

I am writing on behalf of the American College of Epidemiology. The American College of Epidemiology is a professional organization formally organized in 1979 to develop criteria for professional recognition of epidemiologists and to address their professional concerns. We represent epidemiologists throughout the U.S. and Canada, and a large proportion of our members are academic epidemiologists who submit grants to NIH for peer review.

We are writing this letter to oppose the recommendations of the Boundary Panel to assign grants related to the epidemiology of aging to non-epidemiologic study sections within the proposed Biology and Development of Aging (BDA) Integrated Review Group. The equity of the peer review system can only be insured by use of panelists with expertise to review the submitted applications. However, there is considerable evidence that non-epidemiologic study sections lack members with sufficient expertise to review epidemiologic studies and to give these applications a fair review. The area of aging covers many subject areas and scientific methodologies, most of which differ considerably from the methods of epidemiology. We are very concerned that epidemiologic studies would therefore be reviewed in study sections that include a large majority of members lacking knowledge of epidemiologic methods. As described, at best, the proposed panels within the BDA panels might include only a few members with epidemiologic expertise and they would be greatly outnumbered by bench scientists who are unfamiliar with epidemiologic studies and the epidemiologic method.

There are currently three epidemiology study sections that review epidemiological proposals across a range of content areas. These study sections include members with a broad range of disease expertise and they have successfully reviewed applications with fairness to the investigators. The resulting studies have made significant advances in many areas of scientific inquiry. It is the unique expertise of these existing committees that is required to review such proposals fairly. These proposals have been separated out, specifically to assure that the projects receive a fair review.

Proper and fair peer review requires that grants be reviewed by peers. If NIH seeks to support the best studies in Aging Epidemiology, and the best investigators in the field, it is critical that study sections with the expertise to understand epidemiology review the epidemiology grant applications. Our concern is that many grant applications would be treated unfairly if the Boundary Panel's recommendations for the BDA IRG are implemented as proposed. The result would be poor science. We are urging you to maintain the current status and epidemiology applications related to aging issues to the epidemiology study sections where they belong.