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If and when President Obama finally signs health care reform into law, it will stamp 2010 as a landmark year in U.S. social policy. This health care overhaul will help insure most of the 46 million individuals who have no coverage. For the first time since the passage of Medicare legislation in the 1960s, the federal government will have acted to significantly extend health care coverage, something most Americans believe to be a basic human right.

Yet the work of health care reform is hardly complete. Improving access only compounds the need for attention to the other major issue in health care: rising costs. In 2009 health care spending exceeded $2.6 trillion. That's approximately 17% of the entire U.S. economy. According to the Congressional Budget Office, about half of that growth is attributable to new medical technology. So the question becomes: Can we afford health care for all while supporting the forward march of technology?

Some advances actually reduce what we spend while improving quality. Vaccines, for example, have eliminated such terrible diseases as polio and the acute and chronic costs of treating them. Unfortunately, many other technologies—such as magnetic resonance imaging and implantable cardiac defibrillators—increase expenditures, even though they may save untold numbers of lives. And other breakthroughs, while ostensibly making it cheaper to treat particular conditions, ultimately raise costs. That's what has happened with laser surgery for cataracts: It has transformed a once complex procedure with a long recovery time and greatly reduced the per-patient price tag. But the overall outlay for care has risen exponentially as millions more patients opt for treatment. Finally, while advances may lengthen and improve life, illness and death remain an inevitable part of human existence, and so will the associated costs.

Yet even if longevity adds costs, medical innovation may one day achieve the neat trick of saving money while improving results. Imagine the time, perhaps in a decade or two, when we'll be able to use healthy DNA to repair or replace defective genes associated with Alzheimer's disease. Think about stem cell therapies that will generate new heart muscle following a heart attack or individual genotyping that will pinpoint the cause of a particular cancer. The expense of treating heart disease, cancer and other scourges is enormous, and the human toll is even greater.

Proto exists to communicate ideas that could soon save lives and dollars. In this issue, we examine possible medications for celiac disease that could ultimately impact other debilitating autoimmune disorders, and we describe early successes of molecular therapies developed for retinal conditions causing blindness. Thanks to health care reform (please), millions more will have access to these exciting advances.

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