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**Statement of Daniel Perry
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Before the U.S. House of Representatives

Energy and Commerce Subcommittee on Health

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Chairman Bilirakis, and Members of the Committee:

Thank you for the opportunity to come before this committee today to address the promise and perils surrounding cloning technologies.

As the head of a not-for-profit group eager to find cures, preventions and overall better health and vitality for the elderly, my views on research reflect the medical needs of the growing population of older Americans.

The Alliance for Aging Research works to stimulate academic, governmental and private sector research into the chronic diseases of human aging. Our organization takes up the cause of the vast majority of Americans who fervently wish to benefit from scientific discoveries that improve the human experience with aging. Our survey research tells us that most Americans believe the federal government has a critical role to play to prepare the way for new medical breakthroughs and to hurry applications of science in health care in order to relieve human suffering and improve the quality of life for their family members and for themselves.

On behalf of a growing American constituency for healthy aging -- powered by the aging of the Baby Boom generation - I am here to express a concern to the committee. The Alliance for Aging Research believes that broadly drafted legislation, intended to prevent the cloning of a human being, could have the effect of derailing promising lines of health research which could ultimately benefit older Americans, their families and the nation as a whole.

Every day in America another 6,000 people celebrate a 65th birthday. Just behind them, the Baby Boomers are cruising into their 50s in even greater numbers. In just 10 years the post World War babies will begin swelling the Medicare roles.

In less than 30 years, the whole of our largest generation will be old enough to receive health care paid by Medicare. If, during these years just ahead, we fail to reduce the threat of age-related diseases, the U.S. will encounter staggeringly high economic costs, as well as we will face a toll on human lives due to mounting deaths and disabilities from cancer, stroke, macular degeneration, joint and bone diseases, Alzheimer's and Parkinson's diseases.

If we stifle future medical breakthroughs, and must manage the aging of 75 million Baby Boomers with today's half-way health technologies, we risk economic and social catastrophe within a generation.

Fortunately, we can choose a wiser, more humane, and ultimately less costly alternative. That alternative is to encourage rapid advances and applications from medical and behavioral research to prevent much of the declining health status we now associate with old age.

There is good reason to hope that scientific understanding of the mechanisms of aging within our own cells, genes and proteins may ultimately permit a significant delay in disabilities caused by diseases of aging.

Regenerative medicine is the concept of harnessing powers of growth and healing within our own bodies at a fundamental level of human biology. We can look forward to future health technologies that use stem cells, engineered tissues, growth factors and other tools of regenerative medicine. It's a growing possibility that physicians one day will be able to replace damaged tissues, using a person's own cells to treat blindness, spinal cord injury, coronary artery damage, diabetes and other diseases that result from injured, malfunctioning or aged cells.

Scientists involved in this research say that human somatic cell nuclear transfer is an enabling technology that can be used to generate healthy cells and tissues for repair or replacement in a vast array of medical applications. To deny our aging population the opportunity to benefit from this research would be a tragic reversal of recent biomedical progress toward permanent cure of diabetes that compromise quality of life, and which account for so much of our nation's health care expenditures.

A prominent member of the Alliance's Science Advisory Board is Dr. George M. Martin of the University of Washington in Seattle. Dr. Martin has written: "those of us in the Alzheimer's Disease Research Center are using cell cultures in attempts to discover the fundamental molecular mechanisms that lead to differing rates of neuronal damage in dementias of the Alzheimer type and related disorders. For obvious reasons, we cannot work with samples of brain tissue from living subjects. We are forced to utilize surrogate cells, typically fibroblasts that can be grown from tiny skin biopsies. The ability to reprogram such cells so that they can exhibit the properties of the donor's neural cells would represent an enormous advance."

I want to make it abundantly clear that the Alliance for Aging Research is strongly opposed to the cloning of a human being. To my knowledge that position is supported by virtually every responsible scientific and health advocacy organization in the U.S. The Alliance does support responsible and sound biomedical research, including emerging cellular therapies, which could lead to the development of treatments or cures for scores of age-related diseases and disabilities.

We urge this committee to lead the way by drawing a clear distinction between cloning for human reproductive purposes - which we oppose - and cloning cells for human therapeutic purposes. Millions of patients and families, organizations and advocates for health and scientific research across the land would applaud that kind of leadership.

Some measures before this committee propose to avoid the cloning of a human being by bringing into the laboratory the full police of powers of the federal government. These intended anti-cloning proposals would criminalize laboratory techniques that otherwise might help us find cures for diseases such as cancer and Alzheimer's.

To threaten university scientists with massive fines and prison sentences would constitute a massive and unprecedented assault on research. It would cast a pall over the conduct of academic science. And it would diminish and contradict the accomplishments of a U.S. Congress that even now is working nobly to double research funding through the National Institutes of Health.

At this very moment, tens of millions of older Americans are suffering from Alzheimer's, Parkinson's, cancer, diabetes and chronic health problems of aging. Not only are they suffering, but their families and caregivers

are suffering too, and they are hoping that scientists will find cures for these devastating diseases and conditions while there is still time. They are in a hurry for answers, and they look to leaders like you to be their advocates and protectors.

Mr. Chairman, it is likely that we will continue to be confronted with scientific advances that pose difficult social and ethical questions. The present momentum in the life sciences, and the profound implications of what we are learning, will inevitably raise public concerns.

There is ample time for policymakers, ethicists, scientists, and patient groups to discuss options that would prevent human cloning, but which would preserve promising health research. Congress is at its best when its actions are informed and enriched by slow and careful debate, by advice from expert sources, and when taken in respect for minority opinion.

In the case of proposals to limit any of the tools for scientific and medical research, the need for prudence is especially important, due to the technical complexity of the issues and the consequences for public health and well being.

On behalf of the Alliance for Aging Research, I thank the committee again for its deliberations and for the opportunity to speak to this issue.