Mr. Speaker:

I am deeply gratified that the Committee on Appropriations has agreed with my proposed amendment to increase appropriations for medical research. The Committee deserves credit for reviewing their earlier action and proposing an increase of $4 million.

I will vote for the amendment, even though it does not provide the full funds that should be provided. The Committee does not propose to increase the appropriation for support of research in arthritis, diabetes, and similar diseases. It does not provide funds to help in the construction of medical research laboratories. But the amendment moves us ahead, and that is my objective.

So long as I am a member of this House, I shall press the case for medical research until this Nation can rest assured that every competent medical investigator has the funds he needs to do his work, that we are providing the Nation with an adequate pool of highly trained scientists for the years ahead, and that the scientists are working in facilities that enable them to advance their research most effectively.

This, in a nutshell, is what I consider the only sound national medical research policy. It would provide a program to carry out President Eisenhower's broad statement in his Health Message to the Congress of January 18, 1954: "In such direct research programs, and in Public Health Service research grants to State and local governments and to private research institutions, lies the hope of solving
many of today's perplexing health problems.

I have fought consistently, over the past eight years, to give the people of this Nation the medical research they want and need—the medical research that is the only hope for millions of sufferers from cancer, heart disease, arthritis, epilepsy, cerebral palsy, mental disorders, and muscular dystrophy.

This has been a battle against timidity and ignorance.

Year after year, Presidential advice has prevailed upon the President to ask the Congress for medical research funds that have been consistently too low. This is where we have confronted timidity and limited vision. Time after time, I have urged the House to override these inadequate proposals, and the House on numerous occasions has done so. We are about to do so again. Through this series of actions, the House of Representatives has exercised real leadership in bringing into effect the most extensive and successful research attack on disease the world has ever seen.

We still have a long way to go, and the going will not be easy. The primary obstacle in the way of establishing a fully adequate national medical research program is ignorance.

I have had an exceptional opportunity over the past few years to discuss medical research at length with a wide cross-section of America’s leading scientists and research physicians. While I cannot claim to understand the technical aspects of medical research, I have
gained a profound respect for the complete and selfless dedication of these men, for their integrity, and for their competence, which will inevitably lead to a solution of today's baffling health problems. These men have taken the time to explain to me what is being accomplished and what the future may hold.

The significance of today's advances and of research possibilities has not been fully grasped by all the members of the House nor by the American people. Those who are poorly informed fail to interpret the advances of research in terms of the prevention of disability and death for themselves, their families and friends, their own communities. But those who have been privileged with me to hear the full story at first hand know how vast the problems of disease are and what opportunity lies at hand to improve the health of the Nation by a scientific approach. When the meaning of research is understood in terms of lives saved and misery and pain relieved, then support of medical research will be viewed as a completely non-partisan matter.

Failure to understand -- ignorance of the facts -- is more of a barrier to the establishment of a sound national program of medical research than is timidity. Ignorance of the facts is the major obstacle to improvement of our Nation's health.

What are the facts?

Let me mention a few concerning diseases of the nervous system, which afflicts to some degree one out of every eight Americans. Cerebral palsy
results in uncontrolled jerking of limbs and facial muscles, while leaving the reasoning functions of the brain at full strength. Epileptics are subject to what is known as seizures -- fits that may occur at rare intervals or several times a day. The intelligence of sufferers from epilepsy remains unimpaired, but they are denied the opportunity to work and use their minds because of their physical affliction. Muscular dystrophy causes muscles to wither and cease functioning. Multiple sclerosis belongs to this same general family of diseases. It is an obscure disease of the nervous system that appears gradually, progresses, and at times almost disappears. But over the long run, it disable and cripples as parts of the nervous system degenerate, leaving its victims ultimately helpless.

