## The Congressionally Directed Medical Research Programs' Toxic Exposures Research Program

Missy Tursiella, Ph.D. Program Manager

21 November 2024

Transforming Health Care through Innovative and Impactful Research



The views expressed in this presentation are those of the author and may not reflect the official policy or position of the Department of the Army, Department of Defense, or the U.S. government. Future use of this presentation does not constitute, express, or imply endorsement of the user by the Department of the Army.

UNCLASSIFIED

#### For more information, visit cdmrp.health.mil



- CDMRP Overview
- Toxic Exposures Research Program, TERP
- Gulf War Illness Research
- TERP Coordination Efforts

## About CDMRP



### Mission

Responsibly manage collaborative research that discovers, develops, and delivers health care solutions for Service Members, their Families, Veterans and the American public





### **IMPACT**



- Funds impactful, innovative research for specific programs added by Congress to the Defense Appropriations Bill
- Targeted research fills gaps and addresses high-priority needs
- Focused on improving health, well-being, and health care quality for those affected

### STRATEGY



- Annually adapts each program's vision and investment strategy, allowing rapid response to changing needs, opportunities, and congressional intent
- Publicly announces and competes funding opportunities
- Ensures scientific excellence and programmatic relevance through the National Academy of Medicine-recommended two-tier review process

## Hallmarks, cont'd



### COLLABORATION



- Integrates consumers as full participants throughout program processes and as the "True North" of CDMRP
- Collaborates with other funding organizations complementary, not duplicative

### **STEWARDSHIP**

G	ſŚ

- Obligates funds up front; limited out-year budget commitments
- Maximizes funding available for research through low management costs and efficient processes
- Maintains transparency and accountability

# Understand DOD Funding



### **Congressional Special Interest (CSI) versus DOD Core funding**



- CDMRP's CSI funds are directed by Congress and appropriated through the DoD budget
  - Obligated up-front because there is no guarantee of out-year funding
- DoD Core funds are planned through specific budgeting processes and appropriated yearly in response to the President's DoD budget request
  - Projects can be incrementally funded in outyears

