The Gulf War Illness Research Program (GWIRP) (DoD-CDMRP)

PREPARED BY: VETERANS FOR COMMON SENSE. Last Updated February 26, 2021

By congressional design, the Congressionally-directed **Gulf War Illness Research Program** (**GWIRP**), created by Congress as a Congressionally Directed Medical Research Program (**CDMRP**) within the Department of Defense, is a unique medical research program narrowly focused on identifying treatments and diagnostic markers for Gulf War Illness (GWI).^{1,7,8,9,10}

"GWI is characterized by multiple, diverse symptoms that typically include chronic headache, widespread pain, cognitive difficulties, debilitating fatigue, gastrointestinal problems, respiratory symptoms, sleep problems, and other abnormalities that could not be explained by established medical diagnoses or standard laboratory tests. The population of Veterans affected by GWI is a subset of the nearly 700,000 U.S. Warfighters who served during the 1990-1991 Gulf War. Studies indicate that approximately 25-32% of Gulf War Veterans continue to experience symptoms associated with their deployment." "Scientific research... supports and further substantiates... that Gulf War illness is a serious physical disease, affecting at least 175,000 veterans of the 1990-1991 Gulf War, that resulted from hazardous exposures in the Gulf War theater." (p.1)

The GWIRP is unique in the federal government. The GWIRP's unprecedented vision is, "Improved health and lives of Veterans who have Gulf War Illness." The GWIRP aims to achieve that vision by its mission to, "Fund Gulf War Illness research that expeditiously identifies effective treatments and accelerates their clinical application, improves definition and diagnosis, and results in better understanding of pathobiology and symptoms of disease." 1

No other federal program has ever existed with a similar, bench-to-bedside, narrow focus. VSO's and legislators have said, "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." ¹³ Important discoveries made by the GWIRP may also help protect current and future U.S. military service members at risk of similar toxic exposures. ^{2(pp. 10, 260-64); 3(pp. 1, 4, 5, 13, 78, 83)} The GWIRP may also be a model for developing treatments relevant to other military toxic exposures. ¹¹

The GWIRP is unique in several other ways. It **emphasizes collaboration** to solve GWI's multisymptom, multi-system complexities by funding multiple interdisciplinary and inter-institutional research collaborations ("consortia"). And, while VA's research program is "intramural" (it only funds VA researchers), the GWIRP is an "**extramural**" program and is not similarly constrained as it seeks to find and fund the best research proposals by any government, academic, or private-sector researchers. While the GWIRP's two-tier peer-reviewed funding is open to all researchers, it is **highly competitive**, thus ensuring the **independence** and **value** of the results produced.^{1,13}

The GWIRP and all CDMRP's include "consumer reviewers", a state-of-the-science practice that includes afflicted patients at every level of program development and proposal review. This ensures that ill Gulf War veteran consumer reviewers – who offer unique insight, focus, and urgency – have equal footing in identifying the impact of and helping to determine which research proposals are funded.¹

The GWIRP is a stand-alone, military-related program funded since FY2006 by **congressionally-directed annual appropriations** under the Congressionally Directed Medical Research Program (<u>CDMRP</u>), within the U.S. Department of Defense (**DoD**) health program.^{1,7,8,9,10}

NEED FOR THE GWIRP. The landmark National Academy of Sciences (NAS) report on GWI stated, "Veterans who continue to suffer from these discouraging symptoms deserve the very best that modern science and medicine can offer to delineate the true underlying cause of these symptoms in

order to **speed the development of effective treatments, cures, and, it is hoped, preventions**. The committee suggests a path forward to accomplish these goals and we believe that, **through a concerted national effort and rigorous scientific input, answers can likely be found**." ^{2(pp. 10, 260-64)}. That recommended effort is embodied in the continuation of the GWIRP.

The last formal report of the RAC-GWVI also noted excess rates of Lou Gehrig's disease (ALS), migraines, repeated seizures, neuralgia/neuritis, stroke, lung cancer, sleep dysfunction, gastrointestinal conditions, respiratory conditions, and skin disorders among Gulf War veterans – and doubled brain cancer death rates among veterans potentially exposed to chemical warfare agents detonated at an Iraqi munitions complex at Khamisiyah, Iraq. 3(pp.23-26)

SUPPORT FOR THE GWIRP. For FY2021, a bipartisan group of **109 U.S. House Members** (including the House Veterans' Affairs Committee Chair, Ranking Member, and many HVAC members)¹² and **22 U.S. Senators** (including the Ranking Member of the Senate Veterans' Affairs Committee and many SVAC members)¹³ cosigned letters in support of continued GWIRP funding. The RAC,³ dozens of Veterans' Service Organizations (VSO's),^{4,5,6,11} and numerous scientist and consumer reviewers serving with the GWIRP^{7,8,9,10} have publicly expressed strong support for the GWIRP.

