

Defense Health Research Center

External Review Report

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Background

- **DHB attendees:**
 - G. Poland
 - W. Lednar
 - M. Oxman
 - J. Silva
 - E. Kaplan
 - W. Halperin
- **Task: Provide an external review of the DHRC**
- **Date, location: DHRC, San Diego, CA**
- **26 Aug 2008**

Background

Section 743 of the Strom Thurmond National Defense Authorization Act for Fiscal Year 1999:

- **Secretary of Defense to establish a center devoted to "...longitudinal study to evaluate data on the health conditions of members of the Armed Forces upon their return from deployment...."**

DoD Health Policy Sep 1999:

- **Conduct Epidemiological studies designed to investigate findings from surveillance and clinical data, to support inquiries from senior policy officials, and to monitor the post-deployment health of specific military populations.**
 - Research studies shall be conducted with the goal of improving veteran health and be of such quality that publication in the peer-reviewed medical literature is likely.
- **U.S. military services shall collaborate with other federal and nonfederal agencies in conducting these epidemiological studies. Federal United States collaborating agencies would likely include, but not be limited to: the Army, Navy, Marine Corps, Air Force, Coast Guard, Department of Veterans.**
 - Collaborations shall be sought with civilian academic partners to benefit from their expertise and also to mitigate potential criticisms that DoD Deployment Health Research Center work is biased in favor of the federal government.
- **All epidemiological research shall be managed by unique protocol and receive external scientific review.**
 - Protocol development and prioritization shall be dynamic with input from various DoD organizations including DDR&E, OASD(HA), the MVHCB(RWG), the AFEB, and Joint Staff (J4-MRD).

Draft Recommendation 1

- **Governance and Research Management**
 - DHRC would benefit from a high-level “triage” system for peer-reviewed vetting of all research
 - Research administrative structure for:
 - Communicating deadlines, RFAs, etc.
 - Communication and dissemination of research projects and findings to relevant DoD entities
 - “Big picture” thread of what studies need to be done in what priority and with what resources

Draft Recommendation 2

- **Research Career Development**
 - Career ladder for research staff
 - Stable funding
 - Senior leadership (with specified skill sets)
 - Mentoring
 - Graduate program linkages
- **Previous leadership success resulted from common attributes:**
 - Physician–epidemiologist (with corresponding skill set and insights)
 - Senior level career military officer
 - External research credibility (publications, Federal grants, etc.)

Draft Recommendation 3

- **Mission Scope and Opportunities**
 - Define (can't be all things to everyone)
 - Long-term effects
 - Acute exposures
 - Dependent health
 - Other
 - Fund
 - Staff

Recommendation 4

- **Moving from Hypothesis–Generating to Hypothesis–Testing**
 - As currently designed, studies are cross-sectional and longitudinal cohort studies that can generate important hypotheses and provide initial information
 - Need to articulate how these findings are translated into clinical studies, and in turn, new policies

Recommendation 5

- **Research to Practice**

- Research relevant to military concerns must be the priority, and findings must be incorporated into and inform service-specific and DOD-relevant doctrine and policy
- At the current time, it is not clear that this occurs, or if it does occur, what the process is

Recommendation 6

- **Linkage Within DoD**
 - Current studies lack strong linkages with DOD assets that could significantly and materially improve the science through linkages with:
 - DoD serum repository
 - Other DoD databases

Recommendation 7

- **Further DHB Involvement**
 - DHB members believes that DHRC in general, and the Millennium Cohort Study in particular, offer a singularly important and vital asset to DoD and the nation.
 - There is unlikely to ever be any other longitudinal study of such a large cross-section of Americans, over decades, that offers such profound insights into health and the health experience
 - DHB members believe that an additional, in-depth visit would be invaluable in assisting DHRC in its mission and in providing outside expert review and support.

Overall Assessment

- **DHRC and the MCS are unparalleled national resources**
- **Highly dedicated team and successful history**
- **Mission creep, lack of a career ladder, and unstable material support threaten to erode the value and effectiveness of this DoD asset**
- **DHB has something to offer**

DISCUSSION