# **CDMRP FY24 Appropriations**

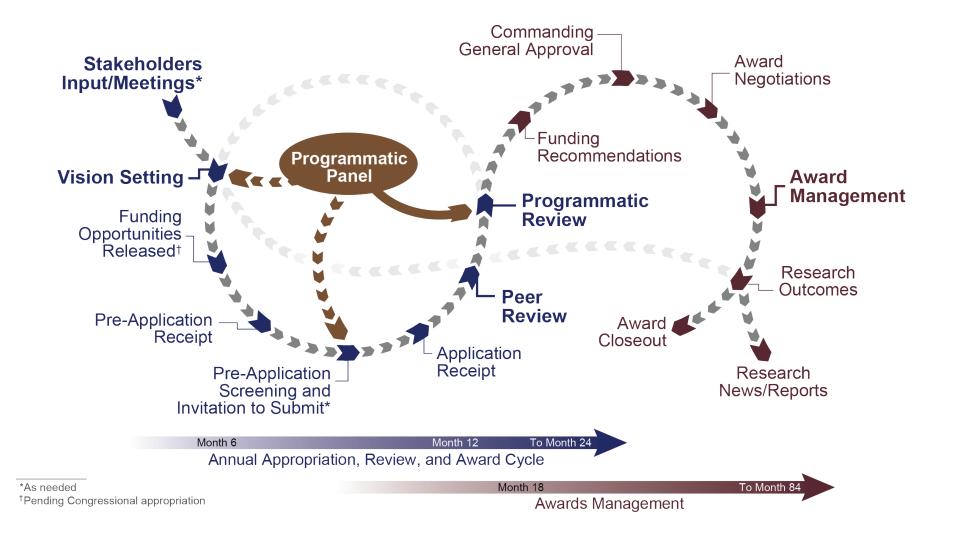


Research Program	FY24 \$M	Research Program	FY24 \$M
Alcohol and Substance Use Disorders	\$4.0	Neurofibromatosis	\$25.0
Amyotrophic Lateral Sclerosis	\$40.0	Ovarian Cancer	\$45.0
Arthritis (New for FY24)	\$10.0	Pancreatic Cancer	\$15.0
Autism	\$15.0	Parkinson's	\$16.0
Bone Marrow Failure	\$7.5	Peer Reviewed Alzheimer's	\$15.0
Breast Cancer	\$150.0	Peer Reviewed Cancer (18 Topics)	\$130.0
Combat Readiness Medical	\$5.0	Peer Reviewed Medical (42 Topics)	\$370.0
Duchenne Muscular Dystrophy	\$10.0	Peer Reviewed Orthopaedic	\$30.0
Epilepsy	\$12.0	Prostate Cancer	\$110.0
Glioblastoma (New for FY24)	\$10.0	Rare Cancers	\$17.5
Hearing Restoration	\$5.0	Reconstructive Transplant	\$12.0
Joint Warfighter Medical	\$20.0	Spinal Cord Injury	\$40.0
Kidney Cancer	\$50.0	Tick-Borne Disease	\$7.0
Lung Cancer	\$25.0	Toxic Exposures	\$30.0
Lupus	\$10.0	Traumatic Brain Injury and Psychological Health	\$175.0
Melanoma	\$40.0	Tuberous Sclerosis Complex	\$8.0
Military Burn	\$10.0	Vision	\$20.0
Multiple Sclerosis	\$20.0	TOTAL = \$1.509B	

## Program Cycle

UNCLASSIFIED





UNCLASSIFIED **Goal of the Two-Tier Review Process** 

To develop funding recommendations that balance *the most meritorious science* and offer the highest promise to *fulfill the programmatic goals* set forth in the funding opportunity



- Funds obligated up front; limited out-year budget commitments (but milestones imposed)
  - No continuation funding

9



- expertise needed
- No contact between applicants, reviewers, and program staff

# Inclusion of Women and Minorities



- CDMRP requires that women and individuals from minority groups be included as subjects in all CDMRP-funded clinical research studies, unless there is a clear, justifiable rationale that it is inappropriate with respect to the health of the subjects or the purpose of the research
- Policy implemented in October 2020
  - Policy and Frequently Asked Questions document available at <u>https://ebrap.org/eBRAP/public/Program.htm</u>
- In all clinical research applications, investigators are required to provide a strategy for inclusion of women and minorities
- Maximizes generalizability and impact of study results



# Policy on Sex as a Biological Variable in Research



CDMRP expects researchers to study both males and females, across the full spectrum of basic, translational, and clinical research, unless there is a strong justification for only studying one sex

#### **HOW** DOES THIS POLICY IMPACT PROPOSED AND FUNDED RESEARCH?

Beginning with FY25 applications and awards, researchers must:

- Consider SABV in the study design and analysis plan
- Provide strong justification for proposing a single-sex study
- Report sex-based differences and/or disaggregate data

Applies to all stages of research				
Basic	<b>Translational</b>	Clinical		
Tissues Cell lines	Vertebrate animals	Humans Materials of human origin		
and various types of specimens				

#### **WHAT** IS THE DIFFERENCE BETWEEN SEX AND GENDER?

Sex	Gender
<b>Defined by DNA</b> <ul> <li>Anatomy</li> <li>Physiological</li> <li>Genetics</li> <li>Hormones</li> </ul>	<ul> <li>Social, cultural and psychological traits</li> <li>Identity and expression</li> <li>Roles and norms</li> </ul>

Policy and Frequently Asked Questions document available at: <a href="https://ebrap.org/eBRAP/public/Program.htm">https://ebrap.org/eBRAP/public/Program.htm</a>

#### WHY IS THIS POLICY IMPORTANT?

Diseases, conditions and interventions impact males and females differently. For example:

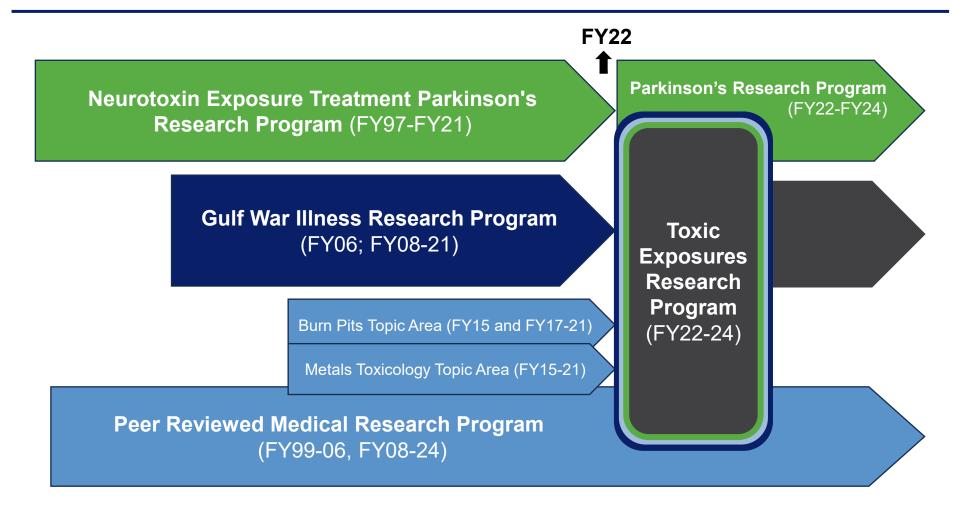
- Disease prevalence, symptoms and outcomes
- Drug efficacy and metabolism

