Mr. Chairman and Members of the Committee:

I am pleased to present the President's Fiscal Year 2013 Budget request for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) of the National Institutes of Health (NIH). The Fiscal Year (FY) 2013 budget includes $1,792,107,000, which is $2,798,000 below the comparable FY 2012 appropriation of $1,794,905,000. Complementing these funds is an additional $150,000,000 also available in FY 2013 from the Special Statutory Funding Program for Type 1 Diabetes Research. The NIDDK supports research on a wide range of common, chronic, costly, and consequential diseases and health problems that affect millions of Americans. These include diabetes and other endocrine and metabolic diseases; digestive and liver diseases; kidney and urologic diseases; blood diseases; obesity; and nutrition disorders.

## BUILDING NEW OPPORTUNITIES: BASIC RESEARCH DISCOVERIES

From in-depth exploration of fundamental biologic processes, NIDDK-supported scientists are achieving remarkable advances and building the foundation for previously unimaginable strategies to improve health and quality of life. Among these advances, recent NIDDK-supported research into genetic risk factors for diabetes, inflammatory bowel disease, obesity, liver disease, and the kidney disease focal segmental glomerular sclerosis, along with other studies are providing insights into disease development and whether an individual is likely9(li)0()-9(a)4(nc)4(e)]h other studie

designing novel intervention strategies and testing these in pre-clinical, laboratory models. For example, pursuing a treatment for fecal incontinence, researchers used tissue engineering to build muscle implants in mice with promising initial results, providing hope for future therapeutic use in people. Other scientists examined a potential drug for the rare disease Neimann-Pick type C in experiments with isolated human cells, and found encouraging results.

We will continue support for basic research across the Institute's mission, to gain further insights into health and disease and propel new ideas for interventions.

signs of complications; now, after an average 22-year follow-up, the researchers demonstrated that controlling blood glucose reduced the risk of developing kidney disease by 50 percent, preserving kidney function for decades. The first cystic fibrosis therapy targeting a specific molecular defect gained FDA approval. This important advance was a culmination of research supported in part by NIDDK, from the historic gene discovery (by the NIH Director) to clinical trials of the drug. With cutting-edge tissue engineering, researchers have successfully generated urethras to replace defective tissue and ameliorate urination difficulties in boys. A network of investigators found that vitamin E helps reduce fatty liver disease in children. In studies that may alert clinicians to patients with heightened need for intervention, scientists found that elevated levels of the hormone FGF-23

meet the challenge of obesity will be a consortium studying lifestyle interventions for overweight and obese pregnant women, to improve the health of both mother and child. The Institute will continue to support clinical studies for a range of liver diseases; for example, a multicenter research network is planning trials of different treatment strategies for hepatitis B, including comparative effectiveness research. Multiple efforts will pursue approaches to combat chronic kidney disease, polycystic kidney disease, primary glomerular disease, and other forms of kidney disease and injury. We have also spearheaded an initiative encouraging studies to prevent and tre-9( includdm6-4(e)4(s to p)-2

scientific minds. NIDDK supports summer research opportunities for underrepresented high school and college students, workshops for minority investigators and new investigators, a new initiative for professional societies to promote diversity in the research workforce, and other efforts. We will continue to support investigator-initiated projects, along with solicited research that is guided by input from expert researchers and the public.

## INTEGRATING SCIENCE-BASED INFORMATION INTO PRACTICE

We will also continue to support education, outreach, and awareness programs. These efforts include materials tailored for diverse audiences and span the range of diseases within our mission, to bring vital, science-based knowledge to health care providers, patients and their families, and the general public.

In closing, NIDDK's future research investments will build upon findings from past and ongoing studies, pursue promising new opportunities, and tackle critical challenges toward innovative and more effective prevention and treatment strategies. Our research will be guided by five principles: maintain a vigorous investigator-initiated research portfolio; support pivotal clinical studies and trials; preserve a stable pool of new investigators; foster research training and mentoring; and disseminate science-based knowledge through education and outreach programs.

**Griffin P. Rodgers, M.D., M.A.C.P.**

**Director, National Institute of Diabetes and Digestive and Kidney Diseases**

Dr. Griffin P. Rodgers was named Director of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) on April 1, 2007. He had served as NIDDK's Acting Director since March 2006 and was the Institute's Deputy Director from 2001-2009, including 2007-2009 in which he served in a dual role. Dr. Rodgers also has been chief of the Molecular and Clinical Hematology Branch since 1998; the