

Established in 2002, the **Garfield Economic Impact Award** annually recognizes outstanding research that illustrates how medical or health research impacts the economy. Founding support for the Garfield Economic Impact Award was provided by the **Eugene Garfield Foundation**. In 2008, the **University of Chicago Medical Center** became a sponsor, making it possible to double the value of the award and extend its impact and prominence. The award is named for Eugene Garfield, PhD, president and founding editor of *The Scientist*, creator of the Science Citation Index and a Research!America emeritus director.

CALL FOR NOMINATIONS

The 2010 Garfield Award will be presented in December 2010 in Washington, DC. Nominations are being accepted for the ninth annual award. The Award Committee will consider nominations received by close of business on June 4, 2010.

Nominations should include:

- a copy of the publication or thesis.
- A 200-word statement summarizing the reasons the work should be recognized—particularly describing how the work illustrates the economic benefits of medical and health research.

To be considered, the work must have been published or accepted for publication between January 1, 2004 and December 31, 2009.

To encourage growth of the field, the Garfield Award committee urges nomination of individuals early in their career. Self-nominations are welcome.

Please submit nomination materials to garfieldaward@researchamerica.org or by mail to:

Garfield Award Committee
Research!America
1101 King Street, Suite 520
Alexandria, VA 22314-2960

For more information, see www.researchamerica.org/economicimpact_award.

GARFIELD ECONOMIC IMPACT AWARD

ECONOMISTS DEMONSTRATE IMPACT OF RESEARCH

AMERICANS RECOGNIZE THAT SCIENTIFIC RESEARCH CONTRIBUTES to the economic strength of our communities and our nation. In a 2009 Research!America poll, 71% of Americans said that research to improve health is part of the solution to rising health care costs.* This impression is supported by a growing body of economic analysis. While the full picture of the economic value of research that improves health is still emerging, many of the nation's most respected economists are weighing in.

Since 2002, Research!America's Garfield Economic Impact Award has honored the outstanding work of one or more early-career economists. Over the years, Garfield awardees have become well recognized by their peers, policy makers and influential media.

June 4 Due date for 2010 award nominations. See back cover for details.

*Your Congress—Your Health Survey, June 2009. Charlton Research Company for Research!America.

2009



DARIUS N. LAKDAWALLA, PHD
DANA GOLDMAN, PHD
PIERRE-CARL MICHAUD, PHD
NEERAJ SOOD, PHD
ROBERT LEMPERT, PHD
ZE CONG
HAN DE VRIES
ITALO GUTIERREZ

*University of Southern California
and the RAND Corporation*

Lakdawalla and his co-authors explored ways to lower U.S. prescription drug prices without creating unintended consequences in cost to consumers, quality of life or future drug innovation. Their thought-provoking conclusions suggest the value of reduced drug copayments for consumers, as opposed to U.S. price controls, as a strategy to promote current use as well as future development of new pharmaceuticals.

“U.S. Pharmaceutical Policy in a Global Marketplace”
Health Affairs. 28, no. 1, January-February 2009.

2008

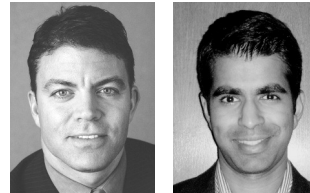


AMITABH CHANDRA, PHD
AND DOUGLAS O. STAIGER, PHD
Harvard University and Dartmouth College

Chandra and Staiger were honored for developing a groundbreaking model that could improve the translation of research to medical practice. Their model shows why new treatments that work in clinical trials do not always produce better outcomes for patients. Addressing productivity spillovers—where specializing in a new procedure can lead to existing treatments being used less effectively—could improve how research is translated into patient care.

“Productivity Spillovers in Health Care: Evidence from the Treatment of Heart Attacks,” *Journal of Political Economy*. Volume 115, Number 1, 2007.

2007



TOMAS J. PHILIPSON, PHD
AND ANUPAM B. JENA, PHD
University of Chicago, Harris School of Public Policy Studies

Philipson and Jena, both of the University of Chicago Harris School of Public Policy Studies, were honored for using a novel approach to measure the value of HIV/AIDS drugs developed from 1980 to 2000 and found their value to be nearly \$1.4 trillion. Yet only a small share of the “social surplus” created by patients living much longer, more productive lives was returned to the drugs’ innovators. This low rate of return, they argue, may reduce the incentive for future innovation in HIV/AIDS research, and could, by extension, discourage other avenues of health research.

“Who Benefits from New Medical Technologies? Estimates of Consumer and Producer Surpluses for HIV/AIDS Drugs” *Forum for Health Economics & Policy*. Volume 9, Issue 2, Article 3, 2006, (Biomedical Research and the Economy).

2006



AMY FINKELSTEIN, PHD, MPhil
Massachusetts Institute of Technology

Finkelstein, of the Massachusetts Institute of Technology, examined the effect of health policies designed to increase the use of existing vaccine technologies as incentive for research leading to new technologies. Finkelstein found these policies were associated with a 2.5-fold increase in development of new vaccine technologies.

“Static and Dynamic Effects of Health Policy,” *Quarterly Journal of Economics*. Volume 119, Issue 2, May 2004.

2005



KEVIN M. MURPHY, PHD
AND ROBERT H. TOPEL, PHD
University of Chicago Graduate School of Business

Murphy and Topel, of the University of Chicago Graduate School of Business, calculated a dollar value for the life expectancy gains produced by medical research. Murphy and Topel estimated that improvements in life expectancy alone, not considering improvements in quality of life, added \$2.6 trillion per year to national wealth between 1970 and 1998.

“The Economic Value of Medical Research,” *Measuring the Gains from Medical Research, An Economic Approach*. University of Chicago Press, Ch. 2, 2003.

2004



SHERRY A.M. GLIED, PHD
Columbia University

Glied, of Columbia University Mailman School of Public Health, received the award for her examination of various explanations behind the declines in fatal childhood injuries. She found that parents’ access to science-based information contributes significantly to lower child mortality and translates into annual savings of \$7 billion to \$16 billion. Glied’s work shows how the accumulation of scientific evidence stimulates better decision-making and improves outcomes for children.

“The Value of Reductions in Child Injury Mortality in the U.S.,” *Medical Care Output and Productivity*. University of Chicago Press, Ch. 13, 2001.

2003



DAVID CUTLER, PHD
Harvard University

Cutler, of Harvard University, outlined a novel way to measure the value of medical research and the public knowledge derived from it. Cutler showed the value of medical research in leading not only to new cardiovascular therapies but also to new information people can use in day-to-day health care decisions. Cutler estimated the return on investment for new medical treatments is about 4 to 1 and the return on health knowledge is about 30 to 1.

“The Return to Biomedical Research: Treatment and Behavioral Effects,” *The Economic Benefits of Medical Research*. University of Chicago Press, 2003, with S. Kadiyala.

2002



DAVID MELTZER, MD, PHD
University of Chicago

Meltzer, of the University of Chicago, developed a mathematical model to determine if a research approach is economically worth pursuing. His work showed that the model could be used both to prioritize research projects and to help identify when further spending on research might be expected to yield substantial returns.

“Addressing Uncertainty in Medical Cost-Effectiveness Analysis,” *Journal of Health Economics* 20, 2001.