

# H.R. 1897, The Alzheimer's Breakthrough Act of 2011

## Background and Bill Summary

The Alzheimer's Breakthrough Act would require the Director of the National Institutes of Health (NIH) to accelerate the development of treatments that prevent, cure, or slow the progression of Alzheimer's disease and reduce the financial burden of Alzheimer's on federally funded programs and families. H.R. 1897:

- **Makes Alzheimer's research a priority at NIH**, by amending the Public Health Service Act to require the Director of the National Institutes of Health (NIH) to coordinate and focus all Alzheimer's research activities of NIH. This includes:
  - the establishment of a strategic Alzheimer's research plan to expedite therapeutic outcomes for individuals with or at risk for Alzheimer's; and
  - requiring NIH to submit to Congress budget estimates, without regard to the probability that such amounts will be appropriated, of the amounts required to carry out the adoption of this strategic plan.
- **Strengthens public-private partnerships**, through the requirement that NIH make available contracts, grants, or cooperative agreements to facilitate partnerships between public and private entities to execute the Alzheimer's research plan, support the development of diagnostic technologies and protocols, and develop and diffuse data sharing practices.
- **Expands the Alzheimer's Disease Center program** to include translational research and research into outcome measures.

## Status

HR 1897, the Alzheimer's Breakthrough Act of 2011, was introduced in the United States House of Representatives by Representative Christopher H. Smith [NJ-4] on May 23, 2011. After introduction, the bill was referred to the House Committee on Energy and Commerce, Subcommittee on Health on May 23, 2011.

The bill currently has [67 Cosponsors](#).

## Rationale/Talking Points

- The federal government has made significant commitments to combat diseases such as stroke, heart disease, HIV/AIDS and breast cancer. As a result, death rates from these diseases have declined.

- We are at a tipping point on Alzheimer's research. We have the ideas, the technology and the will. Now we need an appropriate commitment from the federal government.
- Deaths from Alzheimer's have increased 66 percent between 2000 and 2008. Today, 1 new person is diagnosed every 69 seconds.
- Over the next 40 years, caring for individuals with Alzheimer's will cost American society \$20 trillion –including \$15 trillion to Medicare and Medicaid.
- However, if a treatment became available in 2015 that delayed the onset of Alzheimer's disease for five years (treatment similar to the effect of anti-cholesterol drugs on preventing heart disease), it would cut Medicare and Medicaid spending on Alzheimer's nearly in half by 2050.
- The Alzheimer's Breakthrough Act is the cornerstone of improving Alzheimer's research at NIH. It will accelerate Alzheimer's research outcomes across all Institutes and Centers of the NIH — taking into account the research priorities identified by the National Alzheimer's Project Act (P.L. 111-375) plan. It will also create innovative public-private partnerships, and ensure that the NIH requests the funding necessary to get the job done.
- This bill would solve a great disparity in investment in research versus care. For every \$28,000 the federal government spends on care for Alzheimer's disease patients, it only spends \$100 on Alzheimer's disease research. Federal funding of Alzheimer's research is an inadequate \$450 million, and does not reflect the escalating national epidemic of Alzheimer's disease.
- This bill would advance breakthrough treatments for people living with Alzheimer's by requiring a strong federal commitment to Alzheimer's disease research.