

Committee: HAC, DEFENSE SUBCOMMITTEE
Hearing Date: May 01, 2007
Hearing: Preventive Medicine and Cancers Program
Member: Congressman Murtha
Witness: COL Harris
Question: #41

CONGRESSIONALLY DIRECTED MEDICAL RESEARCH PROGRAMS (CDMRP)

Question: How is the focus of the CDMRP research different than that of research funded by the National Institutes of Health (NIH) and the National Cancer Institute (NCI)?

Answer: Two hallmarks of CDMRP are innovation and inclusion of survivors in decision-making processes. CDMRP strives to recognize and fund innovative research, which can "leap frog" scientific advances towards achieving the goals of the programs. This focus can be high risk, yet can yield high gains. CDMRP funds research that may be considered too risky or preliminary for the NIH/NCI to support. The NIH/NCI tends to fund incremental research or the next logical step in a research project. The CDMRP approach encourages creativity and innovation by funding research projects in the earliest stages of idea development. Because early research concepts are funded, most funding mechanisms offered by CDMRP do not require preliminary data. This approach provides scientists the opportunity to generate sufficient data needed to receive traditional funding through the NIH or other funding agencies.

The unique voices and experiences of survivors and their families have played a pivotal role in the establishment and growth of CDMRP. Today, the CDMRP is a recognized leader in integrating survivors (consumers) in virtually all aspects of program execution. The survivor's first hand experiences with the disease adds a perspective, passion, and sense of urgency that ensure that the human dimension is incorporated into the program policy, investment strategy, and research focus.

Another feature of how the research funded by CDMRP differs from the research funded by the NIH/NCI is the specific disease focus of each of the programs. As a result of the lobbying efforts of various consumer advocacy communities, Congressional funds are appropriated to the CDMRP to support and manage research programs that target specific diseases, in contrast to the broad range of diseases funded by the NIH/NCI.

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Question: How do you determine if there is overlap between research funded by CDMRP and research funded by NIH/NCI?

Answer: There are several means by which we determine if there is overlap between research funded by CDMRP and research funded by NIH/NCI. The Integration Panels (IPs) of the respective research programs convene at a vision setting meeting to determine what types of funding mechanisms are needed in order to fill the research gaps within that research community. The IPs devise mechanisms that are not duplicated by the NIH grant mechanisms (although the NIH has adopted several CDMRP-created mechanisms). The principal investigator of a proposal is required to write a section on current and pending funding as part of the proposal. During peer review of the proposals, the peer reviewers, who have extensive knowledge of the subject they are reviewing, determine if the research has been done, or is the subject of another grant. After a proposal has been recommended for funding, CDMRP grants managers check all available sources of information to determine if there is overlap of the research with another grant that is funded or has been submitted for funding by the Department of Defense or another federal agency. Grants managers contact their counterparts at NIH/NCI if it is deemed necessary. During the performance period, grants managers use all available sources of information to routinely check each award for any potential overlap with other funded research. In summary, these CDMRP processes are important measures that we take to ensure that funds are directed toward non-duplicative research or funding by NIH/NCI and other agencies.