#### Improves

our understanding of health and disease in both men and women research rigor, transparency and generalizability

### **CDMRP History of Toxic Exposures Research**





"Transitioning related research to a new, broader program, including neurotoxin exposure treatment research, research on Gulf War illness, exposures to burn pits, and other service-related exposures to potentially toxic chemicals and materials, will allow the research community to improve scientific understanding and pathobiology from exposure, more efficiently assess comorbidities, and speed the development of treatments, cures, and preventions." [Consolidated Appropriations Act, 2022]

#### UNCLASSIFIED

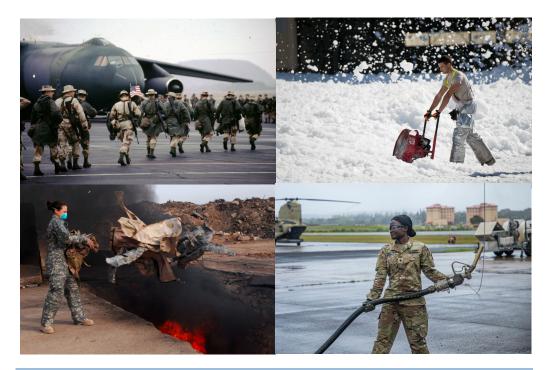
### Toxic Exposures Research Program (TERP)

### Vision

Prevent, minimize and mitigate the impact of military-related toxic exposures and improve the health and quality of life of those affected

### **Mission**

Support impactful research aimed at identifying the cause and understanding the health outcomes, comorbidities, and pathological mechanisms associated with military-related toxic exposures to facilitate the prevention, diagnosis, and treatment of the visible and invisible diseases and symptoms impacting Service Members, their Families, Veterans, and the American public



### Total Appropriations (FY22-24): \$90M

https://www.dvidshub.net/image/6015652/gulf-war-deployment https://www.dvidshub.net/image/1025646/flurry-foam-released-travis https://www.dvidshub.net/image/80303/supplying-medicalmissionhttps://www.dvidshub.net/image/6621582/chinook-refuel

## **TERP Program Goals**





Elucidate mechanisms of how military-related toxic exposures result in adverse effects, including but not limited to toxicities, malignancies, neurologic and respiratory disorders, cardiac complications, sleep disorders, immune system dysfunction, gastrointestinal issues, etc.



**Diagnose the effects of military-related toxic exposures**, understand the phenotypic, pathological and clinical outcomes associated with short-term and long-term exposures, and predict disease progression.



**Predict and prevent military-related toxic exposures** by identifying strategies that can anticipate, identify, monitor and prevent Service Members and the American public from adverse effects of exposures to toxic substances.



**Develop therapeutics, treatments and strategies** to minimize symptoms and disease progression associated with military-related toxic exposures.

All program goals are of equal importance For full language, please refer to the TERP FY24 Program Announcements

## **TERP Topic Areas**





All topic areas are of equal importance

## **TERP Overview**



- Focused on healthcare solutions for adverse health outcomes associated with military-related toxic exposures that impact pre- and post-911 Service Members and Veterans
  - Military-related toxic exposures also impact Military Families and the American public

### • Encourage collaborative partnerships

- Collaboration between non-DOD/non-VA and DOD and/or VA researchers and clinicians to leverage access to existing DOD and VA resources
- Incentives for partnerships
- Support interdisciplinary research
- Coordinate with the VA, NIH and other funding organizations
- Support research across the pipeline (basic, translational and clinical) and a diverse pool of researchers (academia, industry, DOD, VA etc.)
  - FY22-FY23: supported 43 projects, 58 awards, total of \$53.7M

### FY24 TERP Funding Opportunities & Timeline



### \$500K

#### Investigator-Initiated Research Award:

Supports studies that will make an important contribution toward research and/or patient care for a disease or condition associated with military-related toxic exposures.



