

Congress of the United States
Washington, DC 20515

April 29, 2021

The Honorable Betty McCollum
Chair
Appropriations Subcommittee on Defense
H-405 The Capitol
Washington, DC 20515

The Honorable Ken Calvert
Ranking Member
Appropriations Subcommittee on Defense
H-405 The Capitol
Washington, DC 20515

Dear Chair McCollum and Ranking Member Calvert:

As you begin work on the Fiscal Year 2022 Defense Appropriations bill, we respectfully request that you include language keeping Myalgic Encephalomyelitis/Chronic Fatigue Syndrome, commonly referred to as ME/CFS, to the list of Congressionally Directed Topic Areas in the Peer Reviewed Medical Research Program (PRMRP).

Although the causes of ME/CFS remain unknown, evidence suggests symptoms can be triggered by extreme systemic stress and exposure to viruses or environmental factors such as neurotoxins – situations and circumstances active duty servicemembers are commonly and more likely to be subject to.

The Institute of Medicine estimated in a 2015 report that between 836,000 and 2.5 million people in the United States suffer from ME/CFS.¹ The direct and indirect costs on individuals, the U.S. health care system, and our economy is an estimated \$36-\$51 billion annually.² Those numbers are expected to grow significantly with some of the over 30 million Americans infected with COVID-19 now experiencing Post-Acute COVID-19 Syndrome (PACS) – so called long haul COVID – that could lead to permanently debilitating symptoms strikingly similar to ME/CFS. Experts in the field of post-viral illness assume, based on the course of symptoms following different acute infections, that approximately 10 percent of COVID-19 patients will meet the U.S. National Academies of Sciences, Engineering and Medicine case definition for ME/CFS in the long run, meaning the number of Americans suffering from ME/CFS would at least double.³

The PRMRP listed ME/CFS as a Congressionally Directed Topic Area and funded two projects last year. A recent study found that 89 percent of veterans with Gulf War Illness also suffer from ME/CFS.⁴ In fact, the clinical presentations of ME/CFS and GWI are nearly identical,⁵ leading

¹ “Beyond Myalgic Encephalomyelitis/Chronic Fatigue Syndrome: Redefining an Illness,” Institute of Medicine of the National Academies, May 2015, <http://www.nationalacademies.org/hmd/Reports/2015/ME-CFS.aspx>.

² Jason, L.A., and Mirin A.A. “Updating the National Academy of Medicine ME/CFS prevalence and economic impact figures to account for population growth and inflation.” *Fatigue: Biomedicine, Health & Behavior*, 28 Jan 2021, <https://doi.org/10.1080/21641846.2021.1878716>.

³ Komaroff A, Bateman L. “Will COVID-19 Lead to Myalgic Encephalomyelitis/Chronic Fatigue Syndrome?” *frontiers in Medicine*. 18 January 2021, <https://doi.org/10.3389/fmed.2020.606824>.

⁴ Cayla M Fappiano, James N Baraniuk, Gulf War Illness Symptom Severity and Onset: A Cross-Sectional Survey, *Military Medicine*, , usz471, <https://doi.org/10.1093/milmed/usz471>

⁵ Myalgic encephalomyelitis/chronic fatigue syndrome and gulf war illness patients exhibit increased humoral responses to the herpesviruses-encoded dUTPase: Implications in disease pathophysiology, *Journal of Medical Virology*, March 17, 2017, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5513753/>.

some researchers to hypothesize that GWI is a subset of ME/CFS. A study published in the *Annals of Internal Medicine* on health of Gulf War Veterans found that Gulf War deployment is associated with an increased risk for ME/CFS,⁶ with another study showing that 15.7 percent of Gulf War veterans qualified under the 1994 definition of CFS.⁷ While not exclusive to military service members or veterans, there is a clear relationship between military service and incidents of ME/CFS.

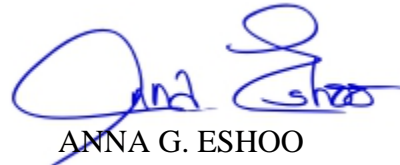
The inclusion of ME/CFS as a PRMRP Congressionally Directed Topic Area – thereby supporting research efforts related to the illness and PACS – will help improve our understanding of the prevalence and impact of ME/CFS among military servicemembers, veterans, and beneficiaries, as well as define the underlying pathology to develop strategies for effective treatment and prevention.

Again, we appreciate your leadership on this issue and thank you for your consideration of this request.

Sincerely,



ZOE LOFGREN
Member of Congress



ANNA G. ESHOO
Member of Congress

⁶ “Gulf War veterans’ health: medical evaluation of a U.S. cohort,” *Annals of Internal Medicine*, June 7, 2005, <https://annals.org/aim/fullarticle/718427/gulf-war-veterans-health-medical-evaluation-u-s-cohort>.

⁷ “Prevalence of Chronic Fatigue and Chemical Sensitivities in Gulf Registry Veterans,” *Archives of Environmental Health: An International Journal*, August 11, 1998, <https://www.tandfonline.com/doi/abs/10.1080/00039899909602493>.

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