

REMARKS OF SENATOR HUBERT H. HUMPHREY

NATIONAL KIDNEY FOUNDATION

New York, New York

November 22, 1975

I want to extend my thanks and those of Mrs. Humphrey to Dr. James Hunt, President of the National Kidney Foundation, for inviting us to your 25th annual meeting. This occasion is especially meaningful to me because of my long interest in health matters.

As you noted in your program, my Senate career began in 1949, about a year before your organization was founded. We've all come a long way since then. I won't recount my path -- it's familiar to most of you.

Rather, I'd like to join you tonight in paying tribute to the important role the Foundation and its members have played in providing hope for the thousands of Americans who have experienced kidney failure.

These achievements are punctuated by those honored here tonight -- Dr. Belding Scribner and Mr. Harold Schwartz -- and by the thousands of other physicians and lay volunteers who have devoted their time, their energies, and their talents to research on kidney and related diseases and to the work of the National Kidney Foundation.

Many of you remember the struggling agency formed by a small group of laymen and physicians in 1950 to help the thousands of children suffering from kidney disease.

Many of you were a part of the progress made in the 1960's when technological breakthroughs through painstaking efforts nearly eliminated nephrosis as a fatal disease.

Many of you will continue to be a part of the important work which remains to be done. The strides we have made in treatment cannot replace the need for developing a cure and in turn preventing the occurrence of the disease itself.

It was during the period of rapid strides in the treatment of kidney disease that we discovered the fight had just begun. New studies revealed that 60,000 Americans died each year of end-stage kidney disease and that perhaps as many as eight million people suffered from a kidney-related problem.

Kidney research in the United States has been primarily supported through the National Institutes of Health since the late 1950's. Like most biomedical research, its importance often is underrated and its support often wavering.

But the funds have grown gradually over the years and much progress has been made through the Artificial Kidney Program and research in transplantation.

Dialysis and transplantation -- new and effective therapies -- have been able to keep people alive. But they are frightfully expensive and people have died for lack of money and facilities.

Many thousands of unfortunate Americans who have experienced kidney failure have been helped through amendments to Medicare which provide financial assistance. The renal disease program has meant life itself to untold numbers of Americans, and has given hope to countless families who had faced only despair.

But no matter how much assistance is provided for dialysis, a crucial limiting factor in such programs is the available supply of donor organs. This limitation will become a major barrier as the number of people requiring treatment significantly increases.

To meet this need we must develop a logical network and public information system necessary for a national transplant effort.

I am aware of many outstanding programs which further the recruitment of kidney donors and carry out an effective organ recovery program. Symposia, attitudinal surveys, innovative efforts at community and consumer education, and media follow-up are all part of the many efforts of the Foundation and its volunteers to provide information and help patients make the many personal adjustments necessary to cope with this disease.

We need to keep working to heighten public awareness of this "gift of life."

Equally important to successful transplantation is a better understanding of the body's rejection process. New inroads must be made in immuno-suppressant therapy.

We also need to provide greater focus on the treatment of kidney disease by establishing centers of excellence throughout the country around which financial and human resources can be marshalled. We need to provide greater incentives for skilled surgeons who perform the transplants and monitor the patients' recovery.

But the struggle is far from over. Treatment in all too many cases is a stop-gap measure. In all too many cases it is not yet the cure.

People still are getting kidney disease and still dying from it. Until a cure is found -- even when a cure is found -- prevention is the only rational answer for this disease and all others.

Money and efforts devoted to prevention and cure will reap dividends many times over the investment. More and more we are understanding that a healthy man is a productive one -- one who will earn and return many more dollars than a sick one. A healthy child is our investment in the future.

We are just beginning to understand the cause-effect relationship of the various major diseases. Serious kidney disease has a far-reaching impact on the body in general.

A kidney cure will have residual effects on the occurrence of heart disease, diabetes, diseases of the urinary tract and other major diseases. Progress made in preventing and controlling these diseases will have untold effects on those suffering from kidney disease and in preventing the disease itself.

Increased public awareness of the importance of early detection can avoid this and other catastrophic illnesses.

The cost of disease in one week is a great deal more than the budget of HEW will be in a year.

But more than dollars and cents, we need to look at the human toll that disease takes -- the suffering of the afflicted, the anguish of loved ones.

We must explore and chart and develop the undiscovered. Research always is a process of discovery.

