

The Advancing Cutting-Edge (ACE) Research Act *Introduced by Senators Alexander, Murray, Young, and Hassan*

Opioid addiction, which includes misuse of prescription painkillers, like hydrocodone and morphine, and illicit drugs like heroin, fuels the crisis that is taking thousands of lives in communities across the nation.

A Centers for Disease Control and Prevention (CDC) report cited 63,632 drug overdose deaths in 2016, 42,249 of which were related to opioid overdoses. CDC also estimates that 115 Americans die every day from an opioid overdose.

The National Institutes of Health (NIH) is supporting critical research to respond to this crisis. At several Senate hearings in 2017, Dr. Francis Collins, Director of NIH, requested more flexibility – known as other transaction authority (OTA) – to allow the agency to more quickly and efficiently fund research on new treatments for pain management and opioid addiction.

The ACE Research Act gives NIH a critical tool to help combat the opioid crisis by:

- Giving the Director of NIH more flexibility to approve high impact, cutting-edge research projects:
 - This means the Director of NIH will be able to more quickly and efficiently support research on new, non-addictive painkillers and other scientific advances that will help respond to the opioid crisis.
 - NIH will be able to more easily partner with innovative companies with cutting-edge technology to address the opioid crisis and other public health threats.
 - Any NIH center, institute, or office which the Director of NIH allows to use this authority would be subject to annual reporting requirements.

What NIH Director Dr. Francis Collins has said about the need for such legislation:

- *“From NIH’s perspective... the opportunity to move this (research on non-addictive medicine) forward with now full engagement with industry seems like something we just have to do. It would be great if we had a special way of very flexibly and rapidly funding research, something called other transaction authority. Something that we are using for the Precision Medicine Initiative with great benefit and which we don’t have at the present time for opioid use disorder research and working with companies we could go a lot faster if we had some relief from some of the otherwise limitations on how quickly we could fund something that needs to happen.”* —Senate Health, Education, Labor, and Pensions Committee Hearing: “The Federal Response to the Opioid Crisis” (October 5, 2017)
- *The critical solution for the future is to have alternatives for opioids for those who suffer from chronic pain, and there are 25 million of them in the United States right now who have pain every day. We need to have better alternatives, there are ways to get there with some exciting new drug targets that have emerged working with industry with a lot of contributions from NIH. We believe we can accelerate that process—particularly with OTA to help us and to be able to then have available to those people who have that kind of pain.”* — Senate Health, Education, Labor, and Pensions Committee Hearing: “Implementation of the 21st Century Cures Act: Progress and the Path Forward for Medical Innovation” (December 7, 2017)