Friends of VA Medical Care and Health Research:

A Budget Proposal for FY 2009

About FOVA

Over 15 years ago, the Friends of VA Medical Care and Health Research (FOVA) coalition was founded to ensure that America's veterans receive high-quality health care. Today, FOVA is a diverse coalition representing more than 90 national academic, medical, and scientific societies; voluntary health and patient advocacy groups; and veteran-focused associations. FOVA organizations work in concert with the *Independent Budget* veterans service organizations to advocate appropriate funding for the research and health programs that serve the nation's veterans.

Among their many activities, FOVA members regularly brief Members of Congress on the status of health care and research at the Department of Veterans Affairs (VA); raise awareness of VA's medical and research programs; and host special events that highlight research successes achieved through VA's efforts.

About VA Research and Development

The VA Medical and Prosthetic 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.

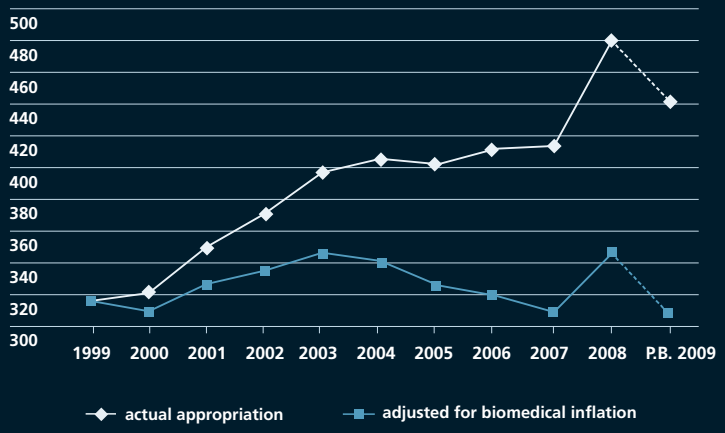
VA research is patient oriented, focusing on prevention, diagnosis, and treatment of conditions prevalent in the veteran population. More than three-quarters of VA researchers are clinicians who provide direct patient care to veterans. As a result, the Veterans Health Administration (VHA)—the largest integrated medical care system in the world—has a unique ability to translate progress in medical science directly to improvements in clinical practices.

The VA research program is exclusively intramural; that is, only VA employees holding at least a five-eighths salaried appointment are eligible to receive VA awards.

VA Research hosts three Nobel Laureates and six recipients of the Albert Lasker Medical Research Award, "America's Nobels."

Unlike other federal research agencies, VA does not make grants to non-VA entities. 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. The resulting environment of medical excellence and ingenuity benefits every veteran receiving care in the VA health system and, ultimately, all Americans.

VA Research and Development Funding FY 1999-2009 ($ in millions)



The VA Medical and Prosthetic Research Program leverages the taxpayer's investment via a nationwide array of synergistic partnerships with the National Institutes of Health and other federal research funding agencies, for-profit medical industry, nonprofit organizations, and academic affiliates. The VA research program has done an extraordinary job leveraging its relatively modest annual appropriation into a $1.7 billion research enterprise. This highly successful venture demonstrates the best in public-private cooperation, but would not be possible without the VA's research opportunities.

VA Research – Total Budgetary Resources (in millions)

	FY 2007 Actual	FY 2008 Estimate	FY 2009 Proposed	△ (08-09)
Research Appropriation	$446	$480	$442	-7.9%
Medical Care Support	$373	$411	$442	7.5%
Other Federal (e.g., NIH)	$669	$708	$751	6.1%
Other Non-Federal	$202	$206	$210	1.9%
Total	$1,690	$1,805	$1,845	2.2%

Friends of VA Medical Care and Health Research: FY 2009 Recommendations

VA Medical and Prosthetics Research: $555 million

Funding for VA research must be steady and sustainable to meet current commitments while allowing for innovative scientific growth to address critical emerging needs.

Increased VA research funding is needed to maintain the current level of VA research activity; take advantage of burgeoning opportunities in genomic medicine to improve the quality of life for our nation's veterans; address the critical needs of returning Operations Enduring and Iraqi Freedom (OEF/OIF) veterans; and raise the VA-imposed cap on investigator-initiated awards.

