President's Message for ***December***

TURBULENT TIMES IN RESEARCH FUNDING: ASE'S RESPONSE TO THE CHALLENGE

This month's President's Message describes how ASE is responding to changes in the research environment, to support its members and champion scientific and clinical innovation to benefit our patients. It is cowritten by ***Drs. Jonathan Lindner*** *and* ***Monica Mukherjee****, who are respectively the Chair and the Co-Chair of ASE's Research Oversight Committee.*

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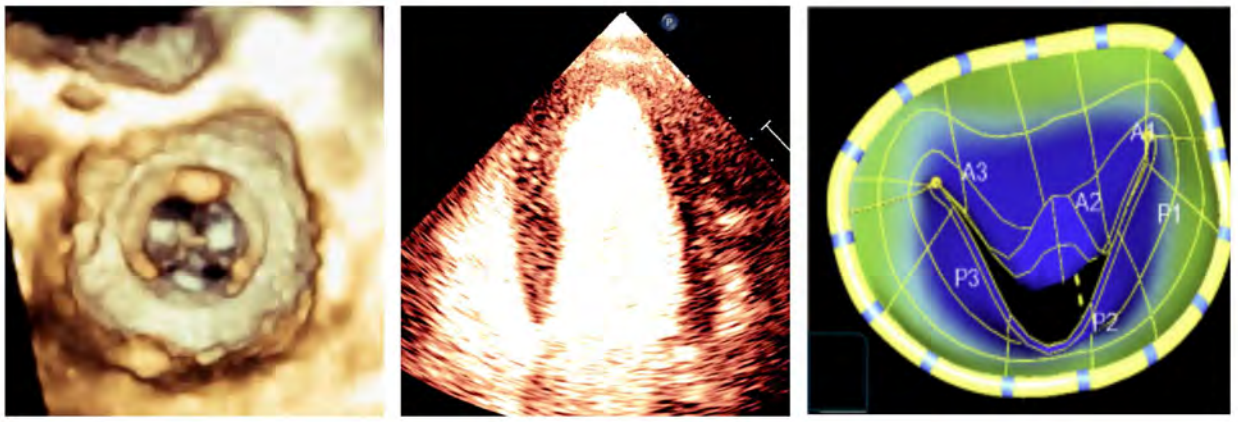
Shown in the Figure are three transformative advances in echocardiography which fundamentally reshaped the field of cardiovascular ultrasound and expanded its role in patient care. A unifying thread across these innovations, their early development, and subsequent translation to humans and integration into clinical workflows, is major federal investment from the National Institutes of Health (NIH). Early breakthroughs in the design and construction of matrix-array transducers and the processes for parallel processing underlying 3D echocardiography were made possible through NIH support. Similarly, preclinical and early clinical research investigating safety, efficacy, imaging algorithms, and kinetic models for contrast echocardiography was driven by multiple NIH-funded physician-scientists. Many of the seminal studies using 2D, 3D, spectral Doppler, and color Doppler echocardiography to study mechanisms of mitral regurgitation and secondary left ventricular remodeling were funded by the NIH. The rich and sustained history of federal funding for imaging science not only yielded clinical tools that transformed cardiovascular care but also led to the establishment of NIH study sections and dedicated institutes such as Clinical Translational Imaging Science (CTIS) and the National Institute of Biomedical Imaging and Bioengineering, which continue to foster innovation at the interface of imaging and clinical medicine.



Three transformative advances in echocardiography which fundamentally reshaped the field of cardiovascular ultrasound expanded its role in patient care.

Federal funding of meritorious basic, translational, and clinical science involving cardiovascular imaging physician-scientists will continue. Yet, it is impossible to ignore the potential impact of current trends in federal funding on our leading and future researchers in echocardiography. In the last several months, several echocardiography research programs have been adversely affected including early termination or non-funding of annual "non-competing" grant continuations due to systematic budget cuts. There has also been non-funding or termination of imaging research grants due to shifts in policies governing co-investigators from foreign countries (including Canada where many ASE members are physician-scientists). An estimated $4 billion in scientific research grants from NIH and the National Science Foundation have been trimmed this year.1 The 40% cut to the NIH budget, which would return the NIH budget to a level not seen since 2007, and drastic reductions in indirect costs allowed in federal grants that have been proposed to Congress for the next fiscal year could create even more major impediments for many imaging science programs. The cuts in T32 and other training grants that are already happening will have a chilling effect on the future of the next generation of imaging physician-scientists.

