

Congress of the United States
Washington, DC 20510

March 29, 2023

The Honorable Ken Calvert (R-CA-42)
Chair
Defense Subcommittee
U.S. House Committee on Appropriations
Washington, D.C. 20515

The Honorable Betty McCollum (D-MN-4)
Ranking Member
Defense Subcommittee
U.S. House Committee on Appropriations
Washington, D.C. 20515

Dear Chairman Calvert and Ranking Member McCollum:

As you begin deliberations on the Fiscal Year 2024 defense appropriations bill, we respectfully request that your subcommittee provide \$20 million for continued trauma immunology research within the Army's Medical Technology Program.

Traumatic injury is the leading cause of death in Americans under the age of 45 and the fourth leading cause of death for all ages.ⁱ 214,000 people die in the U.S. from traumatic injury each year – one person every three minutes.ⁱⁱ In 2015 alone, 2.8 million people were hospitalized due to traumatic injuries and 27.6 million people were treated in an emergency department.ⁱⁱⁱ In 2013, the cost of traumatic injury in the United States was \$671 billion and the average cost per patient per year is \$75,210.^{iv}

Yet, innovation in trauma care has failed to keep pace with other health conditions – despite National Academy of Sciences reports that cite specific unmet needs that must be addressed to save lives. In civilian emergency care and military prolonged field care settings, where resource intensive and definitive care solutions may not be immediately available, technologies and tools that better enable early identification and management of the deleterious effects of physical trauma, specifically immune and metabolic dysregulation, are needed to save lives and improve outcomes. Several relevant programs within Congressionally Directed Medical Research Programs support trauma-related research that address wound care, repairing organs and tissues, solutions to enhance warfighter readiness in the battlefield, limb stabilization and more.

However, prior to last year, no existing program has funded critical research into trauma immunology to enhance survivability and return to function following severe injury. In FY2022, Congress added \$5 million to address trauma immunology specifically, and increased this to \$10 million in FY2023. In December of 2022, the University of Oregon, Indiana University and the New York University School of Medicine submitted the first phase of a proposal entitled “Early Immunologic Precision Typing At-Risk Fractures to Predict Non-Union”. This is just one

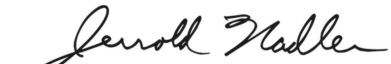
important research area at the interface of regenerative medicine, data science and biomedical engineering.

For these reasons, **we respectfully request that the subcommittee provide \$20 million in the Fiscal Year 2024 Army RDT&E Medical Technology Program to continue the support of research in trauma immunology.** This program will support exploratory and translational research to further investigate the immune responses to trauma to better understand their role in the acute care setting to develop new care decision aids, diagnostics, and treatment strategies to improve patient outcomes. The resulting research on trauma immunology has the potential to transform treatment for military servicemembers and civilians alike following traumatic injury.

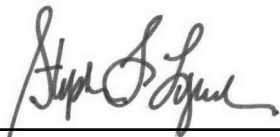
Sincerely,



Val Hoyle
Member of Congress



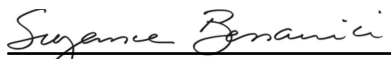
Terrold Nadler
Member of Congress



Stephen F. Lynch
Member of Congress



Veronica Escobar
Member of Congress



Suzanne Bonamici
Member of Congress



Andrea Salinas
Member of Congress

André Carson

André Carson
Member of Congress

- ⁱ The Centers for Disease Control and Prevention (CDC, 2017)
- ⁱⁱ The Centers for Disease Control and Prevention (CDC, 2017)
- ⁱⁱⁱ The Centers for Disease Control and Prevention (CDC, 2017)
- ^{iv} Weir, S. et al. One-year treatment costs of trauma care in the USA. *Expert Rev. Pharmacoecon. Outcomes Res.* 10, 187–197 (2010)