

The Honorable Ken Calvert
Chair
Defense Subcommittee
House Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Betty McCollum
Ranking Member
Defense Subcommittee
Senate Appropriations Committee
U.S. House of Representatives
Washington D.C. 20515

Dear Chairman Calvert and Ranking Member McCollum:

As you begin work on the Fiscal Year (FY) 2026 appropriations process, we write to respectfully request that you provide increased funding for valuable medical research conducted by the Department of Defense (DOD) through the Congressionally Directed Medical Research Program (CDMRP).

The initiatives under the CDMRP are critical to advancing our understanding of a variety of health issues and have a proven track record of contributing to medical breakthroughs. They deserve Congress's continuing support. The highly innovative research portfolio supported by the CDMRP focuses first and foremost on the health and well-being of the men and women in the U.S. Armed Services. Examples of these programs focus research investments on:

- Traumatic brain injury and psychological health, Gulf War Illness, respiratory health, burn pits and other toxic exposures, spinal cord injury, and hearing and vision loss, and newer conditions such as Long COVID.
- Existing and emerging infectious diseases that may threaten operational readiness and health security, and why diseases like ALS, multiple sclerosis and Parkinson's disease occur at greater rates in those who have served in the military.
- Orthotic and prosthetic research that has resulted in new limb-sparing techniques to save and restore functions of injured extremities, as well as outcomes research benefiting injured warfighters in need of orthotic and prosthetic devices.

Defense health research program grants neither duplicate nor supplant National Institutes of Health (NIH) or Veterans Administration (VA) research efforts, but rather enhance those efforts. They fund highly innovative projects – support that is typically unavailable through other federal programs. CDMRP funds the best-qualified proposals from researchers and research teams at top research universities and medical centers. Unlike any other federal research program, CDMRP utilizes “consumer” reviewers – everyday citizens who are affected by these diseases – to review grants to ensure the best possible impact. The NIH and DoD medical research portfolios have symbiotic relationships, allowing NIH-funded basic research to serve as a foundation for ground-breaking, disorder-targeted research at DoD. NIH and DoD program officers meet regularly to ensure collaboration and prevent duplication.

Unfortunately, the Full Year Continuing Appropriations and Extensions Act (P.L. 119-4) reduced CDMRP overall by 57 percent, or \$859 million. However, this reduction was not applied equally across all 35 programs. Instead, many programs vital to warfighter health -- such

as traumatic brain injury/psychological health; vision and hearing, orthotics, prosthetics and spinal cord; and pancreatic, kidney and lung cancer – received no funding for research grants in FY 2025. If not fully funded, these programs will experience research interruptions that could have long-term implications for the health and readiness of the warfighter.

Members of Congress have traditionally supported a wide variety of programs within the CDMRP, each with its own merits. While we all recognize the challenges facing your committee in this difficult budget climate, we urge you to continue your support for the programs within the CDMRP.