

# SCIENCE

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# LETTERS

## Funding of NIMH Extramural Research

The 6 May News & Comment article "Anxiety hits mental health institute" (p. 764) discusses "anxiety" in the National Institute of Mental Health (NIMH) intramural program about impending budget reductions, but it does not fully address the catastrophic low level of funding that is already devastating the NIMH extramural program. Two issues require clarification.

First, Rex Cowdry, the acting director of NIMH, is quoted as saying that "the success rate [of grants] is now hovering at 10% to 13%, roughly half last year's rate" (that is, 20 to 26%). The term "success rate" is a misleading index for research funding that lumps the investigator-initiated grants (RO-1's) with administrative decisions such as MERIT awards, which have funding rates of nearly 100%. Last year, the true level for funding of RO-1's was in the eighth to the tenth percentile. One-third of the grant applications are now eliminated from "further consideration" and are not included in the denominator.

This year, NIMH is telling investigators above the fifth to the eighth percentile range that they will not be funded. Thus, the true success rate for RO-1's at NIMH falls well below that at other institutes and is one-fourth the historical rates.

Second, while congressional earmarking of 15% of the NIMH research budget for "services research" may not appear onerous, this stipulation has drastically reduced funds available for new and competing renewals. Given the fact that less than 30% of the research budget is available for new and competing renewal grants and that services research, a new area, is underrepresented in continuing grants, it is the budget for new and competing renewal grants that has borne the brunt of the set-aside.

If this funding crisis for NIMH extramural research is not corrected soon, a substantial number of senior investigators and promising young investigators will be lost from the field of mental health research.

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## Polio in Russia

In the 9 July 1993 ScienceScope article "FDA to rescue Russian vaccine program" (p. 151), it is stated that "In the past few years polio epidemics have plagued the former Soviet Union, because, Russian officials suspect, of mishandling of the fragile polio vaccine. . . . The FDA [Food and Drug Administration] has begun supplying resources and advice to help reform outdated Russian vaccine standards."

My colleagues and I, who are professionally involved with disease surveillance, were surprised by these statements. They are refuted by the following official data from the Russian Federation Ministry of Health. The number of polio cases in Russia is reported to have been 11, 16, 17, and 10 for the years 1989 to 1992, respectively. This represents from 0.007 to 0.01 cases per 100,000 population (1). The staff of the Russian Federation State Committee for Sanitary and Epidemiologic Surveillance did not mention a polio problem in a review of the epidemiologic situation in the country in 1993 (2).

Despite current financial shortages, public health services continue to monitor the circulation of the polio virus (in wastewaters, for example). The resulting data indicate that the population has a sufficient level of immunity to the virus as a result of immunization. In short, there are no data to support claims of polio epidemics or insufficient vaccination in Russia. In contrast, for example, the rate of diphtheria incidence grew from 0.007 cases per 100,000 population in 1989 to 10.1 per 100,000 in 1993.

With so many real and serious health problems that require assistance in Russia, it is difficult to understand why the United States would assist with an unsubstantial problem. We need help in broad areas of medical care, but not with polio.

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## References

1. *Information Bulletin on Infectious Disease Rates in the RSFSR, 1990* (Ministry of Health, RSFSR, Moscow, 1991); *Information Bulletin on Infectious Disease Rates in the Russian Federation, 1992* (State Committee of the Russian Federation for Sanitary and Epidemiologic Surveillance, RSFSR, Moscow, 1993).
2. E. N. Beliaev and A. A. Prohoda, *Probl. Soc. Hyg.* (No. 1), 23 (1994).