You never know whether you are going to find an answer. But you do know this -- that without the research you are not going to make any progress.

Ralph Waldo Emerson wrote:

"The first wealth is health. Sickness is poor spirited, and cannot serve any one; it must husband its resources to live. But health or fulness answers its own ends, and has to spare, runs over, and inundates the neighborhoods and creeks of other men's necessities."

We need to remember that our efforts here often "inundate the neighborhoods and creeks of other men's necessities."

The United States is the leading exporter in biomedical knowledge. Other people from all over the world come to us to learn and take back the knowledge that you and I as taxpayers help to develop through our continued support of programs such as those at NIH and its associated organizations.

These efforts to eradicate disease have been fruitful. We have just learned that with few exceptions smallpox is non-existent worldwide. And there is a long list of other diseases on the wane.

All this is enhanced and made possible through appropriate support and funding coupled with the continuing efforts of individuals such as yourselves and organizations like the National Kidney Foundation.

But we need to work together as a partnership. The day of the cornucopia approach to solving problems is over. The system relies heavily on experts and concerned citizens such as yourselves to help set priorities, to continually examine the results, to realign these priorities as progress is made, and to look to the future.

In your work I ask all of you to keep in mind the wisdom of the old proverb which says:

"He who has health, has hope.  
He who has hope, has everything."

In the coming of this Bicentennial year you might also remember that through your future efforts you will be making a major contribution to helping many people exercise their rights of life, liberty and the pursuit of happiness.

# # # # #

- <sup>James</sup> Mr Hunt - President (Duane)
- Chairman Jordan Rangel & Judy
- Past Pres. Dr Becker

REMARKS OF SENATOR HUBERT H. HUMPHREY

Jack Kent - <sup>Trinnie</sup> Chr. Elect

NATIONAL KIDNEY FOUNDATION

Mr Edwards - former ASST Sec HEW  
 NEW YORK, NEW YORK  
Mr Theodore Cooper ASST Sec for Health

NOVEMBER 22, 1975

Noisy as Democ.

Mr Scribner  
 1964 - gave  
Presidential  
Address

L I WANT TO EXTEND MY THANKS AND THOSE OF MRS. HUMPHREY TO  
DR. JAMES HUNT, PRESIDENT OF THE NATIONAL KIDNEY FOUNDATION,  
+ to Irene also  
FOR INVITING US TO YOUR 25TH ANNUAL MEETING. ( THIS OCCASION

IS ESPECIALLY MEANINGFUL TO ME BECAUSE OF MY LONG INTEREST

IN HEALTH MATTERS care - starting with Pharmacy.

L AS YOU NOTED IN YOUR PROGRAM, MY SENATE CAREER BEGAN IN  
1949, ABOUT A YEAR BEFORE YOUR ORGANIZATION WAS FOUNDED. ( WE'VE  
ALL COME A LONG WAY SINCE THEN. But I WON'T RECOUNT MY PATH -- IT'S  
FAMILIAR TO MOST OF YOU,

L == RATHER, I'D LIKE TO JOIN == YOU TONIGHT IN PAYING == TRIBUTE TO  
THE == IMPORTANT == ROLE THE == FOUNDATION AND ITS MEMBERS HAVE PLAYED  
IN PROVIDING == HOPE FOR THE THOUSANDS OF AMERICANS WHO HAVE  
EXPERIENCED KIDNEY FAILURE. Yes, tonight we

Celebrate 25 years of progress -  
Progress in Research - in Treatment and in  
DONORS.

↳ THESE ACHIEVEMENTS ARE PUNCTUATED BY THOSE HONORED HERE  
TONIGHT -- DR. BELDING SCRIBNER AND MR. HAROLD SCHWARTZ -- AND  
BY THE THOUSANDS OF OTHER PHYSICIANS AND LAY VOLUNTEERS WHO  
HAVE DEVOTED THEIR TIME, THEIR ENERGIES, AND THEIR TALENTS TO  
RESEARCH ON KIDNEY AND RELATED DISEASES AND TO THE WORK OF THE  
NATIONAL KIDNEY FOUNDATION.

↳ MANY OF YOU REMEMBER THE STRUGGLING AGENCY FORMED BY A  
SMALL GROUP OF LAYMEN AND PHYSICIANS IN 1950 TO HELP THE  
THOUSANDS OF CHILDREN SUFFERING FROM KIDNEY DISEASE.

