ROBERT E. ANDREWS

FIRST DISTRICT, NEW JERSEY

EDUCATION AND THE WORKFORCE

RANKING MEMBER, SUBCOMMITTEE ON HEALTH, EMPLOYMENT, LABOR AND PENSIONS (HELP)

MEMBER: SUBCOMMITTEE ON HIGHER EDUCATION AND WORKFORCE TRAINING

ARMED SERVICES

MEMBER, SUBCOMMITTEE ON EMERGING THREATS AND CAPABILITIES

RANKING MEMBER PANEL ON DEFENSE ACQUISITION REFORM

MEMBER. SUBCOMMITTEE ON OVERSIGHT

Mr. Leon Panetta Secretary of Defense 1000 Defense Pentagon Washington, DC 20301-1000

Dear Secretary Panetta:

Congress of the United States House of Representatives

Washington, DC 20515-3001

June 28, 2012



PLEASE REPLY TO:

2265 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515 {202} 225-6501

515 GROVE STREET 3RD FLOOR, SUITE 3C HADDON HEIGHTS: NJ 08035 (856) 546-5100

> 63 NORTH BROAD STREET WOODBURY, NJ 08096 (856) 546-5100

> > WEBSITE:

www.house.gov/andrews

I am writing to ask for your assistance in accessing information from the Department of Defense (DoD) on the incidence of hydrocephalus in Traumatic Brain Injuries (TBI) among service members. Hydrocephalus is a medical condition characterized by the abnormal accumulation of cerebrospinal fluid (CSF) within the cavities of the brain called ventricles which is frequently associated with moderate or severe TBI.

According to the Defense and Veteran's Brain Injury Center, 233,425 service members were diagnosed with a TBI between 2000 and 2011. Of those, more than 41,000 were categorized as "severe" or "moderate," with an additional 3,786 characterized as "penetrating." Medical experts have estimated that hydrocephalus occurs in two-thirds of the moderate to severe cases of TBI. However, there are no official records of either the incidence of hydrocephalus or whether any DoD research funds have been allocated to the urgent need to improve treatment of this serious condition.

For decades, the treatment of hydrocephalus has been the surgical implantation of a shunt to drain away the excessive build-up of fluid Some wrongly believe that the availability of shunts "solves" the problems of hydrocephalus, but this is inaccurate from both a medical and a financial standpoint.

While there have been periodic improvements, shunts are an outdated technology with a failure rate of 50 percent within the first two years of surgical implantation. Failure requires surgery that costs tens of thousands of dollars for each replacement. Veterans living with hydrocephalus face medical uncertainties and incur costly brain surgeries due to the continued reliance on antiquated shunt technology as the primary treatment for hydrocephalus. Therefore, I am requesting that you direct the appropriate DoD personnel to provide an estimate of the annual cost of treating veterans with hydrocephalus.

It is unclear whether DoD research dollars focusing on TBI or Psychological Health (PH) include a focus on new treatments for hydrocephalus. Between fiscal years 2007 and 2010, Congress appropriated more than \$2.7 billion dollars for treatment and research activities related to TBI and PH. Yet, according to the Government Accountability Office (GAO), DoD has provided

Congress with little specific information on the uses of those funds As noted in GAO's report in January 2012, entitled "Defense Health: Coordinating Authority Needed for Psychological Health and Traumatic Brain Injury Activities,"

Annual reports submitted to Congress by DOD on amounts expended on PH and TBI <u>have been incomplete</u>; data on reported obligations are <u>unreliable</u>; and, in calculating the cost of medical care for patients with PH and TBI, <u>DOD has not clearly stated</u> what is and is not included in these figures [emphasis added]

I am further requesting that you ask the appropriate DoD researchers to document how many of our veterans and service members are now living with hydrocephalus as a result of a TBI, and whether any research dollars allocated to DoD for activities related to TBI or PH are being used to find new treatments for hydrocephalus or are available for that use.

If you have any questions, or if I can clarify in any way, please contact my staffer Jonathan Golden at <u>jonathan.golden@mail.house.gov</u> or 202-225-6501. Thank you in advance for your concern and cooperation

Sincerely,

Robert E Andrews Member of Congress

Nobert E. And