the world. Today, the Port of Long Beach is the busiest port in North America with thousands of ships dropping off or picking up merchandise worth hundreds of billions of dollars. To meet the surge in global trade, the Port of Long Beach has been forced to adapt and expand, taking over the Navy shipyard and station and investing heavily in new docks, cranes, railyards and other infrastructure.

Throughout this period of enormous growth, Linda Johnson served as the strong right arm of the port director, managing the endless flow of correspondence, reports, meetings, telephone calls and everything else that goes with a thriving business that must operate under great pressure to meet the demands of global trade. Her quiet efficiency made her a vital partner in the port's management and her unfailing courtesy to coworkers and visitors made her a friend to one and all.

When Linda started at the port in 1965, she planned to work for a year and then go on to college. Instead, she ended up staying for a long, distinguished and rewarding career that has paid great dividends for the Port of Long Beach and our entire community. She will be missed but she will not be forgotten by all of those friends and colleagues who will gather on May 9 to wish her and her husband Bill the very best for a long, active and healthy retirement.

DOUBLING FUNDING FOR THE NIH

HON. GEORGE W. GEKAS

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, May 2, 2001

Mr. GEKAS. Mr. Speaker, I am pleased to report that the Congressional Biomedical Research Caucus, which we initiated in 1990 to increase awareness and support for basic biomedical research, has commenced its twelfth year of briefings. With my co-chairs, Representatives SONNY CALLAHAN, NANCY PELOSI, and KEN BENTSEN, and over 100 other Members, this bipartisan Caucus has provided nearly 100 briefings where Members and staff have interacted directly with the researchers

EXTENSIONS OF REMARKS

who lead the world in important scientific discoveries.

This year, we are strongly supporting the fourth step in doubling the budget of the National Institutes of Health over five years. We commend President George W. Bush for including a \$2.8 billion increase for the NIH in his FY2002 budget proposal. However, it is our hope that Congress can provide an increase of \$3.4 billion in order that the doubling commitment can be achieved within five years.

Why is this so important? What scientific evidence exists that such funding for the NIH will indeed result in better health, improved quality of life and reduction in national health care expenditures?

To answer these questions, in February we invited two distinguished biomedical research scientists to our Caucus to discuss "The Promise of Biomedical Research." First, Dr. Maxine Singer, President of the Carnegie Institution, clearly explained the need to support biomedical research infrastructure—instrumentation, facilities, information technology and strengthening science and mathematics education in primary schools.

Dr. Marc Kirschner, Chairman of the Department of Cell Biology at Harvard Medical School, was the second speaker and his comments follow this statement. We recall that in the magazine "Science" (1993), he, along with Drs. J. Michael Bishop and Harold Varmus, recommended that the NIH budget should be increased by 15% per year which would double the budget in five years. These scientists placed their reputations on the line, and I believe we can rely on them. These scientists were also part of a small group who helped us organize and conduct the Biomedical Research Caucus.

The attempt to double NIH funding actually began in 1997, with the initiative of Senators ARLEN SPECTER and TOM HARKIN along with Representative JOHN PORTER. We in the Caucus have continued to support these efforts since that time.

I believe that the clear and compelling remarks presented to the Congressional Biomedical Research Caucus by Dr. Singer and Dr. Kirschner will be helpful in our deliberations concerning this year's budget priorities.

TRANSCRIPT OF REMARKS BY MARC KIRSCHNER, PH.D., BEFORE THE CONGRESSIONAL BIOMEDICAL RESEARCH CAUCUS, FEBRUARY 28, 2001

Thank you for coming today. It is my hope and Dr. Singer's hope that all of you can become as knowledgeable as possible about medicine and science at the beginning of the 21st century. Science affects us in the present and in the future—our personal lives, our economic well-being and even our national defense against some fiendish new enemies. Medical issues often lurk beneath the surface and then explode like the AIDS epidemic, mad cow disease or hoof-and-mouth disease in Europe; new issues reach prominence in the news and confuse many of the public like genetic engineering of crops and stem cell biology. The chronic issues of cancer and heart disease and depression also remind us of our need for a better defense against disease. Planning in science often seems intuitively clear to scientists, and yet even for us the path is very convoluted. In my own experience, many years ago we discovered one of the major proteins that goes

awry in Alzheimer's disease—but we weren't working on Alzheimer's disease at the time; we were working on cell division and cancer. So I can understand that it is often difficult to understand what to do and what priorities to set. Science is complex. Every time I try to explain what I do to my wife and my mother, I have to start all over each time. But there is hope. My kids seem to understand much better. Yet despite these difficulties, progress in medicine is astonishing and it is very clear to all of us that our expectations for tomorrow should be considerable.

I will try to briefly review where we are and what we need and what you can do to help. Scientists in general have faith in rationality. We feel that if you understand the issues—the problems, the accomplishments, the needs and the true state-of-affairs in science that you and the American people will make the right decisions. It is for that reason that the goal of the Caucus has always been education. From that policies should naturally flow.

WHERE ARE WE?

February 12 was the announcement of the human genome sequence by an international consortium led by the United States and by private efforts built heavily on exploiting the openness and accessibility of that public investment. We now have a list of parts. Some people think that 30,000 is a small number, but this is completely misleading. We are really a gigantic Lego set with 30,000 different pieces, but the number of pieces is a million, billion, trillion—so we are pretty complicated—and the design of even the simplest organism is beyond our present understanding. We know some of our problems lie in faulty pieces—cystic fibrosis, sickle cell anemia, muscular dystrophy. Perhaps there are simple signals for adult onset diabetes and schizophrenia, but they are not likely to be single faulty pieces, maybe instead two or more pieces when they come together reinforce their weaknesses—we hope to learn that soon. Some are diseases of systems, such as rheumatoid arthritis and cancer. Some are foreign enemies—viruses and bacteria—AIDS and tuberculosis. Some things may be easy to figure out, some will turn out much harder than we think.

A few years ago, Alzheimer's disease seemed hopeless. There were no animal models. There was no convincing epidemiology—no smoking gun as we had in polio. It was a sporadic disease of late and variable onset. Today we have an exquisite idea of the cause and we have many promising targeted pharmaceutical interventions.

In some ways it now seems like it could be a relatively easy disease to treat. It can be diagnosed much earlier by MRI. Also, if it takes seventy years to appear—all we have to do is slow it down to 50% so the age of onset is 140. There are not many things where a two-fold change is a complete cure.

Well, I know that this is a Congress where the usual situation is to bring you problems that no one can solve. You have to work on those, too. But medical science is something that you can work on and have a big effect. You have an opportunity today that is more significant in many ways, but akin to the Eisenhower Interstate Highway Program of the 1950s. Like that program, the country can survive without it. But like that program, the effects are likely to be profound, with many long-term and unintended benefits. Whatever the state of the finances, today, the circumstances of science tells us that this is the time to invest. The progress in biomedical science will affect every person equally in this country and on our planet (if