#### **Translational Research Award:**

Supports translational research that will accelerate the movement of promising ideas in military-related toxic exposure research into clinical applications, including health care products, interventions, technologies, and/or clinical practice guidelines.

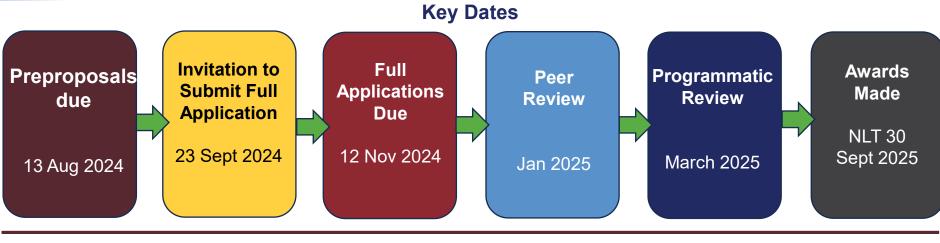


#### **Clinical Trial Award:**

Supports the rapid implementation of clinical trials with the potential to have a significant impact on the prevention, treatment, or management of symptoms, diseases, or conditions associated with or resulting from military-related toxic exposures.

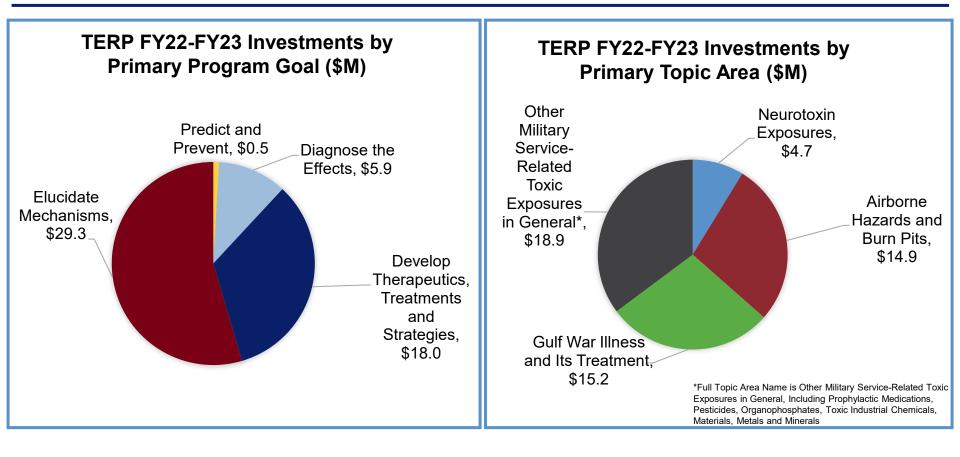
Funding amounts refer to direct cost limits

 For full language, please refer to the TERP FY24 Program Announcements



# TERP FY22-FY23 Investments





Between FY22-FY23, the TERP supported ~\$29.5M, 27 projects, that have elements focused on women's health and/or evaluate sex as a biologic variable.

#### UNCLASSIFIED

## **TERP Portfolio Diversity**



### **Exposures\***

- Per- and polyfluoroalkyl substances
- Particulate matter 2.5
- Malaria prophylactic medication
- Sulfur dioxides +/- cigarette smoke
- Pyridostigmine Bromide and organophosphates
- Beryllium
- Trichloroethylene
- Hexavalent chromium
- Cadmium
- Jet fuel
- Burn pits
- Pesticides

### **Health Outcomes\***

- Gulf War illness
- Cancers (testicular, lung, prostate blood)
- Deployment-Related Respiratory Disease & other respiratory conditions/diseases
- Ovarian function
- Parkinson's disease, Alzheimer's disease, neurodegeneration & cognitive dysfunction
- Liver disease
- Reproduction & developmental impacts
- Cardiac Outcomes
- Immunotoxicity

\*lists are not all inclusive

## **TERP Metrics**



- Awards: 43 projects, 58 awards\*
- Total scientific investment, FY22-23: \$53.7M
- Publications: 2 as of Nov 2024
- Number of awards supporting clinical trials: 2 projects, 4 awards\*

\* TRA and CTA awards allow for partnering; some projects may include multiple awards