Biomedical Research and Development Inflation:

VA research awards are typically three to five years in duration. However, scientific advancement can entail many more years and requires steady, sustainable funding. To maintain the current level of VA research activity over the next three years, biomedical research inflation is estimated at approximately $20 million in each of the next three years (3.5 percent for FY 2009 through FY 2011).

Genomic Medicine:

VA is in a unique position to revamp modern health care and to provide progressive, cutting-edge care for veterans through genomic medicine. VA is the obvious choice to lead advances in genomic medicine. It is the largest integrated health-care system in the world, employs an industry-leading electronic health record system, and has a dedicated treatment population for sustained research. VA combines these attributes with high ethical standards and standardized processing. Innovations in genomic medicine will allow the VA to:

- reduce drug trial failure by identifying genetic disqualifiers while allowing testing of eligible populations;
- track genetic susceptibility for disease and develop preventative measures; and
- modify drugs and treatments to match an individual's unique genetic sequence.

Critical Emerging Needs:

Additional funding also is needed to expand research on strategies for overcoming the devastating injuries being suffered by OEF/OIF veterans. Improvements in prosthetics and rehabilitation, as well as better treatments for polytraumas, traumatic brain injury (TBI), whole body burns, and post traumatic stress disorder (PTSD) are urgently needed. Funding more studies and accelerating ongoing programs could deliver results that make a difference in the quality of life for hundreds or even thousands of the nation's newest disabled veterans.

VA Merit-Review Award Caps:

Since 2005, inadequate funding for VA research has forced the Department to cap many VA merit-review awards at a mere $125,000 annually. VA research awards have not been so modestly funded since the $100,000 cap in 1999 (more than $140,000 in 2009 dollars). Nearly a decade later, the current $125,000 cap fails to keep pace with biomedical inflation and VA's commitment to scientific innovation.

The cap—which is significantly lower than the average award at comparable federal research programs—is a tradeoff that VA leadership has had to make to continue funding the same number of grants it has historically supported. This is a problem compounded by VA's need to expand its research portfolio to include research on conditions prevalent among veterans of OEF and OIF.

FOVA supports increasing the number of funded programs to meet these challenges, but as a secondary objective also supports raising the cap on merit review programs to recognize inflation, maximize productivity, foster recruitment, and speed the translation of research from the bench to the bedside.

FOVA Recommendation:

To keep VA research funding predictable, the VA will require approximately $20 million per year to account for biomedical research inflation. An additional $55 million in FY 2009 is necessary for continued support of new VA research initiatives and for raising the cap on merit reviews. Thus, FOVA recommends $555 million for FY 2009, an increase of $75 million over the FY 2008 appropriated level.

VA Research Facilities Improvement: $45 million

State-of-the-art research requires state-of-the-art technology, equipment, and facilities.

VA Research Infrastructure:

A state-of-the-art environment for research promotes excellence in teaching and patient care as well as science. It also helps VA recruit and retain the best and brightest clinician scientists. In recent years, funding for the VA medical and prosthetics research program has failed to provide the resources needed to maintain, upgrade, and replace aging research facilities.

Over the past decade, only $50 million has been spent on VA research construction or renovation and at only 24 of the 97 major VA research sites across the nation. Many VA facilities have run out of adequate research space. Ventilation, electrical supply, and plumbing appear frequently on lists of needed upgrades along with space reconfiguration.

In May 2004, then-Secretary of Veterans Affairs Anthony J. Principi approved the Capital Asset Realignment for Enhanced Services (CARES) Commission's report to upgrade and renovate VA facilities. While this panel found need for $87 million to renovate existing research space, it was not included in the Secretary's final report.

To ensure that funding meets both immediate and long-term needs, FOVA recommends an annual appropriation of $45 million in the VA's minor construction account dedicated to renovating existing research facilities—a modest amount compared to the 2004 CARES findings. FOVA also recommends additional major construction funding sufficient to replace at least one outdated facility per year to address this critical shortage of research space.

VA Research Facilities Assessment:

A significant cause of research infrastruture's neglect is that VA research must compete with other facility needs (such as medical services infrastructure) for funds provided under the minor construction appropriation.

