

118TH CONGRESS  
2D SESSION

# S. RES. \_\_\_\_\_

Recognizing the 75th anniversary of the National Institute of Dental and Craniofacial Research and its critical role in improving the dental, oral, and craniofacial health of the United States through research, training, and the dissemination of health information.

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## IN THE SENATE OF THE UNITED STATES

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Mr. CARDIN (for himself and Mr. BRAUN) submitted the following resolution;  
which was referred to the Committee on \_\_\_\_\_

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# RESOLUTION

Recognizing the 75th anniversary of the National Institute of Dental and Craniofacial Research and its critical role in improving the dental, oral, and craniofacial health of the United States through research, training, and the dissemination of health information.

Whereas, in 1948, Congress and President Harry S. Truman created the National Institute of Dental Research as a component of the National Institutes of Health (referred to in this preamble as “NIH”), in response to an epidemic of tooth decay that adversely affected the oral health, overall health, and military readiness of the United States;

Whereas, on October 21, 1998, Congress changed the name of the National Institute of Dental Research to the Na-

tional Institute of Dental and Craniofacial Research (referred to in this preamble as “NIDCR”) to accurately reflect the support of NIDCR for both dental and craniofacial research;

Whereas NIDCR is the primary dental, oral, and craniofacial biomedical and behavioral research and research training organization in the United States, advancing fundamental knowledge about dental, oral, and craniofacial health and disease, disease prevention, early detection, and treatment strategies to improve overall health for all individuals and communities across the lifespan;

Whereas NIDCR is recognized by Congress, the NIH, oral health stakeholders, and the biomedical research community as a leader of the oral health research enterprise of the United States that supports research funding, management, and scientific training across the United States;

Whereas NIDCR performs interdisciplinary research and translates results from the laboratory to the clinic, by means of scientific excellence in laboratory, clinical, behavioral, translational, and population-based programs in support of the mission of the NIH, which is the premier biomedical research agency in the world;

Whereas NIDCR responds urgently to critical public health needs such as the COVID–19 pandemic, providing over \$4,000,000 in fiscal year 2020 in grant supplements to study SARS–CoV–2, develop novel viral detection systems, and address critical needs of patients and oral health practitioners;

Whereas NIDCR collaborates with academic institutions, industry partners, and government agencies to disseminate information about discoveries to the public;

Whereas the researchers at NIDCR pioneered the use of epidemiology and preventive approaches to demonstrate that dental caries is an epidemic disease and community water fluoridation is a safe, effective, and economical way to prevent and reduce tooth decay;

Whereas NIDCR established—

(1) the Laboratory of Oral Medicine and the Laboratory of Microbiology and Immunology to conduct research on the causes, prevention, and treatment of periodontitis and other diseases of the soft tissues of the oral cavity;

(2) the Laboratory of Oral Biology and Physiology to conduct research on the cell biology of secretory tissues and proteins;

(3) the Mineralized Tissue Research Branch to investigate skeletal development and disorders;

(4) the Center for Integrative Biology and Infectious Diseases to investigate pain, tissue regeneration, oral cancers, autoimmune illnesses, salivary gland biology, and oral microbiota;

(5) the Center for Clinical Research to conduct clinical trials and practice-based research and to investigate clinical technologies, oral health disparities, and oral health for those with HIV/AIDS; and

(6) the National Oral Health Information Clearinghouse as a centralized public resource on oral health topics;

Whereas, in 2000, NIDCR established the NIDCR Patient Advocates Forum to enhance communication among patient groups and incorporate patient perspectives in research planning, and continues to maintain active engagement with the group;

Whereas NIDCR—

(1) launched the National Caries Program to prevent and reduce dental caries;

(2) created the Epidemiology and Oral Disease Prevention Program to investigate the national distribution of dental caries, periodontal diseases, and other oral diseases and disorders;

(3) launched the Research and Action Program to Improve the Oral Health of Older Americans and Other Adults at High Risk;

(4) established the first regional Dental Practice-Based Research Network, to investigate pressing clinical issues, including the association between bisphosphonates and osteonecrosis of the jaw, and methods for treating cracked teeth and tooth hypersensitivity; and

