

Testimony on behalf of the

**FRIENDS OF NIDA COALITION**

Regarding the Fiscal Year 2007 Appropriation for the

**National Institute on Drug Abuse**

before the

United States Senate  
Committee on Appropriations

Subcommittee on Labor, Health and Human Services, Education and Related Agencies

The Honorable Arlen Specter, Chair

March 30, 2006

**C/O William L. Dewey, Chair  
Friends of NIDA  
Post Office Box 980613  
Richmond, VA 23298-0613**

# **FRIENDS OF NIDA**

William L. Dewey  
Friends of NIDA  
Post Office Box 980613  
Richmond, VA 23298-0613

## Executive Committee

William Dewey (Chair)  
College on Problems of  
Drug Dependence

Linda Crawford, Therapeutic  
Communities of America

Marie Dyak, Entertainment  
Industries Council, Inc.

Alexa Eggleston,  
Legal Action Center

Karen Freeman-Wilson,  
National Association of  
Drug Court Professionals

Andrew Kessler,  
NAADAC- The Association for  
Addiction Professionals

Eileen McGrath,  
American Society  
of Addiction Medicine

Robert Morrison,  
National Association of  
State Alcohol/Drug  
Abuse Directors

Geoffrey Mumford, American  
Psychological Association

Charles O'Keeffe, Virginia  
Commonwealth University

Richard Rosenthal,  
American Academy of Addiction  
Psychiatry

Sue Thau,  
Community Anti-Drug  
Coalitions of America

Tim Tunner, National  
Association of Social Workers

Mr. Chairman and Members of the Subcommittee:

The Friends of the National Institute on Drug Abuse (FoN), a burgeoning coalition of scientific and professional societies, patient groups, and other organizations committed to preventing and treating substance use disorders as well as understanding the causes and public health consequences of addiction, is pleased to provide testimony in support of the NIDA's extraordinary work. Pursuant to clause 2(g)4 of House Rule XI, the Coalition does not receive any federal funds.

Drug abuse is costly — to individuals and to our society as a whole. Smoking, alcohol abuse and illegal drugs cost this country more than \$500 billion a year, with illicit drug use alone accounting for about \$180 billion in health care, crime, productivity loss, incarceration, and drug enforcement. Beyond its monetary impact, drug and alcohol abuse tear at the very fabric of our society, often spreading infectious diseases and bringing about family disintegration, loss of employment, failure in school, domestic violence, child abuse, and other crimes. The good news is that treatment for drug abuse is effective and recovery from addiction is real for millions of Americans across the country. Preventing drug abuse and addiction and reducing these myriad adverse consequences is the ultimate aim of our Nation's investment in drug abuse research. Over the past three decades, scientific advances resulting from research have revolutionized our understanding of and approach to drug abuse and addiction.

NIDA supports a comprehensive research portfolio that spans the continuum of basic neuroscience, behavior and genetics research through applied health services research and epidemiology. While supporting research on the positive effects of evidence-based prevention and treatment efforts, NIDA also recognizes the need to keep pace with emergent problems. Research shows encouraging trends that NIDA's public education and awareness efforts are having an impact: For example, the 2005 Monitoring the Future Survey of 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders shows a dramatic 19% reduction in use since 2001. However, areas of significant concern remain. Some of NIDA's current research priorities include understanding more about methamphetamine and the brain, addressing the growing problem of prescription drug abuse, using drug abuse treatment to curtail the spread of HIV/AIDS, and encouraging collaborations that address comorbidity.

Because of the critical importance of drug abuse research for the health and economy of our nation, we write to you today to request your support for a 5 percent increase for NIDA in the Fiscal 2007 Labor, Health and Human Services, Education and Related Agencies Appropriations bill. That would bring total funding for NIDA in Fiscal 2007 to \$1,050,030,450. Recognizing that so many health research issues are inter-related, we also support a 5 percent increase for the National Institutes of Health overall, which would bring its total to \$30 billion for Fiscal 2007. This work deserves continuing, strong support from Congress. Below is a short list of significant NIDA accomplishments, challenges, and successes.

***Adolescent Brain Development -- How Understanding the Brain Can Impact Prevention Efforts.*** NIDA maintains a vigorous developmental research portfolio focused on adolescent populations. NIDA working collaboratively with other NIH Institutes has shown that the human brain does not fully develop until about age 25. This adds to the rationale for referring to addiction as a “developmental disease;” it often starts during the early developmental stages in adolescence and sometimes as early as childhood, a time when we know the brain is still developing. Having insight into how the human brain works, and understanding the biological underpinnings of risk taking among young people will help in developing more effective prevention programs. FoN believes NIDA should continue its emphasis on studying adolescent brain development to better understand how developmental processes and outcomes are affected by drug exposure, the environment and genetics.

