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STATEMENT OF SENATOR SUSAN COLLINS

SENATE SPECIAL COMMITTEE ON AGING

"DIABETES RESEARCH: REDUCING THE BURDEN OF DIABETES AT ALL AGES AND STAGES"

Mr. Chairman, thank you for holding this hearing to examine how diabetes affects people of all ages, with a special focus on the estimated three million Americans with type 1 diabetes and their families. This is my seventh consecutive Children's Congress hearing, and I am grateful to the Chairman for allowing me to continue this tradition.

I also want to welcome our distinguished witnesses and the more than 160 delegates to the Children's Congress who have traveled to Washington to tell Congress what it's like to have diabetes, just how serious it is, and why it is so important that we fund the research necessary to find a cure.

I particularly want to give a special welcome to the delegate from Maine, 14-year old Quinn Ferguson of Poland Spring, who will be speaking on our panel.

As the founder and co-chair of the Senate Diabetes Caucus, I have learned a lot about this disease and the heartbreak that it causes for so many American families as they await a cure.

Diabetes is a life-long condition that does not discriminate. It affects people of every age, race and nationality. It is the leading cause of kidney failure, blindness in adults, and amputations not related to injury. It is also a major cause of nerve damage, heart disease and stroke.

Moreover, diabetes costs the United States an estimated \$245 billion a year and accounts for one out of every three Medicare dollars. Because of the serious complications associated with the disease, medical costs for Americans with diabetes are 2.3 times higher than those incurred by individuals without diabetes.

These statistics are overwhelming. But what really motivated me to devote so much energy to this issue is meeting more and more people – like our delegates today and their families – whose lives have been forever changed by diabetes. That is why it is so important that all of you have traveled to Washington today to tell your stories. You put a human face on the statistics. You help us to focus on what Congress can do to understand and ultimately conquer this terrible disease.

The burden of diabetes is particularly heavy for individuals with type 1 who face a lifetime of treatment and often physical complications. Usually diagnosed in childhood or adolescence, type 1 diabetes is a lifelong disease that one can never outgrow.

While often associated with children, the fact is that 85 percent of those living with type 1 diabetes are adults, and many of them are seniors. An average individual with type 1 will have to take more than 50,000 insulin shots or infusions over his or her lifetime. The discovery of insulin was a landmark breakthrough; however, it is not a cure for diabetes. People of all ages with type 1 diabetes face the constant threat of developing life-threatening complications, as well as a reduction in their quality of life.

Thankfully, there is some good news. Since I founded the Senate Diabetes Caucus, funding for diabetes research has more than tripled. As a consequence, we have seen some encouraging breakthroughs, and we are on the threshold of a number of important new discoveries.

Advances in technology, like continuous glucose monitors, are helping patients control their blood glucose levels, which is key to preventing diabetes complications.

We are also moving closer and closer to our goal of an artificial pancreas, which would revolutionize diabetes care. Recent advances also include the development of new treatments that can stop or even reverse complications such as some nerve damage and diabetic eye disease.

There is strong support in Congress for diabetes research funding, thanks in no small part to the grass-roots support provided by JDRF volunteers. Earlier this year, we passed legislation to extend the Special Diabetes Program – which provides \$150 million a year over and above the regular appropriation for type 1 diabetes research – for an additional year through September of 2014.

This important program represents more than a third of our federal commitment to diabetes research. As such, it is critical to our efforts to find better treatments, a means of prevention, and ultimately a cure for this devastating disease.