October 20, 2017

The Honorable Mac Thornberry
Chairman
House Committee on Armed Services
2208 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Thornberry:

As members of the Global Health Technologies Coalition (GHTC)—a group of more than 25 nonprofit organizations working to increase awareness of the vital role health technologies play in saving lives around the world—we write to highlight the critical role of medical and global health research and development (R&D) programs at the US Department of Defense (DoD) and urge your continued support for these efforts vital to our national and global health security. Importantly, we ask that as you conference the House and Senate Fiscal Year 2018 National Defense Authorization Acts (FY18 NDAA), you oppose provisions in Sections 733, 891, 892, and 893 of the Senate bill, which would limit our nation’s ability to develop medical countermeasures necessary to protect our troops and save lives around the world.

We understand that the primary mission of the DoD is to support our military men and women, and we write to stress the importance of the DoD’s infectious disease research—through the Congressionally Directed Medical Research Program (CDMRP) and other centers—for protecting the well-being of our service members overseas and the health of American civilians at home. We also recognize that DoD infectious disease research adds value to US global health efforts to address HIV/AIDS, tuberculosis, malaria, and neglected tropical diseases in low-income countries, which are critical to US global health security efforts.

For example, malaria, which threatens the lives of nearly 3.2 billion people in tropical and poor regions of the world, is also a significant threat to the operational readiness of the US military. More person-days were lost among US military personnel due to malaria than to bullets during every military campaign fought in malaria-endemic regions during the 20th century. Thanks to on-going research at DoD, nearly all of the most effective and widely used antimalarials—used to protect our service members overseas and adapted for wide-spread use in endemic regions—were developed in part by US military researchers. The 2014 Ebola epidemic in West Africa provides another example where DoD research was critical to our servicemen and women fighting the disease alongside local communities. The Department’s quick work to advance the development of Ebola vaccines and treatments during troop deployment to West Africa was vital to the response, and underscores the importance of DoD research for countermeasures to address the many disease threats that may undermine operational effectiveness.

Provisions introduced in the Senate FY18 NDAA threaten to undo vital medical research programs at the Department of Defense and nullify past investments in promising countermeasures for infectious disease and other health challenges. Specifically, Section 891: Improved Transparency and Oversight
over Department of Defense Research, Development, Test, and Evaluation Efforts and Procurement Activities Related to Medical Research, and Section 893: Oversight, Audit, and Certification from the Defense Contract Audit Agency for Procurement Activities related to Medical Research, enact restrictions on DoD medical research activities that would bring nearly every medical research program in the Department to a stand-still. Our coalition urges you to recognize the critical medical research conducted by the DoD and oppose provisions, including Sections 733, 891, 892, and 893 in the FY18 Senate NDAA, that would limit our nation’s ability to develop medical countermeasures necessary to protect our troops and save lives around the world.

In our increasingly interconnected world, infectious diseases are a plane ride—or mission deployment—away. Medical research for infectious diseases through the CDMRP at DoD has direct and important military relevance, and at the same time saves lives around the world and ensures global health security. Thank you for your attention to this important matter, and please do not hesitate to contact GHTC Policy Officer, Courtney Carson, at ccarson@ghtcoalition.org or (202) 540-4377 if you have questions or need any additional information.

Sincerely,

GHTC Members

Aeras

American Society of Tropical Medicine and Hygiene

AVAC: Global Advocacy for HIV Prevention

Elizabeth Glaser Pediatric AIDS Foundation

Global Health Council

Infectious Diseases Society of America

JHU Center for Health Security

PATH
RESULTS

Sabin Vaccine Institute

Treatment Action Group

TB Alliance

Washington Global Health Alliance

GHTC Partners

HIV Medicine Association

John Snow, Inc.

Cc: Members of the House Committee on Armed Services
Members of the Senate Committee on Armed Services