***Medications Development.*** NIDA has demonstrated leadership in the field of medications development by partnering with private industry to develop anti-addiction medications resulting in a new medication, buprenorphine, for opiate addiction. FoN recommends that NIDA continue its work with the private sector to develop much needed anti-addiction medications, for cocaine, methamphetamine, and marijuana dependence.

***Co-Occurring Disorders.*** NIDA recognizes the need to adequately address research questions related to co-occurring substance abuse and mental health problems. In particular, NIDA has developed robust collaborations with other agencies (such as NIAAA, NIMH and SAMHSA) to stimulate new research to develop effective strategies and to ensure the timely adoption and implementation of evidence-based practices for the prevention and treatment of co-occurring disorders. Through these initiatives, NIDA is supporting research to determine the most effective models of clinically appropriate treatment and how to bring them to communities with limited resources. FoN recognizes the imperative for continued funding of essential research into the nature of and improved treatment for these complex disorders and endorses these efforts.

***Drug Abuse and HIV/AIDS.*** One of the most significant causes of HIV virus acquisition and transmission involves drug taking practices and related risk factors in different populations (e.g. criminal justice, pregnant women, minorities, and youth). Drug abuse prevention and treatment interventions have been shown to be effective in reducing HIV risk. FoN congratulates NIDA on its “Drug Abuse and HIV – Learn the Link” public awareness campaign, targeting young people, and believes NIDA should continue to support research that focuses on developing and testing drug-abuse related interventions designed to reduce the spread of HIV/AIDS.

***Emerging Drug Problems.*** NIDA recognizes that drug use patterns are constantly changing and expends considerable effort to monitor drug use trends and to rapidly inform the public of emerging drug problems. FoN believes NIDA should continue supporting research that provides reliable data on emerging drug trends, particularly among youth and in major cities across the country and will continue its leadership role in alerting communities to new trends and creating awareness about these drugs.

***Reducing Prescription Drug Abuse.*** NIDA research has documented continued increases in the numbers of people, especially young people, who use prescription drugs for non-medical purposes. Particular concern revolves around the inappropriate use of opioid analgesics – very powerful pain medications. FoN commends NIDA for its research focus in this area, and for the new Prescription Opioid Use and Abuse in the Treatment of Pain initiative. Research targeting a reduction in prescription drug abuse, particularly among our Nation’s youth, will continue to be a priority for NIDA.. Finally, FoN endorses NIDA’s programmatic research designed to further the development of medications that are less likely to have abuse/addiction liability, and to develop prevention and treatment interventions for adolescents and adults who are abusing prescription drugs.

***Reducing Methamphetamine Abuse.*** NIDA continues to recognize the epidemic abuse of methamphetamine across the United States. Methamphetamine abuse not only affects the users, but also the communities in which they live, especially due to the dangers associated with its production. FoN believes NIDA should continue to support research to address the broad medical consequences of methamphetamine abuse, and is encouraged by the evidence of treatment effectiveness in these populations. Topics of particular concern include: understanding the effects of prenatal exposure to methamphetamine, developing pharmacotherapies and behavioral therapies to treat methamphetamine addiction and information dissemination strategies to inform the public that treatment for methamphetamine addiction is effective.

***Reducing Inhalant Abuse.*** FoN recognizes that inhalant use continues to be a significant problem among our youth. Inhalants pose a particularly significant problem since they are readily accessible, legal, and inexpensive. They also tend to be abused by younger teens and can be highly toxic and even lethal. FoN applauds NIDA's inhalant research portfolio and believes NIDA should continue its support of research on prevention and treatment of inhalant abuse, and to enhance public awareness on this issue.

***Long-Term Consequences of Marijuana Use.*** NIDA research shows that marijuana can be detrimental to educational attainment, work performance, and cognitive function. However, more information is needed in order to assess the full impact of long-term marijuana use. Therefore, FoN recommends that NIDA continue to support efforts to assess the long-term consequences of marijuana use on cognitive abilities, achievement, and mental and physical health, as well as work with the private sector to develop medications focusing on marijuana addiction.

***Translating Research Into Practice.*** FoN commends NIDA for its outreach and work with State substance abuse authorities to reduce the current 15- to 20-year lag between the discovery of an effective treatment intervention and its availability at the community level. In particular, FoN applauds NIDA for continuing its work with SAMHSA to strengthen State substance abuse agencies' capacity to support and engage in research that will foster statewide adoption of meritorious science-based policies and practices. FoN encourages NIDA to continue collaborative work with state substance abuse agencies to ensure that research findings are relevant and adaptable by state substance abuse systems. NIDA is also to be congratulated for its broad and varied information dissemination programs as part of an effort to ensure drug abuse research is used in everyday practice. The Institute is focused on stimulating and supporting innovative research to determine the components necessary for adopting, adapting, delivering, and maintaining effective research-supported policies, programs, and practices. As evidence-based strategies are developed, FoN urges NIDA to support research to determine how these practices can be best implemented at the community level.

