FOVA

Friends of VA Medical Care and Health Research Executive Committee

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The Honorable John Culberson Chairman, Subcommittee on Military Construction and Veterans Affairs House Committee on Appropriations Washington, DC 20515

Dear Mr. Chairman:

The Friends of VA Medical Care and Health Research coalition (FOVA), appreciates the opportunity to offer our views on the fiscal year 2013 budget for veterans programs, and asks that they be made a part of the record of your hearing on the Veterans Affairs and Military Construction appropriation you are considering for Fiscal Year 2013.

FOVA is a coalition of over 80 national academic, medical and scientific societies; voluntary health and patient advocacy groups; and congressionally chartered veterans service organizations committed to ensuring high-quality health care for our nation's veterans. On behalf of FOVA, thank you for your continuing support of the Department of Veterans Affairs (VA) Medical and Prosthetic Research program. For FY 2013, FOVA recommends an appropriation of \$611 million for VA Medical and Prosthetic Research. This level would be \$30 million (5%) above current year funding and \$28 million over the President's budget request. Secondly, FOVA recommends \$200 million for research facility upgrades to be appropriated through the VA Major and Minor Construction accounts but for uses restricted to VA research infrastructure.

VA Research Is Core to the VA Health Care Mission

Biomedical and health services research plays an essential role in the VA health care system. Research is a process by which hope is fulfilled. Hope for less pain, hope for increased function and independence, hope for symptom free days, and hope for leading a normal life. These are the kinds of hopes many veterans – from World War II, Korea, Vietnam, the Persian Gulf to Operations Enduring and Iraqi Freedom (OEF/OIF) – who seek and receive treatment by the VA health care system. In many cases, the only way these veterans' hopes can be realized is through research advances. VA is dedicated to bringing these hopes to fruition by sponsoring high quality research on diseases and conditions that are of unique or broad interest to veterans. In addition, research is

a key link connecting VA practitioners, investigators and career scientists to formal academic relationships with the most prominent schools of medicine and health professions in the United States.

FOVA's recommendation of \$611 million for FY 2013 represents the coalition's estimate of what VA needs to help fulfill the hopes of the veterans who use the VA health system. We see several key areas that are ripe for further investment –

Critical Emerging Needs:

Additional funding is needed to expand research on strategies for overcoming the devastating injuries being suffered by OEF/OIF veterans. Improvements are urgently needed in furthering prosthetic limb development and rehabilitation, as well as formulating better treatments for traumatic amputation, poly-trauma (multiple amputations, often accompanied by brain injury), traumatic brain injury (TBI), whole body burns, and post-traumatic stress disorder (PTSD). VA is committed to developing better responses to the grievous wounds suffered by OEF/OIF veterans. Additional increases are also necessary for continued support of new initiatives in neuro-traumas, including head and cervical spine injuries; wound and pressure sore care; preand post-deployment health issues with a particular focus on PTSD and other mental health and transition challenges confronting new veterans; and for the development of improved prosthetics and strategies for rehabilitation from poly-traumatic injuries. These returning OIF and OEF veterans have high expectations for returning to their active lifestyles and VA is doing its best to make that hope a reality.

The seamless mental and physical reintegration of these soldiers is a daunting challenge, but the VA Medical and Prosthetic Research Program can and will address these needs if Congress provides the needed resources. However, without appropriate additional funding, VA will be illequipped to address the needs of the returning veteran population while also researching treatments for conditions that affect veterans throughout the course of their lives and for which they will seek treatment from VA medical facilities.

Genomic Medicine:

VA has a distinct opportunity to recreate its health care system by providing cutting edge care for veterans through genomic medicine. The goal is safer and more effective disease treatment and prevention. Innovations in genomic medicine will allow VA to track genetic susceptibility to disease and develop preventative measures; predict responses to medication; and modify drugs and treatment to match an individual's unique genetic structure.

While advances in genomic medicine show promise in aiding the discovery of new, more accurate and personalized treatments for diseases prevalent among veterans seeking treatment at VA facilities, there is also evidence that genomic medicine will greatly help in the treatment and rehabilitation of returning OIF/OEF veterans. For instance, research can target the human

genome for insight into individual capacity for the healing of wounds. Additional studies have considered the differences between genes that aid in healing and genes that cause inflammation and its side-effects. Advances in this field have the potential to dramatically improve the treatment of injured military personnel and combat veterans, and may play a large role in the long-term treatment of post-surgical patients and amputees.

We believe it is imperative that Congress provide sustained increases in funding for the VA research program over at least the next decade if the VA genomic medicine project is to meet its exciting objectives. According to a VA pilot program for banking genetic information that involves 20,000 individuals and 30,000 specimens (with the capacity to hold 100,000 specimens) VA will likely need approximately \$1,000 per specimen to conduct the genetic analysis. The potential advances that can be achieved with regard to PTSD and veteran-relevant diseases rely on an expansion of tissue banking as the crucial information-generating step that will inform ongoing and future research and the development of new treatments. An increase in the FY 2013 research appropriation is essential to support this expansion.

