

# FOVA

Friends of VA Medical Care  
and Health Research

A coalition of national  
organizations committed to quality  
care for America's veterans

Executive Committee

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**STATEMENT OF**

**THE FRIENDS OF VA MEDICAL CARE AND HEALTH  
RESEARCH COALITION (FOVA)**

**ON**

**FISCAL YEAR 2007 APPROPRIATIONS FOR THE  
VETERANS AFFAIRS MEDICAL AND PROSTHETICS  
RESEARCH PROGRAM**

**BEFORE**

**THE HOUSE APPROPRIATIONS SUBCOMMITTEE ON  
MILITARY QUALITY OF LIFE AND VETERANS AFFAIRS**

**PRESENTED BY**

**Sharon I.S. Rounds, M.D.**

**March 1, 2006, 10:30 AM  
H-143 Capitol Building**

**Summary Recommendations:**

- **VA Medical and Prosthetic Research - \$460 million**
- **VA Research Facilities - \$45 million**

On behalf of the Friends of VA Medical Care and Health Research (FOVA) coalition, I want to thank the members of the Subcommittee for your ongoing support of the VA Medical and Prosthetics Research program. FOVA is a coalition of 86 organizations committed to high quality health care for veterans. Today we are testifying regarding the VA Medical Research and Prosthetics program and urge your support for an FY 2007 appropriation of \$460 million.

### **VA Medical and Prosthetics Research Program**

The VA Medical and Prosthetics Research program is one of the nation's premier research endeavors and attracts high-caliber clinicians to deliver care and conduct research in VA health care facilities. The VA research program is patient oriented and focused entirely on prevention, diagnosis, and treatment of conditions prevalent in the veteran population.

The VA research program is an intramural program; grantees must be VA employees. Unlike other federal research agencies, VA does not make grants to colleges and universities, or any other non-VA entity. As such, the program offers a dedicated funding source to attract and retain high-quality physicians and clinical investigators to the VA health care system. This in turn ensures that our nation's veterans receive state-of-the-art health care.

VA currently supports 5,143 researchers, of which 76 percent are practicing physicians who provide direct patient care to veteran patients. As a result, the Veterans Health Administration (VHA), which is the largest integrated medical care system in the world, has a unique ability to translate progress in medical science directly to improvements in clinical care.

### **VA Research – Yielding Results for Veterans**

Mr. Chairman, the VA research program is producing research results of the highest caliber on a wide range of health issues of direct relevance to veterans including pain management, substance abuse treatment, mental health disorders, respiratory medicine, vaccine development and Alzheimer's. These findings have been published in leading peer-reviewed medical journals like the New England Journal of Medicine and JAMA. Whether it's lung cancer, heart disease, Parkinson's, diabetes, or rehabilitation medicine, the VA research programs are producing new approaches and new treatments. Included in the testimony is a list of some of the more recent impressive discoveries made by VA-sponsored researchers.

### **Administration's Budget Recommendation**

The Administration's FY 2007 budget request includes \$399 million for the VA Medical and Prosthetics Research program, a \$13 million (approximately 3.2 percent) reduction from the final FY 2006 appropriation of \$412 million. The VA research funds provide direct support for research projects as well as the salaries of non-clinician investigators.

We are deeply disappointed with the Administration's budget request and note that if enacted, it will have significant adverse consequences for the VA research program. In its budget summary, the VA anticipates that this \$13 million reduction will result in the elimination of 82 investigator-initiated programs, 15 special research initiatives, and 7 multi-site research projects. Furthermore, the department estimates a reduction in VA's direct research employees by 286.

In FY 2007, VA also anticipates increasing research funds for studies of acute and traumatic injury and central nervous system injury and related disorders. However, in order to fund these new studies with a shrinking budget, VA projects cuts to research in aging, cancer, infectious diseases, kidney diseases, diabetes, lung disorders, and heart diseases, among others. In other words, VA is proposing to rob Peter to pay Paul.

As with prior years, the Administration's FY 2007 budget includes projections for VA research spending from the main VA medical care program. This "medical care support" is slated for a \$13 million increase, from \$353 million in FY 2006 to \$366 million in FY 2007. While this increase might seem to offset the proposed cut to direct research funding, the medical care support allocation does not directly support research projects. As the budget submission indicates, this allocation funds "facility costs of heat, light, telephone, and other utilities associated with laboratory space; the administrative cost of human resource support, fiscal service, and supply service attributable to research; research's portion of a medical center's hazardous waste disposal and nuclear medicine licenses; and, most importantly, the time clinicians devote to their research activities."

