

June 14, 2018

MEMORANDUM

TO: Sleep Research Society

FR: Dale Dirks and Dane Christiansen

RE: FY 2019 House Defense Appropriations Bill

On June 14th, 2018, the House Appropriations Committee held a markup of its Fiscal Year (FY) 2019 appropriations bill for the Department of Defense (DoD). The bill had bipartisan support and was voted out of committee 48 to 4. Attached, please find a copy of the bill [here](#) and committee report [here](#).

The FY 2019 House DoD Appropriations Bill and Committee Report includes the following items of interest:

- \$34.05 billion for the Defense Health Program, a decrease of \$381 million from FY 2018.
- The House DoD spending bill does not include the Peer-Reviewed Medical Research Program. The FY 2019 funding level and annual eligible conditions list will be released as part of the Senate's FY 2019 DoD Appropriations Bill.

Committee Recommendations

PEER-REVIEWED CANCER RESEARCH PROGRAMS - The Committee recommends \$130,000,000 for the peer-reviewed breast cancer research program, \$100,000,000 for the peer-reviewed prostate cancer research program, \$20,000,000 for the peer-reviewed ovarian cancer research program, \$20,000,000 for the peer-reviewed kidney cancer research program, \$14,000,000 for the peer-reviewed lung cancer research program, and \$80,000,000 for the peer-reviewed cancer research program that would research cancers not addressed in the aforementioned programs currently executed by the Department of Defense. The funds provided in the peer-reviewed cancer research program are directed to be used to conduct research in the following areas: bladder cancer, brain cancer, colorectal cancer, listeria vaccine for cancer, liver cancer, lymphoma, melanoma and other skin cancers, mesothelioma, pancreatic cancer, stomach cancer, and cancer in children, adolescents, and young adults. The funds provided under the peer-reviewed cancer research program shall be used only for the purposes listed above. The Committee directs the Assistant Secretary of Defense (Health Affairs) to provide a report not later than 180 days after the enactment of this Act to the congressional defense committees on the status of the peer-reviewed cancer research program. For each research area, the report should include the funding amount awarded, the progress of the research, and the relevance of the research to service members and their families. The Committee commends the Department of Defense for ensuring that projects funded through the various peer-reviewed cancer research programs maintain a focus on issues of significance to military populations and the warfighter. This includes promoting collaborative research proposals between Department of Defense researchers and non-military research institutions. These collaborations leverage the knowledge,

infrastructure and access to clinical populations that the partners bring to the research effort. Additionally, promoting these collaborations provides a valuable recruitment and retention incentive for military medical and research personnel. The Committee encourages the Assistant Secretary of Defense (Health Affairs) to continue to emphasize the importance of these collaborations between military and non-military researchers throughout the peer review process.

JOINT WARFIGHTER MEDICAL RESEARCH PROGRAM - The Committee recommends \$45,000,000 for the Joint Warfighter Medical Research Program. The Committee appreciates the program's focus on the medical needs of the warfighter on the battlefield, and believes priority should be given for research to address the "golden hour" for service members with life threatening injuries, battlefield diagnostics, and medical threats and treatments for warfighters deployed around the world. The "golden hour" policy, which commits to getting wounded service members lifesaving care within the first hour after an injury occurs, was initially put in place to address battlefield casualties. With reports that the Department may not be able to commit to the "golden hour" for service members in future conflicts, the Committee expects the Assistant Secretary of Defense (Health Affairs) to identify current gaps in medical planning and resources, and consider medical capabilities that may mitigate fatalities, including enhancing hemorrhage control research and development. In particular, the Committee encourages research and development of freeze-dried plasma and platelets, in addition to rapidly deployable, all-in-one acute and chronic wound care therapy engineered to address complex trauma and start tissue regeneration. For injuries suffered on the battlefield, the Committee believes that the Department of Defense should make enhancing battlefield diagnostics a priority. The Committee is encouraged by recent technological advances related to traumatic brain injury, including magnetic resonance technology. The Committee is pleased by the development of portable neurological devices in support of mild traumatic brain injury assessment for service members in the field and supports the continued review of benefits that could be gained from deployment of this diagnostic tool. The Committee also notes that advances in exposure science, including environmental and wearable sensors technology and chemical surveillance, partnered with advanced computing, allow for optimized exposure surveillance and health monitoring through rapid and comprehensive measurement of bio-signatures, and believes these efforts should be explored. Additionally, the Committee sees advantages to advancing genomics work to identify and counter evolving chemical and biologic threats, and developing medical countermeasures to chemical or biological weapons of mass destruction. Further, the Committee believes that additional research of battlefield treatment is necessary and encourages the Assistant Secretary of Defense (Health Affairs) to explore solutions for life threatening battlefield complications such as sepsis. The Committee also encourages the use of telemedicine and other technologies that would allow for better collection, integration, and transfer of patient data from battlefield medical units through transport and treatment. In preparation for environments military personnel may face while serving, the Committee encourages the Assistant Secretary of Defense (Health Affairs) to establish protocols providing for the training, transport, and treatment for service members exposed to highly infectious diseases. The Committee also encourages the Assistant Secretary of Defense (Health Affairs) to continue offering competitive grants to applicants from academia, industry, and federal government agencies to expand the chemical control toolbox, and to develop and validate vector management strategies needed to protect deployed military personnel.