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By Asuka Koda



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spending cuts bill could lead to a loss of health insurance for 11 million people enrolled in Medicaid or Affordable Care Act coverage and jeopardize loans for half of medical students.

This is the first time in recent history when all three missions of academic medicine – research, education and patient care – are threatened, said Heather Pierce, the association's senior director for science policy. Typically, she said, when one is under fire, the others can compensate to ensure that health care is not compromised.

"This is the first time that all the missions of academic medicine simultaneously face these threats from our federal partners," Pierce said.

Should this trend continue, Pierce said, the United States will probably face a **physician shortage**, stagnation in scientific progress and a decline in the quality of medical care.

'We have a long way to go'

Academic health systems, which include medical schools and teaching hospitals, educate future physicians and investigate complex medical cases, treating the sickest patients. The new report says these institutions are also twice as likely as other hospitals to provide clinical services such as trauma

The report says patients treated at major teaching hospitals – where future health care professionals receive practical hands-on training – have up to **20% higher odds of survival** than those treated at non-teaching hospitals.

Funding cuts to these institutions have effects that trickle down to patients nationwide. The report noted that academic health systems conduct the majority of research funded by the US National Institutes of Health, and complex patient care is made possible only through extensive medical research.

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As of June, more than 1,100 NIH grants have been terminated since the beginning of the second Trump administration, according to the report. These include at least 160 clinical trials to study HIV/AIDS, cancer, mental health conditions, substance abuse and chronic disease.

people who have diseases that have no established therapies, trials may be their only option.

"We've made terrific progress in many diseases, but there are many diseases where we have a long way to go to be able to offer a newly developed treatment that we know can improve or lengthen their lives," Pierce said. "With those diseases, in many cases, the only way to try to move forward is with what scientists think are the very best potential treatments for those diseases."

Some of the clinical trials were terminated before their conclusion, which is unethical, she said.

"Halting a clinical trial before it ends at any point, even if all of the patients who are in the clinical trial finish their treatment, before data analysis has been done, before the results are released, renders that clinical trial less useful and less ethical," she said.

For example, the NIH funded the development of the <u>first artificial heart</u> <u>valve</u> with the first successful replacement at the NIH Clinical Center in 1960. Today, more than 100,000 heart valve replacements are performed each year. And a study also found that NIH funding contributed to research associated with <u>every new drug approved from 2010 to 2019.</u>

Physician shortage and declining quality of care

Each year, medical schools and teaching hospitals that are members of the Association of American Medical Colleges train about 77,000 residents nationwide, making these institutions the primary producers of primary care and specialty physicians. Medicare offsets a portion of the costs for the majority of trainees, and teaching hospitals fully cover the cost of training for the rest of the residents.

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immigration restrictions become more strict, the United States is becoming a less attractive place for students to pursue science, Pierce said.

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The nation has benefited from their longstanding global medical and scientific approach, she said.

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"There is information being shared between countries, people being trained all over the world," Pierce said. "The United States has always been the place where people want to come, trained to be scientists and trained to be physicians, and we have benefited from that."

United States to stay as the driver of innovation and science progress," Pierce said.

A physician shortage coupled with declining research investment leads to the suffering of patient care, she said.

"When the research stops, progress stops," Pierce said. "Scientific progress toward more treatment, towards more cures, towards a better quality of life, is all dependent on this ecosystem [of academic medicine] that is more intertwined than I think anyone realized."



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