

# Congress: Create Stand-Alone Arthritis Research Program at the Department of Defense

**D**espite epidemic-level rates of arthritis in our Armed Forces and the growing cost of this disease to the U.S. military system, there is currently no dedicated Department of Defense (DoD) budget for medical research on arthritis. Many other diseases, including autism, breast cancer, and epilepsy, receive dedicated medical research budgets at the DoD. A dedicated research budget for arthritis is critical to accelerate prevention and treatment strategies for affected U.S. service members.

## Arthritis in the Military: Prevalence and Impact

The physical demands of military service lead to high-impact injuries that can create long-term damage to joints, tissue, and cartilage. As a result, many service members and veterans struggle with debilitating joint pain, activity limitations, and risks associated with medical procedures.

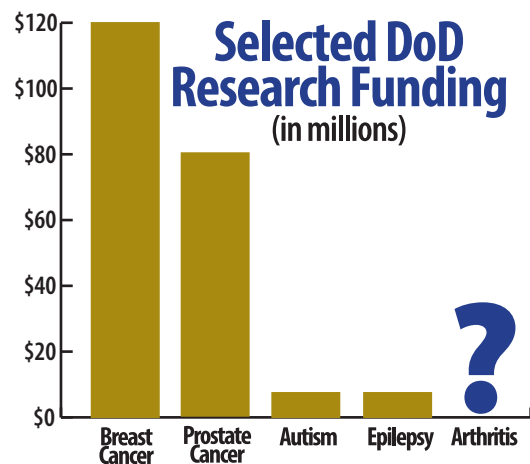
- Arthritis is the **leading cause of disability** among U.S. military veterans.
- Arthritis is the **second leading cause of medical discharge** from the U.S. Army.
- **One in three** veterans is diagnosed with arthritis, compared to one in five members of the general U.S. population.
- Arthritis **limits quality of life** for veterans.
- Arthritis is responsible for **rising health costs** at the DoD and the VA because of its impact on disease management, joint pain, loss of function, and joint replacement surgery.



## Dedicated DoD Arthritis Research Funding Is Key

Currently, arthritis and clinical care research—on both active duty military and veteran populations—is significantly limited.

Although arthritis research has been funded at the DoD since FY 2010 in the Peer-Review Medical Research Program (PRMRP) within the Congressionally Directed Medical Research Program (CDMRP), arthritis topics compete for funding with more than 30 medical topics authorized in the PRMRP, so funding is not guaranteed. Currently, 25 specific diseases have dedicated research budgets at the DoD. Given its prevalence and impact, arthritis should also have a stand-alone research budget at the DoD. Graph: Source: <http://cdmrp.army.mil/researchprograms>



## TAKE ACTION: Congress: Invest in Arthritis Research at the DoD

- ✓ Appropriate \$20 million for a dedicated arthritis research budget within the Department of Defense's Congressionally Directed Medical Research Program (CDMRP) to accelerate arthritis prevention strategies and treatment breakthroughs.



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# Arthritis Research in the Military: A Glimpse of What is Possible

**S**uccessful outcomes from past Department of Defense (DoD)-funded research projects provide a glimpse of what is possible with a dedicated arthritis research budget.

## The Injury Prevention Lab at Fort Campbell

In 2007, Fort Campbell opened a first-of-its-kind military lab designed to identify and prevent high-impact injuries that can lead to arthritis. Through a \$2.75 million grant, tests conducted at the Injury Prevention Lab identified and recreated the high-risk activities that cause injury and permanent joint damage. The test results have been used by researchers and physical therapists to develop an injury-prevention training program for soldiers prior to overseas deployment.

*Photo source: U.S. Army website*



## Using the DoD Serum Repository to Detect Early Markers of Lupus

In 2003, researchers used the Department of Defense Serum Repository—a unique resource containing nearly 30 million specimens—to identify early blood markers of lupus among service members. These markers are now used by rheumatologists to detect lupus in the general population, which leads to earlier diagnosis and treatment.<sup>1</sup>



## Invest in Arthritis Research at the Department of Defense

Congress must create a \$20 million dedicated arthritis research budget within the Department of Defense's Congressionally Directed Medical Research Program (CDMRP) to accelerate arthritis prevention strategies and treatment breakthroughs.

<sup>1</sup> Arbuckle MR1, McClain MT, Rubertone MV, Scofield RH, Dennis GJ, James JA, Harley JB. In: *New England Journal of Medicine*. 2003. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/14561795>.

