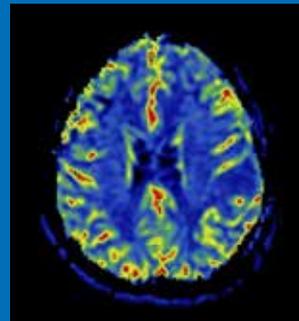
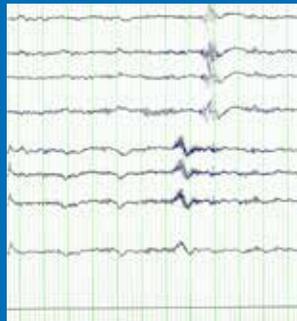
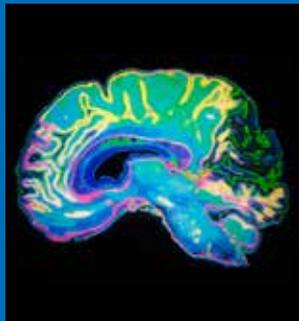


Epilepsy Research Program





“The Epilepsy Research Program, by enhancing our understanding of the basic mechanisms of epilepsy stemming from traumatic brain injury (post-traumatic epilepsy), will help to lay the groundwork for more effective treatments and—one day—even prevention of this serious and potentially life-threatening consequence of head injury. I applaud the work of the Department of Defense and ERP for their investment in research—the cornerstone of discovery—which will be so meaningful to our Service members and Veterans.”

Susan Axelrod

CURE | Citizens United for Research in Epilepsy

History of the CDMRP

The Congressionally Directed Medical Research Programs (CDMRP) was born from a powerful grassroots effort led by the breast cancer advocacy community that resulted in a congressional appropriation of funds for breast cancer research. The CDMRP was created as an office within the U.S. Army Medical Research and Materiel Command (USAMRMC) in fiscal year 1993 (FY93) to manage these funds, initiating a unique partnership between the public, Congress, and the military. Having grown to encompass multiple targeted research programs, the CDMRP has received nearly \$13.019 billion in appropriations since its inception through FY15. Funds for the CDMRP are added by Congress to the Department of Defense budget annually, where support for individual research programs such as the Epilepsy Research Program (ERP) is allocated via specific guidance from Congress. CDMRP currently manages 27 programs, which are generally focused on either the health and well-being of our nation, or the specific needs of our Service members and Veterans. As such, the CDMRP works with the public, other government entities, Service members, Veterans, and academia to determine the best research strategy for each individual program.

Nationally Focused:

- Alzheimer’s
- Amyotrophic Lateral Sclerosis
- Autism
- Bone Marrow Failure
- Breast Cancer
- Duchenne Muscular Dystrophy
- Gulf War Illness
- Lung Cancer
- Multiple Sclerosis
- Neurofibromatosis
- Neurotoxin Exposure
- Parkinson’s Treatment
- Ovarian Cancer
- Peer Reviewed Cancer
- Peer Reviewed Medical
- Prostate Cancer
- Tuberous Sclerosis Complex

Service Member Focused:

- Alcohol and Substance Abuse Disorders
- Defense Medical Research and Development
- Epilepsy
- Joint Warfighter
- Military Burn
- Orthotics and Prosthetics
- Peer Reviewed Orthopaedic
- Psychological Health and Traumatic Brain Injury
- Reconstructive Transplant
- Spinal Cord Injury
- Vision Research

CDMRP Program Management

The CDMRP program management cycle includes a two-tier review process recommended by the National Academy of Sciences’ Institute of Medicine. Each level of review is conducted by panels composed of scientists and clinicians—subject matter experts—and consumers. The first tier of evaluation is an external scientific peer review of applications against established criteria for determining scientific merit. Peer review is a criterion-based evaluation of submitted full proposals. The second tier is a programmatic review conducted by members of the Programmatic Panel, who compare submissions and make funding recommendations based on relative scientific merit, portfolio balance, and relevance to program goals. Subsequent to these recommendations, CDMRP actively negotiates and follows each funded project to ensure the research is completed.