The VA budget also includes non-VA funding sources among the lines of support for VA research. The budget optimistically projects a \$13.24 million increase (from \$662 million in FY 2006 to \$675 million in FY 2007) in other federally funded research conducted at VA, funds that have primarily come from the National Institutes of Health (NIH). However, the Administration's FY 2007 budget for the NIH is flat, making it highly unlikely that VA will enjoy significant growth in NIH-funded research grants.

Finally, the VA budget anticipates a reasonable \$4 million increase in private research funding (from \$204 million in FY 2006 to \$208 million in FY 2007), which comes from industry to support clinical trials as well as foundations and other non-profit entities to support research projects. This projection has been overly inflated in previous years.

Programmatically, the VA research budget includes plans for two special research projects to begin in FY 2007. The first project focuses on the special needs of service personnel returning from Operation Iraqi Freedom and Operation Enduring Freedom. The project envisions a wide ranging number of research efforts, including targets in post-traumatic stress disorder and other mental health issues; amputation and prosthetics research; and returning personnel reentry and reintegration. A second special project would focus on genomic medicine. The thrust of this project is to link veterans' genetic information with the VA electronic health record. According to the budget submission, "The goal is to develop genetic assessments that will potentially enable 'mass customization' of medical treatment."

FOVA recommends a FY 2007 direct research appropriation of \$460 million. The coalition wholeheartedly supports the vision to expand the VA research program to encompass the needs of service personnel returning from current conflicts, whether they include polytrauma, massive burn injury, or mental conditions. Such expansion of the program requires new resources so VA's other research areas, which are equally important to the care of large numbers of veterans, do not languish in the meantime.

### **VA Research Infrastructure**

State-of-the-art research requires state-of-the-art technology, equipment, and facilities. Such an environment promotes excellence in teaching and patient care as well as research. It also helps VA recruit and retain the best and brightest clinician scientists. Unfortunately, funding for the VA medical and prosthetics research program has failed to provide the resources needed to maintain, upgrade, and replace aging research facilities. Many VA facilities have run out of adequate research space, and ventilation, electrical supply, and plumbing appear frequently on lists of needed upgrades along with space reconfiguration. Under the current system, research must compete in the minor construction budget with other facility needs for basic infrastructure and physical plant support.

FOVA appreciates the attention the subcommittee gave to this problem in the House Report accompanying the FY06 appropriations bill (P.L. 109-114), which expresses concern that equipment and facilities to support the research program maybe be lacking and that some mechanism is necessary to ensure the Department's research facilities remain competitive. It noted that more resources may be required to ensure that research facilities are properly maintained to support the Department's research mission.

To ensure that funding is adequate to meet both immediate and long term needs, FOVA recommends an annual appropriation of \$45 million dedicated to renovating existing research facilities and major construction funding sufficient replace at least one outdated facility per year until the backlog is addressed.

Again, Mr. Chairman, FOVA appreciates the opportunity to present our views to the Subcommittee. While research challenges facing our nation's veterans are significant, if given the resources the expertise and commitment of the physician-scientists working in the VA system will meet the challenge.

## **RECENT VA RESEARCH ADVANCES**

### **New depression-care model yields big gains for little money (December 2005)**

An innovative model of depression care for older adults yields better outcomes without substantially raising costs, suggests a large study that involved VA and seven other health systems. The model features specially trained nurses, social workers or psychologists who support the efforts of primary-care doctors and consulting psychiatrists. The cost-benefit study shows that the model, known as IMPACT – "Improving Mood: Promoting Access to Collaborative Treatment" – enables patients to experience significant benefits at an additional outpatient cost to their healthcare providers of only about \$148 per year.

### **Sleep apnea may be risk factor for stroke (November 2005)**

A recent study by researchers from the VA Connecticut Healthcare System and Yale University School of Medicine indicated patients who had obstructive sleep apnea were twice as likely to have a stroke or die from any cause during the 3.5-year follow-up period. In sleep apnea, the upper airway closes repeatedly during sleep. Prior research had linked this disorder to a higher risk of stroke and other cardiovascular diseases, but researchers were not sure if this was only because those with sleep apnea were also more likely to have other risk factors, such as obesity or high blood pressure. In the new study, researchers determined that the connection between sleep apnea and stroke persists in the absence of other risk factors.

### **VA-Yale team finds molecular basis for 'phantom pain' (October 2005)**

Researchers from VA and Yale University School of Medicine identified a molecular basis for "phantom pain," a phenomenon in which amputees and patients with spinal cord injury experience the sensation of excruciating pain in a limb that is no longer there or that has lost all perception. The research team reported that the problem is due to over-sensitive brain cells in the thalamus, a region of the brain that relays sensory messages to the cerebral cortex. Specifically, these brain cells contain abnormally high levels of a specialized protein that serves as a "battery," allowing electrical impulses to travel between cells.

