

# Science

## New advisory body needed to guide U.S. biomedical research policy, panel says

National Academy of Medicine report cites failure to address health inequities, life expectancy

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A blue-ribbon panel urges steps to bolster the U.S. biomedical research workforce. Sanjeri/Getty Images

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That’s one of several recommendations from a panel convened by the National Academy of Medicine (NAM) to look broadly across biomedical research in the U.S. “Now is the time to take bold steps to structurally improve the U.S. biomedical research enterprise, implement

efficiencies ... and break down silos,” says the [report](#), *The State of the U.S. Biomedical and Health Research Enterprise: Strategies for Achieving a Healthier America*.

The report finds the U.S. biomedical research funding system, which hasn’t changed much in 80 years, has had plenty of successes, from reducing deaths from cancer and AIDS to developing COVID-19 vaccines. But the U.S. faces new challenges, such as rising rates of obesity, declining life expectancy, and health threats from climate change. There are also “inexcusable health inequities” and “deaths of despair” such as drug overdoses and suicides. And biomedical research suffers from “fragmented funding” and a “lagging workforce.”

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he panel did not focus specifically on the National Institutes of Health (NIH), the nation’s biomedical research agency, unlike two recent reports from House of Representatives and Senate committees that include [some radical proposals](#) such as shrinking NIH’s 27 institutes to 15. There is “redundancy” at NIH, the panel says, but it is “coincidental” that its report comes out soon after those reform proposals, says its chair, Albert Reece, former dean of the University of Maryland School of Medicine. Although the report notes that other nations are rapidly increasing their investment in biomedical research, the panel does not make a plea for a bigger NIH budget, now more than \$47 billion.

Instead, the panel calls for better coordination of existing research dollars spent by the public and private sectors. “Let’s work on the money that already exists in our ecosystem,

but very much independently and separately and disaggregated, and let's pull it in a way that will be more responsive and much more effective," Reece says.

To do that, the report says, the president and Congress should create an advisory body to craft a "national strategic vision" for biomedical research across federal agencies, academic companies, and philanthropies. It would include a wide array of scientific expertise as well as patients and the public. Other countries and regions already do this, the report says, citing China, Singapore, and the European Union's Horizon Europe program.

The new advisory body would look for ways to coordinate biomedical research across sectors and fill gaps. For example, it could help guide a "funding collaborative" that would pool contributions from NIH, industry, philanthropy, and venture capital and direct it toward priorities identified by the new advisory board.

Those areas should include finding ways to bridge the "valley of death," or the gap between turning a basic discovery into a practical treatment, as well as what's known as the "last mile," or getting approved treatments to the patients who need them.

The panel also makes a pitch for federal research agencies to support more of what some call "convergence science," which brings biology together with physical sciences, math, engineering, and social science.

The report repeats familiar messages about the need to grow and diversify the domestic workforce. Those range from bolstering K-12 science education to boosting support for young investigators and helping postdocs become independent faster—areas NIH [is already working on](#). The report also calls for allowing foreign scientists on temporary visas to receive federal grants, part of [broader reforms to U.S. immigration policies](#) many experts say are needed to attract and retain more international scientists.

Unlike most NAM reports that are requested by Congress or a federal agency, NAM initiated and self-funded the study. That lack of a built-in audience could lessen its impact.

The report doesn't say where the new body would be located. Robert Cook-Deegan, a policy expert at Arizona State University, suggests the White House Office of Science and Technology Policy, which already houses the President's Council of Advisors on Science and Technology. PCAST routinely issues reports meant to help steer federal science policy, but the report doesn't explain how the new biomedical council might interact or compete with that presidentially appointed body.

Still, the report could add fuel to the NIH reorganization legislation pending in Congress. "The committee clearly thinks that the job can't be left to NIH internally," Cook-Deegan says. "And I agree that it's quite difficult for an agency to reform itself. Wise to use external analysis as leverage to effect change."

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