

April 30, 2024

The Honorable Robert Aderholt
266 Cannon House Office Building
Washington, DC 20515

The Honorable Rosa DeLauro
2413 Rayburn House Office Building
Washington, DC 20515

The Honorable Tammy Baldwin
141 Hart Senate Office Building
Washington, DC 20510

The Honorable Shelley Moore Capito
170 Russell Senate Office Building
Washington, DC 20510

Dear Chairman Aderholt, Chairwoman Baldwin, Ranking Member DeLauro, and Ranking Member Capito:

On behalf of the undersigned organizations, representing kidney health professionals dedicated to improving patient care, thank you for your steadfast commitment to kidney health research and innovation. As you draft the Labor, Health and Human Services, Education and Related Agencies appropriations legislation for Fiscal Year (FY) 2025, we respectfully request you continue your commitment to kidney health research funding by providing \$51.303 billion for the National Institutes of Health (NIH), including a proportional robust funding increase for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) of no less than \$16.7 million. In addition, we urge you to build upon the successes of KidneyX in derisking innovation toward the bioartificial kidney by supporting the Advanced Research Project Agency for Health's (ARPA-H) investment in artificial organ development, including the kidney.

An estimated 37 million Americans are living with kidney diseases, including more than 800,000 with kidney failure. People who progress to kidney failure require either dialysis or a kidney transplant. Dialysis, the most common therapy for kidney failure, has a five-year mortality rate of 60 percent—worse than nearly all forms of cancer. Patients seeking a kidney transplant, the optimal therapy for most people with kidney failure, face a nearly 90,000 person-long waitlist, and the wait can be as long as 10 years in some areas of the country. As a result, 12 Americans die every day waiting for a kidney.

These statistics underscore why it is imperative for the federal government to increase its investment in kidney disease research and innovation. Despite this, the NIH consistently underfunds and undervalues kidney research, spending an estimated \$18.13 for each American with kidney diseases while spending \$305.57 per cancer patient. Further, from FY 2017-2021 NIH support for kidney research increased at half the rate of NIH funding increases overall. Increased investment in research and innovation is also important for reducing the cost of kidney health management. Medicare spends more than \$50 billion annually managing kidney failure, approximately 7% of all Medicare spending on only 1% of Medicare beneficiaries. Increased investment in research and innovation has brought better outcomes for people living with other diseases, Americans with kidney diseases should be afforded the same opportunity.

NIDDK funds the vast majority of federal research in kidney diseases, and despite the immense gap between the federal government's expenditures on kidney care and its investment in kidney research, NIDDK-funded scientists have produced several major breakthroughs in the past several years that require further investment to stimulate therapeutic advancements. For example, geneticists have made advances in understanding the genes that cause kidney failure, and the first medications to treat certain genetic kidney diseases are now in Phase III clinical trials. NIDDK has continued to invest in the Kidney Precision Medicine Project that will pinpoint targets for novel therapies—setting the stage for personalized medicine in kidney care. Finally,

building off groundwork laid by KidneyX, ARPA-H has included the kidney as a target for the Personalized Regenerative Immunocompetent Nanotechnology Tissue (PRINT) program with the goal of developing a process to bio-fabricate organs, including the kidney.

Additional sustained funding is needed to accelerate these and other novel opportunities to improve the care of patients with kidney disease and bring better value to Medicare. We urge you to provide no less than a \$16.7 million increase in funding for NIDDK and to support ARPA-H's initial investment in the development of bioartificial kidneys.

Thank you again for your leadership, and for your consideration of our request. Should you have any questions or wish to discuss ARPA-H, NIDDK, NIH, or kidney research and innovation in more detail, please contact Zach Kribs with the American Society of Nephrology at (202) 618-6991 or zkribs@asn-online.org.

Signed,

***American Nephrology Nurses Association
American Society of Nephrology
American Society of Pediatric Nephrology
Renal Physicians Association***