### **Shingles Vaccine Shows Promise in Clinical Trial (June 2005)**

In one of the largest adult vaccine trials in medical history, VA researchers and colleagues at 22 sites found that an experimental vaccine for shingles—a painful nerve and skin condition that affects many older adults—reduced the incidence of the disease by more than half, and dramatically limited its severity and complications. Shingles, which affects about a million Americans each year, is caused by a re-awakening of dormant chickenpox virus in the body. It is marked by a painful, blistering rash, and sometimes leads to lingering long-term pain known as post-herpetic neuralgia. The trial was conducted in cooperation with the National Institutes of Health and involved nearly 39,000 older men and women.

### **Halting Brain Damage After Diabetic Coma (May 2005)**

Researchers at the San Francisco VA Medical Center showed in animal studies that pyruvate—a natural, nontoxic byproduct of glucose metabolism—may prevent brain-cell death and cognitive loss in diabetics following an episode of severely low blood sugar. Standard emergency-room treatment for such episodes of severe hypoglycemia—low blood sugar—is glucose alone. This restores consciousness right away, but does not always prevent the subsequent death of brain cells and possible cognitive impairment. According to the new research, pyruvate plus glucose may not only restore consciousness, but also be effective in preventing brain damage.

### **DHA Fights Alzheimer's Brain Plaques in Mice (March 2005)**

Researchers with VA and the University of California, Los Angeles, found that a diet high in docosahexenoic acid (DHA) dramatically slowed the progression of Alzheimer's disease in mice. Specifically, DHA cut the harmful brain plaques that mark the disease. DHA – found in fish, algae-based nutritional supplements, and other food sources – is already touted by many health experts for its role in cardiovascular health. A study by the same researchers in 2004 showed that DHA protected the “synaptic” areas where brain cells communicate and enabled mice to perform better on memory tests.

### **Fiber-rich diet wards off heartburn (January 2005)**

Eating more fiber and less fat may mean less heartburn, according to a VA study of 371 volunteers in Houston. Individuals with diets higher in fiber and lower in fat were less likely to suffer chronic heartburn and regurgitation of food, or gastroesophageal reflux disease (GERD). Although fiber has long been lauded for its role in heart and colon health, the study is among the first to suggest that fiber may offer further digestive benefits. The VA study is one of the most comprehensive analyses yet of how diet affects GERD.

### **Common Test Misses 95 Percent of Serious Colon Growths (January 2005)**

A test commonly used by doctors to screen for colon cancer has proved “worthless,” according to a VA researcher and gastroenterologist who led a study involving 2,665 veterans at 13 VA medical centers. The study tested the validity of the digital fecal occult blood test (FOBT). In addition to this test, the study participants also received a full colonoscopy. The colonoscopies revealed that 284 men had serious polyps. The single-sample FOBT detected only 5 percent of them. As a result of the research, more attention is being focused on how primary-care physicians screen for colorectal cancer.

### **Study Pinpoints Schizophrenia Brain Glitch (November 2004)**

A team at the Boston VA and Harvard Medical School identified a fault in the brain waves of schizophrenics that may explain their hallucinations and disturbed thinking. The researchers monitored the brain waves of normal and schizophrenic patients as they responded to images. Those with the disorder showed no electrical activity in a certain frequency that brain cells use to exchange information about the environment and form mental impressions. The findings may help guide the development of new drug therapies.

### **Generic Drug Reduces Pain with Fewer Side Effects (November 2004)**

Scientists at the VA North Texas Health Care System in Dallas reported that using the generic drug etodolac rather than more expensive, patented medications provided effective pain relief at a lower cost and with fewer side effects. The researchers found that patients taking the arthritis medication etodolac had 60 percent fewer stomach and intestinal complications than those taking more expensive, brand name prescription pain relievers. They calculate that the VA health care system could save nearly \$40 million annually if etodolac were prescribed instead of brand name pain relievers.

### **Abnormal Brain Development, not Neurochemical Imbalances, may Cause Major Depression (July 2004)**

Researchers at the Temple, TX VAMC have discovered that an increased number of nerve cells in the thalamus, a part of the brain, may be responsible for major depression. This is the first study to link a psychiatric disorder with an increased number of regional neurons in the brain. The data suggest that there may be discrete physical abnormalities in the brains of subjects with major depression, and that these changes may be responsible for the abnormal thinking patterns and the emotional impairments suffered by these patients.