↳ MANY OF YOU WERE A PART OF THE PROGRESS MADE IN THE  
1960'S WHEN TECHNOLOGICAL BREAKTHROUGHS THROUGH PAINSTAKING  
EFFORTS NEARLY ELIMINATED NEPHROSIS AS A FATAL DISEASE.

*nephrosis*



*and*  
MANY OF YOU WILL CONTINUE TO BE A PART OF THE IMPORTANT  
WORK WHICH REMAINS TO BE DONE. (THE STRIDES WE HAVE MADE  
IN TREATMENT CANNOT REPLACE THE NEED FOR DEVELOPING A CURE  
AND IN TURN PREVENTING THE OCCURRENCE OF THE DISEASE ITSELF.

(IT WAS DURING THE PERIOD OF RAPID STRIDES IN THE  
TREATMENT OF KIDNEY DISEASE THAT WE DISCOVERED THE FIGHT  
HAD JUST BEGUN. (NEW STUDIES REVEALED THAT 60,000 AMERICANS  
DIED EACH YEAR OF "END-STAGE" KIDNEY DISEASE AND THAT PERHAPS  
AS MANY AS EIGHT MILLION PEOPLE SUFFERED FROM A KIDNEY-RELATED  
PROBLEM.

(KIDNEY RESEARCH IN THE UNITED STATES HAS BEEN PRIMARILY  
SUPPORTED THROUGH THE NATIONAL INSTITUTES OF HEALTH SINCE  
THE LATE 1950's. (LIKE MOST BIOMEDICAL RESEARCH, ITS  
IMPORTANCE OFTEN IS UNDERRATED AND ITS SUPPORT OFTEN WAVERING.

Your Program

Soc Sec  
Amend 1972  
HRI

"Chronic Renal Disease  
is considered to constitute  
disability"

Rehabilitation Act of 1973

Authorized a "Program for  
end-stage Renal Disease  
Research"

Federal law made Dialysis  
& Transplant patients  
eligible for Assistance  
in defraying the staggering  
cost of treatment.



When Federal funding has been reduced,  
the Foundation has extended generous funding  
for Post Doctoral Research Grants.

BUT THE FUNDS HAVE GROWN GRADUALLY OVER THE YEARS AND

MUCH PROGRESS HAS BEEN MADE THROUGH THE "ARTIFICIAL KIDNEY

PROGRAM AND RESEARCH IN TRANSPLANTATION.

DIALYSIS AND TRANSPLANTATION -- NEW AND EFFECTIVE

THERAPIES -- HAVE BEEN ABLE TO KEEP PEOPLE ALIVE. BUT THEY

ARE FRIGHTFULLY EXPENSIVE AND PEOPLE HAVE DIED FOR LACK OF

MONEY AND FACILITIES.

*Here is where we need your  
persistent efforts with the  
Congress.*

MANY THOUSANDS OF UNFORTUNATE AMERICANS WHO HAVE

EXPERIENCED KIDNEY FAILURE HAVE BEEN HELPED THROUGH ~~AMENDMENTS~~

TO MEDICARE WHICH PROVIDES FINANCIAL ASSISTANCE. THE RENAL

DISEASE PROGRAM HAS MEANT LIFE ITSELF TO UNTOLD NUMBERS OF

AMERICANS, AND HAS GIVEN HOPE TO COUNTLESS FAMILIES WHO HAD

FACED ONLY DESPAIR.

*(See opposite Page)*

*Catastrophic  
expenses  
insurance*

✓ BUT NO MATTER HOW MUCH ASSISTANCE IS PROVIDED FOR DIALYSIS,  
A CRUCIAL LIMITING FACTOR IN SUCH PROGRAMS IS THE AVAILABLE  
SUPPLY OF DONOR ORGANS. { THIS LIMITATION WILL BECOME A MAJOR  
BARRIER AS THE NUMBER OF PEOPLE REQUIRING TREATMENT  
SIGNIFICANTLY INCREASES.

✓ TO MEET THIS NEED WE MUST DEVELOP A LOGICAL NETWORK AND  
PUBLIC INFORMATION SYSTEM NECESSARY FOR A NATIONAL TRANSPLANT EFFORT.

