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CONGRESSIONAL BRIEFING EMPHASIZES IMPACT OF COLLABORATION IN DIABETIC RETINOPATHY RESEARCH

Collaboration was the watchword at the September 19, 2006, Alliance for Eye and Vision Research (AEVR) Congressional briefing on the impact of research partnerships at the National Eye Institute (NEI) in the fight against diabetic retinopathy. The briefing, held in conjunction with the American Diabetes Association (ADA) and the Juvenile Diabetes Research Foundation International (JDRF), featured Dr. Thomas Gardner, a diabetes researcher and clinician from the Pennsylvania State University Milton S. Hershey Medical Center, a site within the Diabetic Retinopathy Clinical Research (DRCR) Network.



Cong. Gene Green (D-TX) introduces Dr. Gardner, who earlier that day met with Members from the Pennsylvania delegation, including Sen. Arlen Specter (R-PA) and Sen. Rick Santorum (R-PA).

The DRCR, funded by NEI in partnership with JDRF, is a collaboration of clinicians and researchers from different specialties throughout the nation and at the National Institutes of Health (NIH) who are combining their skills and assets to accelerate discoveries about the causes of diabetic retinopathy and to develop preventions, treatments and cures for this potentially blinding condition. NIH estimates that 21 million Americans have diabetes, and most of these individuals will experience vision problems related to this condition.

“The eye is a complex structure, so the collaborative nature of the Network enables it to quickly respond with basic and clinical research into the most promising new findings,” said Dr. Gardner, who added that, in its first four years, the Network has grown to include 545 experts at 163 clinical sites (many community-based) in 43 states seeing more than 1,700 patients—many of whom would not have otherwise had access to this care.

Dr. Gardner acknowledged that he understands diabetes and its consequences from a personal and professional perspective, due to both of his brothers having the disease. That personal experience with diabetes was also expressed by Cong. Gene Green (D-TX), who introduced Dr. Gardner. Cong. Green, a co-chair of the Congressional Vision Caucus and a member of the House Energy

and Commerce Committee with oversight over the NIH, represents a largely Hispanic district in which the incidence of diabetes and diabetic retinopathy is disproportionately high. Since the Committee was preparing for an afternoon hearing on an NIH reauthorization bill that would establish a “common fund” for collaborative research, he commented that, “It’s fitting that we’re here on this particular day, as I can’t emphasize trans-NIH research too much as a way to lift the disease burden on the American people. Disease doesn’t occur in isolation, nor should the research.”

The DRCR is just one of several networks which NEI has funded over the past 30 years in collaboration with the National Institute of Diabetes and Digestive and Kidney Disorders (NIDDK) to study diabetic retinopathy, which have resulted in treatments that have reduced blindness by 90 percent and save \$1.6 billion annually in healthcare costs. NEI has also collaborated with the National Cancer Institute (NCI) on research into factors that inhibit blood vessel growth in tumors that are now being applied to diabetic retinopathy and age-related macular degeneration (AMD) therapies. NEI collaborative research with the National Human Genome Research Institute (NHGRI) has resulted in the discovery of gene variants in the body’s inflammatory response associated with increased risk of AMD that may also relate to diabetic retinopathy.



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Information on the DRCR Network is available at www.DRCR.net.
An NEI-generated diabetic retinopathy fact sheet is available at <http://www.nih.gov/about/researchresultsforthepublic/>