(5) launched the FaceBase Consortium to compile the biological instructions to build the human face and define the genetics underlying developmental disorders such as cleft lip and palate;

Whereas NIDCR—

(1) opened the first multidisciplinary pain clinic devoted exclusively to research;

(2) established major initiatives to support cutting-edge research on temporomandibular disorders (referred to in this preamble as “TMDs”);

(3) sponsored a technology assessment conference on the management of TMDs;

(4) launched the Orofacial Pain: Prospective Evaluation and Risk Assessment clinical study to examine risk factors that contribute to the development of TMDs;

(5) cosponsored the consensus study entitled “Temporomandibular Disorders: Priorities for Research and Care” to help inform approaches to advancing TMDs

research and guide the development of evidence-based treatment and clinical management of patients with TMDs;

(6) established a TMD Multi-Council Working Group to develop a roadmap to strengthen the understanding of TMDs; and

(7) launched the national TMD Collaborative for Improving Patient-Centered Translational Research to advance research, training, and improved clinical care;

Whereas NIDCR sponsored a variety of scientific conferences, including Face of a Child, the first national, multidisciplinary meeting on children and oral health, and a consensus development conference, Dental Implants—Benefit and Risk, to examine available data, suggest future research, and draft guidelines for implant therapy;

Whereas NIDCR has made strategic investments in all areas of dental, oral, and craniofacial research, which has led to many scientific advances, including development of novel nanocomposites and self-healing dental restorative materials, the Dental, Oral, and Craniofacial Tissue Regenerative Consortium, which was launched to develop methods for regenerating functional tissues of the human dental, oral, and craniofacial complex, and a NIDCR-sponsored symposium focusing on the Science and Development of Autotherapies;

Whereas, in 1999, NIDCR introduced its Strategic Plan to Reduce Racial and Ethnic Health Disparities, supporting research to end oral health disparities and increase research and clinical workforce diversity, then funded 5 Centers for Research to Reduce Oral Health Disparities,

which were among the first NIH centers focused on reducing health disparities;

Whereas, in collaboration with the Office of the Surgeon General, NIDCR supported the 2000 Oral Health In America: A Report of the Surgeon General, the first Surgeon General report dedicated solely to oral health, and, in 2021, released the Oral Health in America: Advances and Challenges report, examining progress on the oral health of the United States and serving as a national call to action;

Whereas NIDCR released the NIDCR Strategic Plan: 2021–2026, which—

(1) articulates the vision of the NIH and identifies investments designed to diminish disparities and yield the greatest impact for those with dental and oral diseases;

(2) expanded collaborations and partnerships to accelerate new discoveries, including examining the nerves in the jaw and temporomandibular joint as part of the Restoring Joint Health and Function to Reduce Pain Consortium;

(3) launched the Practice-based Research Integrating Multidisciplinary Experiences in Dental Schools, to expand research training into dental school clinics equipping future oral health practitioners with the knowledge to carry out research; and

(4) released the Advancement of Head and Neck Cancer Early Detection Research initiative to develop biomarkers and novel technologies for early detection of malignant cells in order to halt oral cancer progression; and

Whereas NIDCR looks to the future of biomedical science by continuing to support, discover, and develop cutting-edge

approaches to improve the dental, oral, craniofacial, and overall health of all people of the United States: Now, therefore, be it

1       *Resolved*, That the Senate—

2           (1) celebrates the 75th anniversary of the  
3       founding of the National Institute of Dental and  
4       Craniofacial Research (referred to in this resolution  
5       as “NIDCR”) and the critical role of NIDCR in ad-  
6       vancing biomedical and behavioral research and the  
7       mission of the National Institutes of Health, the  
8       premier biomedical research agency in the world;

9           (2) commends NIDCR for its work to address  
10       the COVID–19 pandemic by investigating the trans-  
11       missibility of SARS–CoV–2 in dental settings, study-  
12       ing oral viral entry and infection, methods to pre-  
13       vent transmission, replication, and shedding, and  
14       supporting the development of the most promising  
15       treatments and vaccines; and

16           (3) declares that NIDCR is a vital, venerable,  
17       and essential component of the National Institutes  
18       of Health and the overall public health and science  
19       strategy of the United States.