In House Report 109-95 providing appropriations for FY 2006, the House Appropriations Committee expressed concern that "equipment and facilities to support the research program may be lacking and that some mechanism is necessary to ensure the Department's research facilities remain competitive." To assess VA's research facility needs, the committee directed VA to conduct "a comprehensive review of its research facilities and report to the Congress on the deficiencies found and suggestions for correction of the identified deficiencies."

The VA Office of Research and Development has initiated a 3-year examination of all VA research infrastructure for physical condition, capacity for current research, as well as program growth and sustainability of the space to conduct research. VA has already completed three comprehensive site surveys and plans to conduct two surveys per month beginning in FY 2008.

FOVA anticipates VA's analysis will find need for funding significantly greater than the 2004 CARES report. As it moves forward with its research facilities assessment, FOVA recommends that VA submit regular reports to Congress following the completion of each site survey. These reports will ensure that the Administration and Congress are well informed of VA's funding needs for research infrastructure at each stage of the budget process.

VA Medical Care: $42.8 billion

As a national leader, delayed funding for VA health-care jeopardizes VA's ability to provide quality and timely health-care services to all eligible veterans.

A combination of organizational improvements, performance measures, and its extensive electronic medical record system —developed for patient care and clinical information rather than for billing— has made the VHA a leader in quality of care. However, when funding for VA medical care is not approved before the start of the federal fiscal year, VHA is forced to put a freeze on hiring critical staff nationwide. As a result, patient care is disrupted and VHA is placed at a competitive disadvantage for recruiting health professionals.

Consistent with the *Independent Budget*, FOVA encourages Congress to work with the Administration to ensure —by October 1, 2008— an FY 2009 VA medical care appropriation of at least $42.8 billion. The recommended increase would cover expected medical care inflation; the influx of new veterans from OIF and OEF; and necessary improvements to address the increasing complexity and volume of care needed by VA's aging population.

Historical Achievements

1958 Invented the implantable cardiac pacemaker, helping many patients prevent potentially life-threatening complications from irregular heartbeats.

1960 Pioneered the concepts that led to development of computerized axial tomography (CAT scan).

1961 Conducted groundbreaking work with radioisotopes that led to the development of modern radioimmunoassay diagnostic techniques.

1968 Performed the first successful liver transplants and developed techniques for suppressing the body's natural attempt to reject transplanted tissue.

1984 Developed the nicotine patch and other therapies to help smokers give up the habit.

1991 Developed Functional Electrical Stimulation (FES) systems that allow patients to move paralyzed limbs.

1994 Demonstrated that one aspirin tablet a day reduced by half the rate of death and nonfatal heart attacks in patients with unstable angina.

2000 Showed that colonoscopy is superior to the more widely used sigmoidoscopy as a primary screening mechanism for colon cancer.

2005 Showed the effectiveness of a new vaccine for shingles, a painful skin and nerve infection that affects older adults.

Recent Advancements

Generic drug helps prevent, reduce PTSD nightmares (April 2007)

Prazosin, a generic drug already used by millions of Americans for high blood pressure and prostate problems has been found in a clinical study to improve sleep and lessen trauma nightmares in veterans with posttraumatic stress disorder (PTSD). "This is the first drug that has been demonstrated effective for PTSD nightmares and sleep disruption," said Murray A. Raskind, M.D., of the Veterans Affairs Puget Sound Health Care System and lead investigator on the study. At the end of the study, veterans randomized to prazosin reported significantly improved sleep quality, reduced trauma nightmares, a better overall sense of well being, and an improved ability to function.

New bionic ankle debuts at Providence VA (July 2007)

Working through the Center for Restorative and Regenerative Medicine, a collaborative research initiative that includes the Providence VA Medical Center, Brown University and MIT, a team led by Hugh Herr developed the first powered ankle-foot prosthesis, an important advance for lower limb amputees. Unlike any other prosthesis, the device propels users forward using tendon-like springs and an electric motor. The prototype device reduces fatigue, improves balance, and provides amputees with a more fluid gait.