This is one of the diseases for which there is now no cure, and years of work may be required before the whole picture becomes clear. But meanwhile, research is being pushed ahead on a larger scale than at any time in our history. Five years ago, total research expenditures on this disease totalled $30,000; now the level is $300,000. Leads are developing. A team of scientists has been sent to Guam to determine precisely why a disease like multiple sclerosis -- Lou Gehrig's disease -- is 50 times more prevalent there than in this country. If they can find what it is in diet, environment or inherited characteristics of those people that makes them so susceptible, we may have a lead to the origins of this group of neurological diseases. I had a part in increasing the level of support for research on multiple sclerosis and the related diseases, and I intend to press
for further support as the work now in progress develops new clues and new approaches. By and large, the neurological diseases cripple and destroy the essence of life without killing their victims.

The plight of the victims of these diseases was made terribly clear to me in testimony over the years. The research story until recently has been one of spasmodic effort, lack of interest, and very slow progress. It was tremendously exciting to me, then, to hear in recent testimony before the Subcommittee that at last a break in the wall has been found. It was gratifying to me personally and as a member of Congress to find that this break-through developed in one of the Institutes recently established by Congress, and that it was made possible in part by the unusual combination of research talent and research facilities in which we have all had hand. I refer, of course, to the Clinical Center at the National Institutes of Health, which has been in operation less than a year.

There, in the Clinical Center, a research team of the National Institute of Neurological Diseases and Blindness has come up with an extremely promising lead in the research battle against epilepsy. There is reason to believe that the major defect in epilepsy is a chemical deficiency in the brain, and that epileptic seizures can be controlled by the replacement of this substance in the brain tissues in the affected area.
It will take time and money and patience to follow up this lead. Now, the members of Congress will be interested to know that the budget submitted to the Subcommittee did not contain sufficient funds to do this fully and rapidly. There followed, however, one of the gratifying experiences that can typify service on Congressional committees that deal directly with programs that touch the very heart of the American people.

I became acutely aware of the import of this work as it was described to us by Dr. Pearce Bailey, Director of the Neurological Institute. My interest spread to other members of the Subcommittee. As a direct result, the Committee report contains sizable additional funds for this Institute to prosecute these studies to the fullest extent, in order to bring the possible benefits of this research to the point of practical application without delay. For those of you who are essentially economy-minded, it should be said that if this single research finding is confirmed, the cost of the Clinical Center facility -- estimated at roughly $60 million -- may be repaid many times over. I know of no better illustration of the ways in which the Congress can work to assure the direction of Federal programs toward the public interest.

It became evident from the testimony of the same witness that the budget as submitted would permit no reasonable research effort in the whole field of blindness, although 300,000 Americans today are totally blind and an equal number are partially or almost totally so.
This serious omission was also rectified in part through an addition to that Institute's budget.

Such a pattern as I have just described was repeated over and over in the programs of the National Institutes of Health. As I probed into the testimony of each witness, and ascertained the facts that lay behind the budget presentations, I found in every case significant areas in which essential work was not being done because of a shortage of funds, and at the same time significant areas of research progress which confirmed my belief that the investment in medical research is good economy as well as good for the American people.

Another area highlighted in the testimony was atherosclerosis, the major form of hardening of the arteries. A great killer and disabler, atherosclerosis causes strokes, heart attacks, and much of the mental disturbance among older persons. Three quarters of a million deaths in 1950 resulted from cardiovascular diseases, and of these, approximately 75 percent were the direct or indirect result of this condition. The Heart Institute has conducted and supported significant studies implicating a fatty substance in the blood called Cholesterol, as a possible cause of atherosclerosis, and have found a complex called the "clearing factor" which seems very promising in its ability to facilitate the handling of fatty molecules in the blood stream.

As many of you know, diabetes can be controlled by insulin and diet in many cases, but there is a lot that needs to be done in research
laboratories before we have the knowledge to prevent or cure this disease. There are more than a million known diabetics in this country today. At the National Institutes of Health, important studies are already giving us new knowledge about how insulin acts, what happens to sugars and fats in the body, and how the disease may be related to the nervous system. Some new studies in the Clinical Center are concentrating on the influence of fat and carbohydrate levels of the diet in the prevention of a condition that leads to diabetic coma.

