NIA Alzheimer’s Disease Centers

Richard J. Hodes, M.D.
Director
National Institute on Aging

New Orleans, Louisiana

April 21, 2012
NIH/NIA Budget Update
Difference from FY2003

In Current Dollars: $109.1M Increase

In Constant Dollars: $206.7M Decrease

20.8% decrease FY2003-2013 Est

NIA Appropriations - FY12 Enacted, FY13 President’s Budget
Current versus Constant, FY03 Base Year

<table>
<thead>
<tr>
<th></th>
<th>FY03</th>
<th>FY04</th>
<th>FY05</th>
<th>FY06</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13 Est</th>
</tr>
</thead>
<tbody>
<tr>
<td>Series1</td>
<td>993.6</td>
<td>1,021.4</td>
<td>1,045.3</td>
<td>1,036.6</td>
<td>1,045.5</td>
<td>1,051.0</td>
<td>1,079.0</td>
<td>1,110.2</td>
<td>1,100.5</td>
<td>1,102.1</td>
<td>1,102.7</td>
</tr>
<tr>
<td>Series2</td>
<td>993.6</td>
<td>984.9</td>
<td>970.2</td>
<td>919.5</td>
<td>893.5</td>
<td>858.0</td>
<td>856.1</td>
<td>856.0</td>
<td>825.3</td>
<td>808.6</td>
<td>786.9</td>
</tr>
</tbody>
</table>
Proportion of Total NIH Budget, FY2011
RPGs are 51%

- Research Project Grants: 51%
- SBIR/STTR: 2%
- Research Centers: 10%
- Other Research: 6%
- NRSA: 2%
- R&D Contracts: 11%
- Intramural Research: 11%
- Research Management and Support: 5%
- Other than Common Fund, Buildings & Facilities: 0%

Proportion of Total NIA Budget, FY2011
RPGs are 64%

- Research Project Grants: 64%
- SBIR/STTR: 2%
- Research Centers: 8%
- Other Research: 3%
- NRSA: 2%
- R&D Contracts: 6%
- Intramural Research: 11%
- Research Management and Support: 4%
- Other than Common Fund, Buildings & Facilities: 0%
## NIA and NIH RPG Success Rates 2008 to 2011

<table>
<thead>
<tr>
<th></th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>NIH</td>
<td>21.8%</td>
<td>20.6%</td>
<td>20.6%</td>
<td>17.7%</td>
</tr>
<tr>
<td>NIA</td>
<td>20.4%</td>
<td>17.5%</td>
<td>14.5%</td>
<td>16.1%</td>
</tr>
</tbody>
</table>
NIH R01 Success Rates for FY2011
## NIA RPG Percentile Paylines
### 2011 and Estimated 2012

<table>
<thead>
<tr>
<th>Category</th>
<th>&lt;$500K</th>
<th>≥$500K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Established P.I.</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>Early Stage P.I. (R01 only)</td>
<td>16</td>
<td>13</td>
</tr>
<tr>
<td>Other New P.I. (R01 only)</td>
<td>14</td>
<td>11</td>
</tr>
</tbody>
</table>
Sequestration under the Budget Control Act (January 2, 2013)

- CBO estimate possible 7.8 percent cut or $2.4 billion
- Approximately 2,300 grants would not be awarded in FY 2013
- Across the board implications in terms of both basic and clinical science
- Represents almost a quarter of new and competing NIH grants and result in success rates for new applications or competing ones falling to historically low levels
Draft National Plan to Address Alzheimer’s released on February 22

Public Comment Period completed March 29

National Plan scheduled for release in late Spring 2012

http://aspe.hhs.gov/daltcp/napa/
Draft NAPA Goals

1. Prevent and/or effectively treat Alzheimer’s disease by 2025
2. Optimize care quality and efficiency
3. Expand patient and family support
4. Enhance public awareness and engagement
5. Track progress and drive improvement
Common Alzheimer’s Disease Research Ontology (CADRO) and AD Portfolio Analysis Project

National Institute on Aging
and the Alzheimer’s Association Collaboration
The Common Alzheimer’s Disease Research Ontology, or CADRO, is a three-tier classification system created to capture the complete range of AD research – (basic, translational and clinical) and AD research-related resources.

The first level of classification is organized around five broad research and two research resources-related categories:

- Category A – Molecular Pathogenesis and Physiology of Alzheimer’s Disease
- Category B – Diagnosis, Assessment and Disease Monitoring
- Category C – Translational Research and Clinical Interventions
- Category D – Epidemiology
- Category E – Care, Support and Health Economics of Alzheimer’s Disease
- Category F – Resources for the research community
- Category G – Consortia and Public Private Partnerships

Each category is divided into research “topics” and some of these topics are further divided into “themes”. Such level of detail can enable funders to identify research gaps, areas of duplication and opportunities for coordination with much greater specificity.
Alzheimer’s Disease Online Portfolio and Database

• Overview of database features:
  - Searchable with exporting capabilities for search results
  - Provides publicly accessible inventory of projects/grants
  - Provides distribution of projects, investigators and funding across categories, topics, and themes
  - Provides funding landscape over time (across categories, topics, and themes)
  - Links to funding and program announcements
  - Include links to domestic and international research funders

• Database Development Timeline – Anticipated Launch: May 2012 on NIA website
Alzheimer’s Disease Research Summit 2012: Path to Treatment and Prevention

May 14-15, 2012
National Institutes of Health
Bethesda, MD

Register online at: www.nia.nih.gov

View live Webcast at: http://videocast.nih.gov/
Responses to Draft National Plan
To Address Alzheimer’s Disease

NIA Alzheimer’s Disease Center directors Survey on developing a national plan for Alzheimer’s disease  Ronald C. Petersen, MD, PhD

Alzheimer’s Association Workgroup on NAPA’s Scientific Agenda for a National Initiative on Alzheimer’s Disease

http://www.alz.org/documents_custom/NAPA_for_feedback.pdf

Alzheimer's Disease and Dementia Leadership Council in partnership with New York Academy of Sciences One Mind for Research
NIH Alzheimer’s Disease Research Funding
FY 2012 and FY 2013

• FY2012: NIH will increase funds available for AD research by $50 million;

• FY 2013: Administration announced $80 million in new AD research monies from ACA Prevention and Primary Health Fund

• March 28, 2012: Senator Harkin announced at the Senate HHS hearing that he would not support use of ACA Prevention Funds for AD research