VA-UCLA team discovers link between Parkinson's disease, narcolepsy (August 2007)

VA Researchers have discovered that both Parkinson's and narcolepsy patients have major deficiencies of brain cells that make a chemical called hypocretin. Jerome Siegel, Ph.D., chief of neurobiology research at the VA Medical Center in Sepulveda and professor of psychiatry and biobehavioral sciences at UCLA, said, "That leads us to believe the loss of these cells may be a cause of the narcolepsy-like symptoms of [Parkinson's] and may be ameliorated by treatments aimed at reversing the hypocretin deficit." While no hypocretin treatments are currently available, Dr. Siegel hopes such therapies will progress to clinical trials within the next few years.

Blood test may offer early detection for Alzheimer's disease (November 2007)

Researchers led by Tony Wyss-Coray, Ph.D., of the VA Palo Alto Healthcare System and Stanford University, identified a set of 18 proteins in the blood that appear to predict the onset of Alzheimer's disease and could be the basis of a screening test. When Wyss-Coray's team further tested the biomarkers, the protein analysis matched the clinical diagnosis about 90 percent of the time. Used on blood samples from 47 people with mild cognitive impairment—an Alzheimer's precursor—the test predicted with about 80-percent accuracy which patients would develop Alzheimer's two to six years after the samples had been taken.

Organizations Endorsing the FOVA FY 2009 Recommendations:

Administrators of Internal Medicine
Alliance for Academic Internal Medicine
Alliance for Aging Research
Alzheimer's Association
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Orthopaedic Surgeons
American Academy of Pain Medicine
American Association for Dental Research
American Association for the Study of Liver Diseases
American Association of Anatomists
American Association of Colleges of Nursing
American Association of Colleges of Osteopathic Medicine
American Association of Colleges of Pharmacy
American Association of Neurological Surgeons
American Association of Nurse Anesthetists
American Association of Spinal Cord Injury Nurses
American Association of Spinal Cord Injury Psychologists and Social Workers
American College of Clinical Pharmacology
American College of Emergency Physicians
American College of Neuropsychopharmacology
American College of Physicians
American Congress of Rehabilitation Medicine
American Dental Education Association
American Dental Hygienists' Association
American Federation for Medical Research
American Gastroenterological Association
American Geriatrics Society
American Headache Society
American Heart Association
American Hospital Association
American Lung Association
American Military Retirees Association
American Occupational Therapy Association
American Optometric Association
American Osteopathic Association
American Pain Society
American Paraplegia Society
American Physical Therapy Association
American Physiological Society
American Podiatric Medical Association
American Psychiatric Association
American Psychological Association
American Society for Biochemistry and Molecular Biology
American Society for Bone and Mineral Research
American Society for Microbiology
American Society for Pharmacology and Experimental Therapeutics
American Society of Anesthesiologists
American Society of Hematology
American Society of Nephrology
American Thoracic Society
Association for Assessment and Accreditation of Laboratory Animal Care International
Association for Research in Vision and Ophthalmology
Association of Academic Health Centers
Association of Academic Physiatrists
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 Specialty Professors
Blinded Veterans Association
Clerkship Directors in Internal Medicine
Coalition for Heath Services Research
Congress of Neurological Surgeons
Digestive Disease National Coalition
Disabled American Veterans
Dystonia Medical Research Foundation
Federation of American Societies for Experimental Biology
Gerontological Society of America
Hepatitis Foundation International
Infectious Diseases Society of America
International Foundation for Functional Gastroenterological Disorders
Jewish War Veterans of the USA
Legion of Valor of the USA, Inc.
Medicine-Pediatrics Program Directors Association
Military Officers Association of America
National Alliance for Eye and Vision Research
National Alliance on Mental Illness
National Association for the Advancement of Orthotics and Prosthetics
National Association for Uniformed Services
National Association of State Universities and Land Grant Colleges
National Association of Veterans' Research and Education Foundations
Nurses Organization of Veterans Affairs
Pain Care Coalition
Research!America
Society for Neuroscience
Society of General Internal Medicine
The Endocrine Society
The FAIR Foundation
United Spinal Association
Veterans Affairs Physician Assistant Association
Veterans of the Vietnam War and the Veterans Coalition

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