FY21 GWIRP Funding was Supported by 25 VSO's, including: Veterans for Common Sense, Association of the United States Navy, Blinded Veterans Association, Burn Pits 360, Cease Fire Campaign, DAV (Disabled American Veterans), Fleet Reserve Association, High Ground Veterans Advocacy, Jewish War Veterans of the USA, Military Order of the Purple Heart, National Veterans Legal Services Program, National Vietnam & Gulf War Veterans Coalition, Non Commissioned Officers Association, ROA, Sergeant Sullivan Circle, Swords to Plowshares, The Quinism Foundation, TREA: The Enlisted Association, United Soldiers and Sailors of America - USASOA, Veteran Warriors, Veterans and Military Families for Progress, Veterans of Foreign Wars, VetsFirst, Vietnam Veterans of America, and the Wounded Warrior Project.

GWIRP (CDMRP-DHP-DOD) APPROPRIATIONS:1

FY19-FY21 \$22m, **FY18** \$21m, **FY13-FY17** \$20m, **FY12** \$10m, **FY09-FY11** \$8m, **FY08** \$10m, **FY06** \$5m

¹ Gulf War Illness Research Program (GWIRP) website, Congressionally Directed Medical Research Program (CDMRP), U.S Department of Defense: http://cdmrp.army.mil/GWIRP

² Institute of Medicine, "Gulf War and Health, Volume 8: Update of Health Effects of Serving in the Gulf War," Washington, DC: The National Academies Press, 2010. www.nap.edu/catalog/12835/gulf-war-and-health-volume-8-update-of-health-effects

³ Research Advisory Committee on Gulf War Veterans' Illnesses (RAC-GWVI), U.S. Department of Veterans Affairs, "Gulf War Illness and the Health of Gulf War Veterans: Research Update and Recommendations, 2009-2013." Washington, D.C.: U.S. Government Printing Office, May 2014. www.va.gov/RAC-GWVI/RACReport2014Final.pdf

⁴ Letter, dated April 1, 2020, from 25 veterans service organizations to Senate Defense Appropriations Subcommittee Chair Richard Shelby and Ranking Member Richard Durbin.

⁵ Independent Budget Veterans Service Organizations, "The Independent Budget for the Department of Veterans Affairs: Fiscal Year 2015." www.independentbudget.org/2015/IB 2015.pdf.

⁶ IBVSO's, "The Independent Budget Veterans' Agenda for the 115th Congress: Policy Recommendations for Congress and the Administration." http://www.independentbudget.org/2015/IB 2015.pdf

⁷ GWIRP program booklet, "Gulf War Illness Research Program," April 2014. http://cdmrp.army.mil/gwirp/pbks/gwirppbk2014.pdf.

⁸ GWIRP program booklet, April 2016. http://cdmrp.army.mil/gwirp/pbks/gwirppbk2016.pdf

⁹ GWIRP program booklet, April 2018. http://cdmrp.army.mil/gwirp/pbks/gwirppbk2018.pdf

¹⁰ GWIRP program booklet, September 2020. https://cdmrp.army.mil/gwirp/pbks/gwirppbk2020.pdf

¹¹ Veterans of Foreign Wars, testimony before the U.S. House Subcommittee on Veterans' Health, June 7, 2018: https://docs.house.gov/meetings/VR/VR03/20180607/108367/HHRG-115-VR03-Wstate-WisemanK-20180607.pdf

¹² Sablan-Bergman-Takano-Roe Letter, dated March 17, 2020, from 109 House Members to House Defense Appropriations Subcommittee Chair Peter Visclosky and Ranking Member Ken Calvert.

¹³ Baldwin-Tester Letter, dated April 3, 2020, from 22 Senators to Senate Defense Appropriations Subcommittee Chair Richard Shelby and Ranking Member Richard Durbin.