✓ I AM AWARE OF MANY OUTSTANDING PROGRAMS WHICH FURTHER THE  
~~the donors license donation program~~  
RECRUITMENT OF KIDNEY DONORS AND CARRY OUT AN EFFECTIVE ORGAN

RECOVERY PROGRAM. { SYMPOSIA, ATTITUDINAL SURVEYS, INNOVATIVE

EFFORTS AT COMMUNITY AND CONSUMER EDUCATION, AND MEDIA

FOLLOW-UP ARE ALL PART OF THE MANY EFFORTS OF THE FOUNDATION

AND ITS VOLUNEERS TO PROVIDE INFORMATION AND HELP PATIENTS

MAKE THE MANY PERSONAL ADJUSTMENTS NECESSARY TO COPE WITH THIS  
DISEASE.

I learned that through the efforts  
of the Foundation and its Volunteers  
over 12 million <sup>more</sup> cards have  
been distributed - and  
in several States legislation  
has been adopted placing the Organ  
Donor Card on the State Drivers  
License - + more to come

WE NEED TO KEEP WORKING TO HEIGHTEN PUBLIC AWARENESS OF  
THIS "GIFT OF LIFE."

EQUALLY IMPORTANT TO SUCCESSFUL TRANSPLANTATION IS A  
BETTER UNDERSTANDING OF THE BODY'S REJECTION PROCESS.

INROADS MUST BE MADE IN IMMUNO-SUPPRESSANT THERAPY.

WE ALSO NEED TO PROVIDE GREATER FOCUS ON THE TREATMENT  
OF KIDNEY DISEASE BY ESTABLISHING CENTERS OF EXCELLENCE

THROUGHOUT THE COUNTRY AROUND WHICH FINANCIAL AND HUMAN  
RESOURCES CAN BE MARSHALLED.

INCENTIVES FOR SKILLED SURGEONS WHO PERFORM THE TRANSPLANTS  
AND MONITOR THE PATIENTS' RECOVERY.

THE STRUGGLE IS FAR FROM OVER. TREATMENT IN ALL TOO  
MANY CASES IS A STOP-GAP MEASURE. IN ALL TOO MANY CASES IT IS  
NOT YET THE CURE.

PEOPLE STILL ARE GETTING KIDNEY DISEASE AND STILL DYING  
FROM IT. *and* UNTIL A CURE IS FOUND -- EVEN WHEN A CURE IS FOUND --

PREVENTION IS THE ONLY RATIONAL ANSWER FOR THIS DISEASE AND ALL  
OTHERS.

MONEY AND EFFORTS DEVOTED TO PREVENTION AND CURE WILL REAP  
DIVIDENDS MANY TIMES OVER THE INVESTMENT. MORE AND MORE WE

ARE UNDERSTANDING THAT A HEALTHY *person* IS A PRODUCTIVE ONE -- ONE

WHO WILL EARN AND RETURN MANY MORE DOLLARS THAN A SICK ONE *and*

*a* HEALTHY CHILD IS OUR INVESTMENT IN THE FUTURE.

*and* WE ARE JUST BEGINNING TO UNDERSTAND THE CAUSE-EFFECT

RELATIONSHIP OF THE VARIOUS MAJOR DISEASES. SERIOUS KIDNEY

DISEASE HAS A FAR-REACHING IMPACT ON THE BODY IN GENERAL.

L A KIDNEY CURE WILL HAVE RESIDUAL EFFECTS ON THE OCCURRENCE  
OF HEART DISEASE, DIABETES, DISEASES OF THE URINARY TRACT  
AND OTHER MAJOR DISEASES. <sup>and,</sup> PROGRESS MADE IN PREVENTING AND

CONTROLLING THESE DISEASES WILL HAVE UNTOLD EFFECTS ON THOSE

SUFFERING FROM KIDNEY DISEASE AND IN PREVENTING THE DISEASE

ITSELF. —

*Research + Treatment are all  
interrelated.*

L INCREASED PUBLIC AWARENESS OF THE IMPORTANCE OF EARLY  
DETECTION CAN AVOID THIS AND OTHER CATASTROPHIC ILLNESSES.

L THE COST OF DISEASE <sup>is staggering</sup> ~~IS ONE WEEK'S WAGES TO A GREAT DEAL MORE THAN~~  
~~THE BUDGET OF NEW WELFARE IN A YEAR.~~ <sup>for an entire year</sup>

L BUT MORE THAN DOLLARS AND CENTS, WE NEED TO LOOK AT THE  
HUMAN TOLL THAT DISEASE TAKES -- THE SUFFERING OF THE AFFLICTED,  
THE ANGUISH OF LOVED ONES.

