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**JOBS OF
THE WEEK**

By the year 2030, the United States should transform 'health maintenance organizations' into 'healthy living organizations'. Biomedical centres should have a 'school of health' that every aspiring medical and biomedical professional is required to attend. By 2030, a 'national wellness strategy' should be established, backed by congressional mandate and public-private efforts.

This was blue-sky thinking from a group of esteemed health-policy leaders at a forum in Washington DC on 19 March. The first suggestion was from Elias Zerhouni, director of the National Institutes of Health; the second from Julie Gerberding, director of the Centers for Disease Control and Prevention (CDC); and the last from William Novelli, chief executive of the American Association of Retired Persons. Asked to elaborate on how to revamp health care, they and others emphasized the essential role of prevention in combating disease and reducing monumental health-care costs. It is a theme underscored in this week's feature, which details the global opportunities in the lively area of vaccine research (see page 498).

Assuming that these US health-policy leaders are prescient, what might this suggest for the budding researcher? Take a hard look at professions related to wellness and prevention — along with vaccines, research into social and biological risk factors, biomarkers, as well as professions related to health information technology, public health and economic and racial health disparities. They are likely to garner the most attention in coming years.

Unfortunately, there is some reason to believe that others in the US government are not so visionary. A striking disconnect remains between what the experts say and what the policy-makers do. Investments in preventative measures should mean a reduction in health-care costs in the long term. Yet, in the president's budget request for fiscal year 2009, the CDC would see a \$433 million, or 7%, budget reduction (see *Nature* **451**, 610–612; 2008). Such an approach seems short-sighted and sends the wrong signal to health professionals looking to bolster efforts to replace a pound of cure with an ounce of prevention.

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