### **Researchers Link Two Molecules to Multiple-Sclerosis Nerve Damage (May 2004)**

Scientists with VA, Yale and University College London identified two molecules that may underlie nerve-fiber degeneration in secondary progressive multiple sclerosis. MS is a disease of the central nervous system that attacks myelin, the protective coating around nerve fibers. In the progressive forms, entire lengths of the nerve fibers begin to degenerate, resulting in permanent and irreparable damage and a steady worsening of symptoms. The new finding is the first

observation in humans of specific molecules that contribute to the degeneration of nerve fibers. The discovery may lead to new therapies to help protect nerve fibers.

### **Open Surgery Beats Laparoscopy for Most Hernia Repairs (April 2004)**

A VA study of nearly 1,700 hernia repair operations found fewer recurrences and complications overall with open surgery than with laparoscopic surgery. The researchers analyzed 834 open and 862 laparoscopic surgeries performed at 14 VA medical centers to repair inguinal, or groin, hernias, the most common type. In two years of follow-up, the laparoscopic group had a 10-percent recurrence rate and 39-percent complication rate, compared to about 5 percent and 33 percent for the open-surgery group.

### **New Antibiotic Improves Treatment of Diabetic Foot Infections (January 2004)**

Foot infections are a leading cause of diabetic-related hospitalizations and can result in amputation when infections fail to respond to therapy. In a study conducted by researchers at the Puget Sound VA and the University of Washington School of Medicine, a new antibiotic, linezolid, has been shown to be as effective as older therapies at treating antibiotic-resistant bacteria. In addition, linezolid can be delivered orally as well as intravenously, making it ideal for outpatient use.

## ORGANIZATIONS ENDORSING THE FOVA FY 2007 RECOMMENDATIONS:

Administrators of Internal Medicine  
Alliance for Academic Internal Medicine  
Alliance for Aging Research  
Alzheimer's Association  
American Academy of Child and Adolescent Psychiatry  
American Academy of Neurology  
American Academy of Ophthalmology  
American Association for the Study of Liver Diseases  
American Association of Anatomists  
American Association of Colleges of Pharmacy  
American Association of Spinal Cord Injury Nurses  
American Association of Spinal Cord Injury  
Psychologists and Social Workers  
American College of Chest Physicians  
American College of Clinical Pharmacology  
American College of Physicians  
American College of Rheumatology  
American Congress of Rehabilitation Medicine  
American Dental Education Association  
American Diabetes Association  
American Federation for Medical Research  
American Gastroenterological Association  
American Geriatrics Society  
American Heart Association  
American Hospital Association  
American Lung Association  
American Military Retirees Association  
American Optometric Association  
American Osteopathic Association  
American Paraplegia Society  
American Physiological Society  
American Podiatric Medical Association  
American Psychiatric Association  
American Psychological Association  
American Society for Pharmacology and  
Experimental Therapeutics  
American Society of Hematology  
American Society of Nephrology  
American Therapeutic Recreation Association  
American Thoracic Society  
Association for Assessment and Accreditation of  
Laboratory Animal Care International  
Association of Academic Health Centers  
Association of Academic Psychiatrists  
Association of American Medical Colleges  
Association of Professors of Medicine  
Association of Program Directors in Internal Medicine  
Association of Schools and Colleges of Optometry  
Association of Subspecialty Professors  
Association of VA Chiefs of Medicine  
Blinded Veterans Association  
Blue Star Mothers of America  
Clerkship Directors in Internal Medicine  
Coalition for American Trauma Care  
Coalition for Health Services Research  
Digestive Disease National Coalition  
Gerontological Society of America  
Hepatitis Foundation International  
Juvenile Diabetes Research Foundation International  
Legion of Valor of the USA, Inc.  
Medical Device Manufacturers Association  
Medicine-Pediatrics Program Directors Association  
Military Officers Association of America  
National Alliance for the Mentally Ill  
National Association for the Advancement of  
Orthotics and Prosthetics  
National Association for Uniformed Services  
National Association of VA Dermatologists  
National Association of Veterans' Research and  
Education Foundations  
National Organization of Rare Disorders  
Nurses Organization of Veterans Affairs  
Paralyzed Veterans of America  
Paralyzed Veterans of America Spinal Cord  
Research Foundation  
Parkinsons Action Network  
Research!America  
Society for Neuroscience  
Society for Women's Health Research  
Society of General Internal Medicine  
The Endocrine Society  
United Spinal Association  
Vietnam Veterans of America, Inc.  
Washington Home Center for Palliative Care Studies