L WE MUST EXPLORE AND CHART AND DEVELOP THE UNDISCOVERED.

RESEARCH ALWAYS IS A PROCESS OF DISCOVERY.

L YOU NEVER KNOW WHETHER YOU ARE GOING TO FIND AN ANSWER.

BUT YOU DO KNOW THIS -- THAT WITHOUT THE RESEARCH YOU ARE NOT  
GOING TO MAKE ANY PROGRESS.

L RALPH WALDO EMERSON WROTE:

"THE FIRST WEALTH IS HEALTH. L SICKNESS IS POOR SPIRITED,

AND CANNOT SERVE ANY ONE; L IT MUST HUSBAND ITS RESOURCES

TO LIVE. L BUT HEALTH OR FULNESS ANSWERS ITS OWN ENDS,

AND HAS TO SPARE, RUNS OVER, AND INUNDATES THE

NEIGHBORHOODS AND CREEKS OF OTHER MEN'S NECESSITIES."

L WE NEED TO REMEMBER THAT OUR EFFORTS HERE OFTEN "INUNDATE  
THE NEIGHBORHOODS AND CREEKS OF OTHER MEN'S NECESSITIES."



U.S. - Life Saving - (~~Let's Study~~)

THE UNITED STATES IS THE LEADING EXPORTER IN BIOMEDICAL

KNOWLEDGE. OTHER PEOPLE FROM ALL OVER THE WORLD COME TO US

TO LEARN AND TAKE BACK THE KNOWLEDGE THAT YOU AND I AS *citizen*

*volunteers and*

TAXPAYERS HELP TO DEVELOP THROUGH OUR CONTINUED SUPPORT OF

PROGRAMS SUCH AS THOSE AT NIH AND ITS ASSOCIATED ORGANIZATIONS *and*

*The Kidney Foundation.*

THESE EFFORTS TO ERADICATE DISEASE HAVE BEEN FRUITFUL,

WE HAVE ~~JUST~~ LEARNED THAT WITH FEW EXCEPTIONS SMALLPOX IS

NON-EXISTENT WORLDWIDE AND THERE IS A LONG LIST OF OTHER

DISEASES ON THE WANE.

*- Polio, German measles and many others.*

ALL THIS IS ENHANCED AND MADE POSSIBLE THROUGH APPROPRIATE

*Public & Private*  
SUPPORT AND FUNDING COUPLED WITH THE CONTINUING EFFORTS OF

INDIVIDUALS SUCH AS YOURSELVES AND ORGANIZATIONS LIKE THE

NATIONAL KIDNEY FOUNDATION.

*The Private Voluntary organization is the heart beat of Public Policy.*

L BUT WE NEED TO WORK TOGETHER AS A PARTNERSHIP. L THE DAY  
OF THE CORNICOPIA APPROACH TO SOLVING PROBLEMS IS OVER. L THE  
SYSTEM RELIES HEAVILY ON EXPERTS AND CONCERNED CITIZENS SUCH AS  
YOURSELVES TO HELP SET PRIORITIES, TO CONTINUALLY EXAMINE THE  
RESULTS, TO REALIGN THESE PRIORITIES AS PROGRESS IS MADE, AND  
TO LOOK TO THE FUTURE.

L IN YOUR WORK I ASK ALL OF YOU TO KEEP IN MIND THE WISDOM  
OF THE OLD PROVERB WHICH SAYS:

"HE WHO HAS HEALTH, HAS HOPE.

HE WHO HAS HOPE, HAS EVERYTHING."

L IN THE COMING OF THIS BICENTENNIAL YEAR YOU MIGHT ALSO  
REMEMBER THAT THROUGH YOUR FUTURE EFFORTS YOU WILL BE MAKING  
A MAJOR CONTRIBUTION TO HELPING MANY PEOPLE EXERCISE THEIR  
RIGHTS OF LIFE, LIBERTY AND THE PURSUIT OF HAPPINESS.



# Minnesota Historical Society

Copyright in this digital version belongs to the Minnesota Historical Society and its content may not be copied without the copyright holder's express written permission. Users may print, download, link to, or email content, however, for individual use.

To request permission for commercial or educational use, please contact the Minnesota Historical Society.



[www.mnhs.org](http://www.mnhs.org)