I do not need to tell you of the problem of major proportions that is represented by mental illness. About 50 percent of the patients resident in State mental hospitals suffer from the mental illness known as schizophrenia. Most of them come to the hospital at an early age; they stay an average of 10 years. When it is realized that the State hospitals care for 86 percent of the hospitalized mentally ill, you can see the magnitude of the tragedy reflected in these figures on schizophrenic patients. In the Clinical Center, the National Institute of Mental Health is making one of the first integrated research attacks on this problem in the whole United States. The Institute scientists have a promising lead in a drug known as lysergic acid, which produces in normal human beings a temporary condition comparable to that found in schizophrenia, permitting the disease to be studied under highly controlled conditions.
Arthritis and rheumatism, to cite another example, afflict approximately 10 million people in the United States. Rheumatoid arthritis, the most serious form, often leads to crippling deformities. The diagnosis of this disease is often difficult, but in the Clinical Center a test has been developed, based on the discovery that the blood of rheumatoid arthritis patients contains a substance that causes clumping of the red blood cells of sheep. Further work along these lines is needed if the test is to be made sufficiently accurate and practical for application in hospitals, clinics, or the office of the physician.

Another fact brought out by this testimony concerns the dreaded, fatal disease leukemia — cancer of the white blood cells. The cause of leukemia is entirely unknown. But scientists of the National Cancer Institute discovered recently that the thymus gland — a little-understood organ in the chest — may play an important role in leukemia development. Remove the thymus gland from mice that would ordinarily inherit leukemia, and the disease is retarded or prevented. Transplant thymic tissue from these mice to those of a leukemia-resistant strain, and the disease increases among the latter. This is only one of dozens of important clues that could lead to a major breakthrough in the cancer problem — with sufficient research support.

What is at stake here is literally a matter of life or death for hundreds of thousands of Americans — including some of us who are here today on the Floor of the House of Representatives.
I have tried to understand why some members of Congress have been reluctant to press aggressively for a sound national medical research program. This reluctance cannot be simply a desire for economy. Expenditures in medical research are a long-range but gilt-edged investment. They pay dividends in dollars at a rate beyond the comprehension of investment brokers. They pay dividends in human terms that are more important than dollars to the strength and permanent well-being of our Nation.

This reluctance is not a matter of politics. The health of the American people is not an area where conflicting partisan interests have a place. I am reminded that last year, the first Eisenhower budget for the National Institutes of Health was just over $65 million. As a result of House and Senate action, that was raised to $71 million. Clearly, the elected representatives of the people felt that increased support of medical research was in the public interest. I am reminded, too, that the total appropriation for this important and productive research program has increased steadily each year since 1946 — including the two years of the 80th Congress.

The reason for holding back on support of medical research can not come from fear of bigness in the Federal government. Federal support of medical research in the Nation's medical schools, universities and other non-Federal research centers has brought new vitality to research throughout the Nation. Substantial increases for the laboratories of the National Institutes of Health themselves have been concentrated
in two worthwhile areas. The first is expansion of the neglected field of neurology. The second, progress toward full use of the Nation's new and magnificent medical research laboratory -- the Clinical Center at the National Institutes of Health.

Finally, it is inconceivable to me that any of my colleagues could fail to support this vital health program simply because they are not particularly interested in the havoc caused by disease, one of our principal enemies from within.

The immediate question is support of the amendment to increase by $4 million the appropriation for the National Institutes of Health, so that it can increase its research grants by that amount for the research fight against cancer, heart disease, mental disorders, and neurological diseases.

The long-range question is not our willingness to accept this amendment, which I am sure we will adopt. The main question is whether we have the vision and courage to act boldly and consistently, year after year, to create the national medical research program worthy of this Nation and its people.

I, for one, will seize every opportunity to make such a program a reality.

I fought in the Committee for an additional $750,000 for research on epilepsy. I obtained an additional $400,000 for research on problems of blindness. I insisted that one million dollars be added to each of
the appropriations for research on heart disease, on cancer, on neurological diseases -- epilepsy, muscular dystrophy, multiple sclerosis, cerebral palsy -- and on mental disorders.

This is a skirmish in the campaign. It is an advance. It is not a large scale advance, but this is the way progress comes.

I will fight for advances year by year until every resource that can be brought to bear on the great battle is committed to the battle.