It is in these tenuous times for researchers when we can find solace in ASE's unwavering commitment to science. Over the past decade, a major focus for ASE and the ASE Foundation (ASEF) has been ensuring sponsored research, including the re-invigoration of collaborations between clinician-scientists and engineers, the funding of early career scientists, and the promotion of outcomes research that addresses current knowledge gaps. Current ASE opportunities for researchers include.

1. The EDGES (Early Development Grant for Echo Scientists) award is intended to promote the continued growth of early career scientists who need research support to continue their trajectory in imaging science.
2. The Pamela Douglas Research Scholar Award supports clinical or translational research and targets investigators who have recently transitioned to a faculty appointment.
3. The Initiative for Collaborative Clinical Science (ICCS) where clinical gaps are identified in order to engage in collaborative research with potential stakeholders who share the same interests and are willing to partner with the ASE.
4. Travel grants at the annual Scientific Sessions funded by ASE and ASEF enable early career researchers to travel and share their scientific accomplishments with a broad audience.
5. Poster presentations with significantly lowered registration fees for researchers at our Scientific Sessions and Echo Hawaii meetings. In 2025, we highlighted

over 470 investigators during those conferences.

6. ASE Foundation Global Health Outreach events. In 2025, volunteers were on the ground in Dakar, Senegal and Bengaluru, India, evaluating patients and building data to support research to improve guidance of future public health initiatives and policies.
7. Independent Research Support funded by grants. In 2024, ASE facilitated a research grant of $1.1 M to Marielle Scherrer-Crosbie, MD, PhD, FASE, to study aortic stenosis.

ASE has many committees which coordinate and strengthen research activities and help disseminate scientific advances within the field of cardiovascular ultrasound, including.

1. The Research Oversight Committee provides governance and coordination for ASE's research activities, ensuring methodological rigor, ethical conduct, and compliance with ASE policies. This leadership committee offers strategic direction for ASE's research infrastructure
2. The Research Committee is responsible for implementing ASE's research initiatives that advance cardiovascular ultrasound, in collaboration with ASE members, partners, and external stakeholders. It oversees ongoing research projects, evaluates and recommends research award recipients, and supports efforts to promote cardiovascular ultrasound within the broader scientific community.
3. The Guidelines and Standards Committee develops and updates ASE's evidence-based clinical practice documents, consensus statements, and technical standards. This committee transforms research findings into standardized practice recommendations and provides opportunities for investigators to contribute to consensus-based science translation.
4. The Scientific Sessions Program Committee plans and implements the ASE Annual Scientific Sessions, which serve as our primary venue for dissemination of new research. This committee organizes abstract review, late-breaking science sessions, and thematic symposia that highlight emerging discoveries and promote scientific exchange among investigators at all career stages.
5. The Industry Roundtable (IRT) serves as ASE's strategic forum for partnership between academia, clinicians, and industry to foster innovation in imaging technologies. The IRT supports collaborative research, early validation of novel echocardiographic tools, and dialogue between ASE investigators and industry partners.
6. The ASE Foundation Board of Directors and the Annual Appeal Committee work to raise funds for many of the research opportunities listed above. The Foundation's premier event of the year, the Annual Research Awards Gala during ASE's Scientific Sessions, is dedicated to raising funding that is then allocated to enhancing and driving future research initiatives.

Through its many funding mechanisms and organizational committees, clinician-scientists in the ASE family will continue to contribute to innovation in medical imaging. Their work is critical to identify the most important clinical gaps, to assess the feasibility and impact of new technologies, and to create a better understanding of how imaging can be best applied for diagnosis or guiding management. In the current climate of uncertainty in scientific funding, the ASE cannot fully offset potential cuts in federal sponsored research program, but it is reassuring that our Society remains committed to supporting scientific initiatives that drive discovery and ultimately improve patient care.

This text also appears in an upcoming issue of JASE OnlineJASE.com

David H. Wiener,
MD, FASE
ASE President