### **Ongoing Gulf War Illness Projects - TERP**



# The TERP invested over \$15M (12 projects;15 awards) related to GWI since its inception in FY22.

# Clinical Trial to Improve Quality of Life

 Decentralized, confirmatory clinical trial that aims to confirm that acupuncture helps patients impacted by pain and fatigue associated with GWI\*

### **Preclinical Treatment Pipeline**

- Evaluation of ganaxolone to reduce GWI-induced neuronal damage and pathology\*
- Intranasal biological therapeutic to treat broad range of symptoms associated with GWI including neuroinflammation\*

# Diagnostics with Potential to Lead to Therapeutic Targets

- Non-invasive brain imaging tool combined with blood markers and computational analysis to identify neurological changes and biomarkers in Veterans with GWI; If successful, will be able to diagnose and predict risk of neurological impairment and ultimately facilitate personalized medicine treatments.\*
- Metabolic biomarkers of Gulf War exposures and GWI using pre- and post- deployment samples (DOD Serum Repository) from Veterans living with GWI compared to healthy controls. Veterans identified using data from the Boston Biorepository and Integrative Network, BBRAIN\*



- Awards: 240
- Total scientific investment, FY06; FY08-FY21: \$236M
- Publications: ~300 as of Nov 2024
- Number of awards supporting clinical trials: 40

### **Ongoing Gulf War Illness Projects- GWIRP**



### The former GWIRP has 49 ongoing research projects, totaling ~\$70M

### **Clinical Trials**

- Transcranial magnetic stimulation to treat headache and pain in those with GWI\*\*
- CoQ10-ubiquinone to alleviate symptoms of GWI
- Consortium- (Phase Ib mifepristone/etanercept, Phase II N-Acetyl Cysteine, Phase II Bacopa)
- Nicotinamide riboside (Niagen) for restoring mitochondrial bioenergetics in GWI patients
- Oleoylethanolamide for Targeting Lipid Metabolism in GWI
- Montelukast to treat cognitive and mood dysfunction and neuroinflammation in Veterans with GWI

### **Biomarkers & Diagnostics**

- Autoantibody biomarkers in plasma and saliva to diagnose the time course of sarin-induced nervous system injury
- Ocular measurements and biomarkers to diagnose and monitor GWI progression\*\*
- P-Tau proteins as a marker for potentially more severe and neurodegenerative forms of GWI

### **Exploring Treatment Options**

- Cannabidiol product to improve pain, insomnia, neurologic dysfunction and memory
- Regenerative epigenetic treatment for permanent reduction of neuropathology and pain and improved memory using FDA-approved histone deacetylases

### **Mechanisms**

- The role of gut signals and systemic inflammation, particularly in the brain and the contribution to GWI
- Impact of airborne toxic chemicals and pollutants experienced during the Gulf War on the development of GWI-associated sinonasal disease.

\*\*relationship to VA-funded effort(s)

# CDMRP Search Awards Function

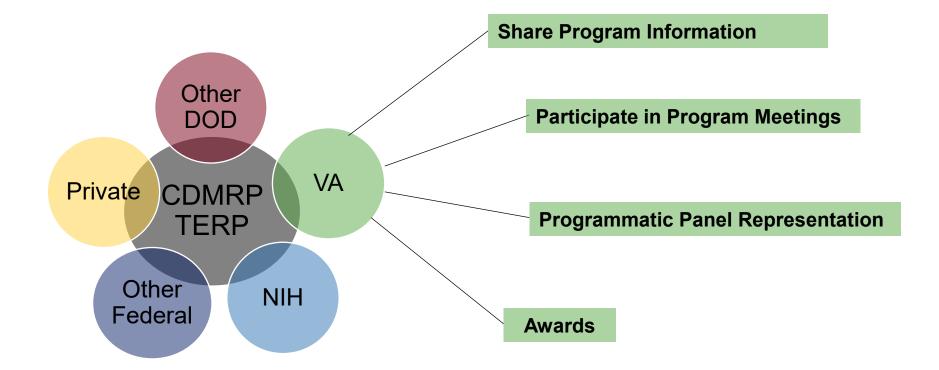


- Abstracts, investigators, investments and publications can be found on the CDMRP website.
- All awards posted by the end of the fiscal year (30 Sept)