***Primary Care Settings and Youth.*** NIDA recognizes that primary care settings, such as offices of pediatricians and general practitioners, are potential key points of access to prevent and treat problem drug use among young people; yet primary care and drug abuse services are commonly delivered through separate systems. FoN encourages NIDA to continue to support health services research on effective ways to educate primary care providers about drug abuse; develop brief behavioral interventions for preventing and treating drug use and related health problems, particularly among adolescents; and develop methods to integrate drug abuse screening, assessment, prevention and treatment into primary health care settings.

***Utilizing Knowledge of Genetics and New Technological Advances to Curtail Addiction.*** NIDA recognizes that not everyone who takes drugs becomes addicted and that this is an important phenomenon worthy of further exploration. Research has shown that genetics plays a critical role in addiction, and that the interplay between genetics and environment is crucial. The science of genetics is at a crucial phase -- technological advances are providing the tools to make significant breakthroughs in disease research. For example, FoN believes NIDA should take advantage of new high-resolution genetic technologies which may help to develop new tailored treatments for smoking.

***Reducing Health Disparities.*** NIDA research demonstrates that the consequences of drug abuse disproportionately impacts minorities, especially African American populations. FoN believes that researchers should be encouraged to conduct more studies in this population and to target their studies in geographic areas where HIV/AIDS is high and or growing among African Americans, including in criminal justice settings.

***The Clinical Trials Network—Using Infrastructure to Improve Health.*** FoN applauds the continued success of NIDA's National Drug Abuse Treatment Clinical Trials Network (CTN), which was established in 1999 and has grown to include over 17 research centers or nodes spread across the country. The CTN provides an infrastructure to test the effectiveness of new and improved interventions in real-life community settings with diverse populations, enabling an expansion of treatment options for providers and patients. FoN suggests NIDA continue to develop ways to use the CTN as a vehicle to address emerging public health needs.

***Behavioral Science.*** NIDA has long demonstrated a strong commitment to supporting behavioral science research. FoN encourages NIDA to continue to determine the interplay of behavioral, biological, and social factors that affect development and the onset of diseases like drug addiction to understand common pathways that may underlie other compulsive behaviors such as gambling and eating disorders.

***Drug Treatment in Criminal Justice Settings.*** NIDA is very concerned about the well-known connections between drug use and crime. Research continues to demonstrate that providing treatment to individuals involved in the criminal justice system decreases future drug use and criminal behavior, while improving social functioning. Blending the functions of criminal justice supervision and drug abuse treatment and support services create an opportunity to have an optimal impact on behavior by addressing public health concerns while maintaining public safety. FoN strongly supports NIDA's efforts in this area, particularly the Criminal Justice Drug Abuse Treatment Studies (CJ-DATS), a multi-site set of research studies designed to improve outcomes for offenders with substance use disorders by improving the integration of drug abuse treatment with other public health and public safety systems.

***Social Neuroscience.*** Research-based knowledge about the dynamic interactions of genes with environment confirm addiction as a complex and chronic disease of the brain with many contributors to its expression in individuals. FoN applauds NIDA's involvement in the recently released "social neuroscience" request for applications, and encourages the Institute to continue its focus on the interplay between genes, environment, and social factors and their relevance to drug abuse and addiction.

***Translational Research: Ensuring Research is Adaptable and Useable.*** FoN commends NIDA for its broad and varied information dissemination programs. FoN also understands that the Institute is focused on stimulating and supporting innovative research to determine the components necessary for adopting, adapting, delivering, and maintaining effective research-supported policies, programs, and practices. As evidence-based strategies are developed, FoN urges NIDA to support research to determine how these practices can be best implemented at the State and community level.

***Blending Research and Practice.*** FoN notes that it takes far too long for clinical research results to be implemented as part of routine patient care, and that this lag in diffusion of innovation is costly for society, devastating for individuals and families, and wasteful of knowledge and investments made to improve the health and quality of people's lives. FoN applauds NIDA's collaborative approach aimed at proactively involving all entities invested in changing the system and making it work better. NIDA is leading efforts to make the best substance abuse treatments available to those who need them, and this effort requires working with many different contributors to assimilate their feedback and create change at multiple levels.

## **Conclusion**

The nation's investment in scientific research has changed the way people view drug abuse and addiction in this country. We now know how drugs work in the brain, their health consequences, how to treat people already addicted, and what constitutes effective prevention strategies. FoN asks you to provide an appropriation of \$1,050,030,450 for NIDA, so that it may continue to serve the public health of all Americans and capitalize on new opportunities as science advances.

We understand that the FY 2007 budget cycle will involve setting priorities and accepting compromise. However, in the current climate, we believe a focus on substance abuse and addiction, which according to the World Health Organization account for nearly 20 percent of disabilities among 15-44 year olds, deserve to be prioritized accordingly. We look forward to working with you to make this a reality.

Thank you, Mr. Chairman, and the Subcommittee, for your support for the National Institute on Drug Abuse.