About the Epilepsy Research Program

The ERP was initiated in 2015 to develop an understanding of the magnitude of post-traumatic epilepsy (PTE) within the military and to expand research into the basic mechanisms by which traumatic brain injury (TBI) produces epilepsy. To this end, and to address the ERP's mission and vision, the ERP identified three focus areas for the program in FY15. These are epidemiology, markers and mechanisms, and models of PTE. A total of \$7.5 million has been appropriated for the ERP in FY15.

Service members living with PTE face complex challenges in everyday life. These difficulties can include seizures, cognitive and social challenges, and depression. This program is focused on understanding who is affected by PTE in the military population, so that the program can understand who may be most vulnerable, and how it affects the individual's prognosis and risk factors. The program is searching for prospective markers, models, and mechanisms of PTE in order to improve detection diagnoses at their earliest stages, which will minimize these difficulties and related health-risk factors for the individuals and the communities affected.

FY15 ERP Focus Areas

Consistent with the ERP's mission and vision, the ERP released its first Program Announcement in July 2015. The intent of the ERP Idea Development Award (IDA) was to solicit research to understand the magnitude and underlying mechanisms of PTE, especially in Service members and Veterans, while benefitting the civilian community. The ERP identified research focus areas by which the intent of the IDA mechanism can further the mission of this program. The ERP's Programmatic Panel, consisting of scientists and consumer representatives of public, academic, and not-for-profit entities, identified three focus areas for FY15. These are:

I. Epidemiology:

Epidemiological characterization and identification of risk factors for developing PTE following TBI, including different variables such as race and ethnicity; age; gender; organic head injury factors; type of insult; latency to epilepsy; and comorbidities.

II. Markers and Mechanisms:

Identifying markers or mechanisms (via clinical prospective or preclinical models) that address PTE:

- Early detection
- Diagnosis
- Prognosis
- Comorbidity
- Risk stratification

III. Models of PTE:

Development of new models or better characterization of existing etiologically relevant models for PTE including repetitive TBI.

About the ERP Programmatic Panel

The Programmatic Panel is responsible for directing the overall mission and vision of the ERP. In addition to reviewing the Program's Mission, Vision and Focus Areas, the Programmatic Panel also makes recommendations to the CDMRP regarding investments for the ERP's research portfolio, based on the program goals and scientific peer review. While the Programmatic Panel does not re-review the technical nature of the proposals received in response to the ERP's Program Announcements, the panel members serve a critical need in that they are directly responsible for identifying the best research investments for the ERP to meet the program's needs. The Programmatic Panel receives guidance from the ERP's Peer Reviewers and considers this guidance as it reviews applications and recommends which projects should be funded. In addition to Peer Reviewer comments, the Programmatic Panel weighs the relevance of each proposal to both the program's goals and the ERP's portfolio composition, in order to maintain a well-balanced portfolio of research.

VISION

The ERP envisions a time when the causative links between TBI and epilepsy are understood and post-traumatic epilepsy is preventable

MISSION

The ERP's mission is to fund research to understand the magnitude, and the underlying mechanisms of PTE, especially in Service members and Veterans

Consumer Participation

Consumers represent the voice and vision of individuals affected by PTE. Consumers for the ERP are persons with military service living with, or family member/caregiver of a person living with, post-traumatic epilepsy. (For more information, please go to cdmrp.army.mil). The ERP incorporates consumers as active participants in virtually all aspects of program execution. Consumers work collaboratively with leading scientists and clinicians in setting program priorities, reviewing proposals, and contributing their unique perspectives and a sense of urgency to program processes. Consumers also serve as liaisons between their constituencies and the scientific community, and increase awareness about the ERP in the consumer community.



For more information, please visit

<http://cdmrp.army.mil>

or contact us at:

usarmy.detrick.medcom-cdmrp.mbx.cdmrp-public-affairs@mail.mil

(301) 619-7071