Transforming Health Care through Innovative and Impactful Research						
Home Research Progra	ms • Funding Opportunities •	Consumers +	Search Awards & Publications	About Us <del>-</del>	Search	Submit
Home / Search Awards						
Search Awa	ırds					2
Information about research that is funded by this office may be found by performing searches on our database. The following options provide access to the data by varying means. In order to create a search query, please fill in the following field(s) with data that most closely match your search criteria, then press the Perform Search button. Note: 1. Search results include only those projects assigned to CDMRP for management. 2. All projects within a given program may not be available until the award has been finalized. 3. Analysis of data presented on this site may be limited based on searching capability, timing and availability of appropriate research codes. 4. Some search fields allow for multiple selection, press and hold the "Ctrl" key to select multiple options, or "Shift" to select a range of multiple options.						
Research Program:		ch Awards	Search Publications Only	set		
	All Research Programs Alcohol and Substance Use Dis Amyotrophic Lateral Sclerosis Army Rapid Innovation Fund					•
Fiscal Year:						*

### **TERP Coordination with VA**





### **TERP Coordination with VA**



### **Share Program Information**

- Briefings and informational meetings
- Quarterly meetings with VA GW Research Program

### **Attend Program Meetings**

- Inaugural stakeholders meeting
- Observe annual programmatic review and vision setting

### **Participate in Two-Tiered Review**

• Peer reviewers and Programmatic panel members

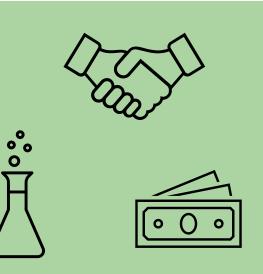


**CDMRP** 

### **TERP Coordination with VA**

### Awards

- Some CDMRP GWIRP and TERP funded projects include VA investigators
- All applications recommended for funding are reviewed for scientific overlap prior to award and PIs are reviewed at least annually
- Application and award information is exchanged between VA and CDMRP (and NIH) via NIH's Query View Report system





27



## Award Synergy



### **Awards**

- TERP funded projects may advance ideas/solutions initiated by other research programs (VA, NIH, other CDMRP etc.) or address different components of a research question.
- Applicants <u>must</u> apply to current funding opportunities and be competitively selected through our two-tiered review process
- Examples from TERP and GWIRP:
  - Diagnostic efforts for chronic bronchiolitis and Deployment-Related Respiratory Disease funded by CDMRP GWIRP (FY16), VA (FY21) and CDMRP TERP (FY22)
  - "Olfactory and cognitive decrements in 1991 Gulf War veterans with gulf war illness/chronic multisymptom illness" funded by VA (FY19) and CDMRP GWIRP (FY20)
  - Eye imaging as a biomarker for GWI; studies on eye pain and light sensitivity in Veterans with GWI funded by CDMRP GWIRP (FY19) and VA (FY24)





### The CDMRP TERP will:

- Manage current and any potential future appropriations according to Congressional language and intent
- Prioritize high impact research that will provide solutions for Service Members, their Families, Veterans and the American public that have been or could potentially be impacted by military-related toxic exposures
- Encourage collaborations with VA and DOD investigators
- Coordinate with VA, DOD, NIH and other federal and nonfederal organizations

## Questions? For more information, please visit: cdmrp.health.mil



#### UNCLASSIFIED **Consumers are the "True North"** and Foundation of the CDMRP

**CDMRP** includes consumers – patients, survivors, family members, and/or caregivers in every aspect of the program lifecycle.

Consumers serve as full voting members on peer review and programmatic panels. Through their lived experiences with the target disease, disorder, or injury, consumers represent their respective communities and add valuable perspectives and a sense of urgency to the program mission, investment strategy, and research focus.



### PROGRAM LIFECYCLE **Stakeholder** Meeting Vision Setting **Pre-App** Screening Peer **Review Programmatic Review** Funding Recommendations Award Execution research project **Awards Management/** Closeout



#### FY23 Consumer Involvement

**93** consumers\* assigned to **Programmatic Panels as** members and ad hoc reviewers representing **91** consumer advocacy organizations, Service Members, or Veterans

854 consumer reviewers\*\* assigned to Peer Review Panels representing **334** consumer advocacy (nominating) organizations

Participate on research teams for funded projects 19 programs offered funding opportunities that incorporate consumer participation in the