Older Veterans:

As VA strives to meet the needs of newer veterans, the VA research program must continue to support research on conditions that affect older veterans, including diabetes, kidney disease, mental illnesses, heart diseases, chronic obstructive pulmonary disease, cancers, and substance-use disorders. The VA research program also focuses its efforts on service-connected disabling conditions, including spinal cord injury and paralysis from other causes, amputation, and sensory disorders. VA owes its veteran-patients, regardless of when they served, an equal dedication to state-of-the-art care and innovative, supportive research.

VA Research Facilities Must be Updated to Fulfill Scientific Opportunity

State-of-the-art research requires state-of-the-art technology, equipment, and facilities in addition to highly qualified and committed scientists and investigators. Modern research cannot be conducted in facilities that more closely resemble high school science laboratories than university-class space. Modern facilities would also help VA recruit and retain the best and brightest clinician-scientists. In recent years, funding for the VA minor construction program has failed to adequately provide the resources needed to maintain, upgrade, and replace aging research facilities. For the most part, research facilities have competed unsuccessfully with other VA facility needs for basic infrastructure and physical plant improvements. Many VA facilities have run out of adequate research space. Also, ventilation, electrical and water supply, and plumbing appear frequently on lists of needed upgrades along with space reconfigurations. In addition to impeding medical discovery, poor research infrastructure undermines the ability of the VA to recruit and retain the clinical investigators who would normally be drawn to the VA system for its unique research opportunities.

FOVA has appreciated the Subcommittee's attention to this issue in prior years, but the problem lingers. The Committee on Appropriations gave attention to this problem in its report accompanying the FY 2006 appropriations act (P.L. 109-114), which expressed concern that equipment and facilities to support the VA research program may be lacking and that some mechanism is necessary to ensure VA's research facilities remain competitive. The report noted that more resources may be required to ensure that research facilities are properly maintained to support VA's research mission. To assess VA's research facilities and to report on the deficiencies found, along with suggestions for correction. It is our understanding that VA has completed this report at long last. FOVA strongly encourages the Subcommittee to require the VA to submit its findings as soon as possible so the Subcommittee can appropriately judge and fund the program's infrastructure needs.

Additionally, FOVA believes Congress should establish and appropriate a restricted funding stream specifically for VA's research facilities, using the VA assessment resulting from the FY 2006 Committee direction. In the meantime, to ensure that funding is adequate to meet both immediate and long-term needs, and confident that VA's needs when uncovered will be substantial, FOVA recommends \$150 million in the major construction account to address at least five of VA's highest priority research construction projects as identified in its facilities assessment report and an additional \$50 million in the minor construction account to rehabilitate existing laboratory and other research space.

The Integrity of VA's Intramural, Scientific Peer Review System Must be Preserved

As a prerequisite for membership in our coalition, all FOVA organizations must pledge not to pursue earmarks or designated amounts for specific areas of research (organs, body systems, diseases, etc.) in the annual appropriation for the VA research program. We strongly believe the decisions on research direction are best left to VA researchers. The coalition urges the Subcommittee to take a similar stance in regard to FY 2013 funding for VA research for the following reasons:

• The VA research program is exclusively intramural. Only VA employees holding at least five-eighths salaried appointments under title 38, United States Code, are eligible to receive VA research awards originating from the VA research appropriation. Compromising this principle by designating funds to institutions or investigators outside of VA (or to specific purposes within VA) undermines an extremely effective tool for recruiting and retaining the highly qualified clinician-investigators who provide quality care to veterans, focus their research on conditions prevalent in the veteran population, and educate future clinicians to care for veterans.

• VA has well-established and highly refined policies and procedures for peer review and national management of the entire VA research portfolio. Peer review of proposals ensures that VA's limited resources support the most meritorious research. Additionally, centralized VA administration provides coordination of VA's national research priorities, aids in moving new discoveries into clinical practice, elevates the standard of care, and instills confidence in overall oversight of VA research, including human subject protections, while preventing costly duplication of effort and infrastructure. Earmarks have the potential to circumvent or undercut the scientific integrity of this process, and could result in awards of less than meritorious research.

Mr. Chairman and members of the Subcommittee, FOVA appreciates the opportunity to present our views to the Military Construction, Veteran's Affairs and Related Agencies Appropriations Subcommittee. While research challenges facing our nation's veterans are significant, if given the resources, the expertise and commitment of the physician-scientists and investigators working in the VA system can meet them.

Sincerely,

The FOVA Executive Committee Members

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