April 3, 2020

The Honorable Richard Shelby
Chairman
Appropriations Subcommittee on Defense
113 Dirksen
United States Senate
Washington, DC 20510

The Honorable Richard J. Durbin
Vice Chairman
Appropriations Subcommittee on Defense
711 Hart
United States Senate
Washington, DC 20510

Dear Chairman Shelby and Vice Chairman Durbin:

As your Subcommittee begins work on the Fiscal Year 2021 (FY21) Defense Appropriations bill, we respectfully request adequate funding for the Gulf War Illness Research Program (GWIRP) within the Department of Defense (DoD) Congressionally Directed Medical Research Programs (CDMRP). We also thank you for providing the program $22 million in FY 2020.

By congressional design, the GWIRP is a unique medical research program narrowly focused on improving the health and lives of Veterans with Gulf War Illness. Reports by the National Academy of Sciences (NAS) and government committees have shown that: 1) Gulf War Illness (“GWI”), likely caused by toxic exposures, affects up to one-third of the nearly 700,000 veterans who served in the 1991 Gulf War; and 2) GWI’s debilitating symptoms typically include "some combination of widespread pain, headache, persistent problems with memory and thinking, fatigue, breathing problems, stomach and intestinal symptoms, and skin abnormalities."¹

The GWIRP is narrowly focused on unraveling GWI’s underlying pathobiology, improving its definition and diagnosis, and developing treatments. While two-thirds of GWIRP-funded studies are still in progress, the growing body of results published in peer-reviewed scientific journals demonstrates steady advances toward the GWIRP’s goals. GWIRP-funded pilot studies shown as promising are now progressing to larger-scale clinical trials. These successes are the direct result of clear, treatment-focused congressional direction, stable appropriations, and effective management. Key recent GWIRP-funded results include:

- The **first direct evidence of neuroinflammation** in veterans with GWI,² a treatable target.
- **Significantly different gut microbiome patterns** in GWI, including greater plasma levels of an inflammatory cytokine and associated with significantly more reported GW chemical weapons exposure and GWI symptoms.³

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³ Janulewicz, Patricia A.; Seth, Ratanesh K.; Carlson, Jeffrey M.; Ajama, Joy; Quinn, Emily; Heeren, Timothy; Klimas, Nancy; Lasley, Steven M.; Horner, Ronnie D.; Sullivan, Kimberly; Chatterjee, Saurabh.  (2019).  "The Gut-Microbiome in Gulf War
A 25 percent reduction in key GWI symptoms by treating GWI with KPAX002, a proprietary combination designed to support mitochondrial function.\(^4\)

Recognizing the GWIRP’s progress, the recommendations in the last Research Advisory Committee report remain instructive: "Congress should maintain its funding to support the effective treatment-oriented [GWIRP]."\(^5\) The discoveries through the GWIRP continue to represent encouraging steps toward achieving the treatment goals articulated by the NAS: “to speed the development of effective treatments, cures, and, it is hoped, preventions” for current and future U.S. forces at risk of similar exposures and outcomes. Indeed, the GWIRP has served as a model of how to conduct treatment-oriented research to address a challenging illness and is succeeding where earlier programs failed. Its two-tier peer-reviewed and highly competitive process ensures the independence and value of the results produced. Unlike the VA’s research program, which only funds VA researchers, the GWIRP seeks out and funds the best research by any combination of government, academic, or private-sector researchers and research teams.

We respectfully request that you provide the necessary resources in the FY21 Defense Appropriations bill to support this vital and effective program as it progresses into more advanced, larger-scale clinical trials – a development indicative of the GWIRP’s steady progress, but one that comes with well-justified, added costs. Furthermore, it remains critical to the program’s success and accountability that the GWIRP is retained as a stand-alone program within the CDMRP and not be combined as a topic area within broader, less-targeted research programs.

Thank you for your consideration of our request, which is supported by the Veterans for Common Sense, Blinded Veterans Association (BVA), Jewish War Veterans of the USA, Military Order of the Purple Heart, Non Commissioned Officers Association, the Quinism Foundation, TREA: The Enlisted Association, Veterans and Military Families for Progress, Fleet Reserve Association, Association of the United States Navy, Sgt. Sullivan Circle.

Sincerely,

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Tammy Baldwin
United States Senator

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Jon Tester
United States Senator

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Kamala D. Harris  
United States Senator

Debbie Stabenow  
United States Senator

Kirsten Gillibrand  
United States Senator

Maria Cantwell  
United States Senator

Dianne Feinstein  
United States Senator

Kyrsten Sinema  
United States Senator