> \* All unique individuals \*\* 734 unique individuals













### **Interested in Serving as a CDMRP Consumer?**

#### **Consumer Stories**

Morgan Moore: Autism is part of my everyday life, ARP Consumer Reviewer

Mapping a Path Forward: Patient Involvement throughout ALS Therapeutic Development and Clinical Research, ALSRP Consumer Reviewer

Kelsey Smith: Advocacy for People with Celiac Disease Amidst Growing Popularity for a Gluten-Free Diet, *PRMRP Consumer Reviewer* 

PCRP Patient Advocate Perspective – Todd Seals: A Wild Ride

Peter Fiduccia: The Importance of Polycystic Kidney Disease, *PRMRP Peer Reviewer* 

Jordan Hathorn: An Impactful Way to Thank Service Members, *PRORP* Peer Reviewer

Devyn Mitchell: Staying Involved in Her Own Lupus Journey, *LRP Peer Reviewer* 

Consumer Story: Carl DeSpiegelaere, TBIPHRP Consumer Reviewer

#### Consumer Involvement

"It is intellectually challenging and a big commitment. But that is part of what I like so much about serving as a Peer Reviewer: it's hard work but you come away from it feeling as if you have made a significant contribution; it is incredibly rewarding."

- Linnea Duff, LCRP

The Congressionally Directed Medical Research Programs (CDMRP) welcomes patients, survivors, family members, and advocates to play a pivotal role in the future of biomedical research funding. To transform healthcare for our Service members and the American public, the CDMRP looks to those who have the most experience, who understand the effects of a disease, an injury, or a condition - the individuals (consumers) living with breast cancer, orthopaedic injury, Parkinson's disease, etc. By integrating patients, survivors, family members and/or care takers into the scientific review process, the CDMRP is able to enrich the scientific review with personal perspective, passion, and a sense of urgency that ensures the human dimension is incorporated in the research focus. Over 2,000 consumers have served as Peer and Programmatic reviewers since 1995. By partnering with consumers, the CDMRP strives to find and fund collaborative research that discovers, develops, and delivers health care solutions for Service members, Veterans, and the America public.



Click on Image to View Program Booklet



About Us

Learn More About CDMRP »

Consumer Experiences



Frequently Asked Questions

Consumer Involvement in Peer Review: Step by Step 🛛

View Frequently Asked Questions »



Eligibility Requirements

Consumer Reviewer Eligibility Checklist »

Program Consumer Reviewer Requirements



Apply to be a Consumer Reviewer

Consumer Nomination Application

How You are Evaluated »

#### UNCLASSIFIED

### **TERP Consumers**



For the purposes of the TERP, a consumer is a person living with a disease, injury, or condition or may be a family member or caregiver of a person impacted by a disease/injury/condition associated with military-related toxic exposures. The consumer must be an active participant in an advocacy, outreach, or support organization, or if military personnel on active duty, be approved to participate by their Commanding Officer.

#### Ways to Participate:

- **Review Process**: consumers included on peer and programmatic review panels
- Research:
  - Applicants encouraged to use relevant Veteran and/or military populations/samples/data sets in their studies (or justify how the chosen populations/samples/data sets are relevant to military-related toxic exposures and will benefit Service Members, Veterans, and/or their Families)
  - Applicants to translational and clinical trial award mechanisms are encouraged to include consumers as part of their research teams

## **TERP Consumers**



"I am incredibly grateful to the Vietnam Veterans who welcomed me home from Desert Storm. They spoke out on our behalf when we came back with undiagnosed illnesses now understood as Gulf War Illness. I listened and learned so much from them in their struggle with the aftermath of Agent Orange and other tactical herbicide exposures. More recently, I have welcomed home a new generation of Veterans and listened to their concerns about toxic exposures, including airborne hazards, open burn pits, and other particulate matter exposures. It is my hope that the Toxic Exposures Research Program will expand the knowledge of and discover interventions for the many conditions and health concerns that Veterans experience and that the outcomes of the program will contribute to a better quality of life."

Tech. Sgt. Vera Roddy, U.S. Air Force Retired, Veterans of Foreign Wars

"As a 23-year Veteran of combat arms and an end user of the research being funded under the CDMRP TERP, I will admit that I had some reservation of exposing myself again even if it was only mentally to the environment that all Service Members experience while serving our country. After serving on the TERP programmatic panel, I was humbled by the volume of knowledge, experience and determination that was assembled for the purpose of actually finding solutions." **1Lt Andrew Myatt, U.S. Army Retired, Wounded Warrior Project**