

Support U.S. Warfighters: Fund Orthopaedic Research



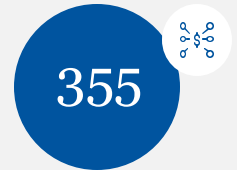
What is the Peer-Reviewed Orthopaedic Research Program (PRORP)?

- ✓ PRORP is funded through the Congressionally Directed Medical Research Program (CDMRP) and focuses specifically on cutting-edge orthopaedic research to improve warfighter health and readiness.
- ✓ Approximately 78–85% of Army personnel who separate from active service due to disability do so because of a musculoskeletal injury or condition.
- ✓ Congress created PRORP in FY09 to address critical gaps in orthopaedic research and support the needs of service members.



Major Accomplishments from PRORP Funding:

- ✓ Non-opioid pain management products for use after amputation, total knee replacement, and other procedures to help reduce abuse and overdose;
- ✓ Novel prosthetics that help patients return to running, jumping, and daily life;
- ✓ A novel bone-grafting technique to improve treatment of certain musculoskeletal injuries; and a targeted innervation technique to reduce nerve pain in amputees.



OUR ASK:

To close critical gaps in combat and non-combat injury care, we ask Congress to **increase PRORP from its FY 2026 level of \$20M to \$30M in the final FY 2027 Defense Appropriations bill.**

WHO WE ARE:

The American Association of Orthopaedic Surgeons (AAOS) is a nonprofit organization dedicated to carrying out advocacy activities on behalf of over 39,000 orthopaedic surgeons and residents to ensure patients have access to the highest quality of musculoskeletal care. If you have any questions or would like additional information, please direct inquiries to shoaf@aaos.org.



Infection Control & Forward-Deployed Care

New ways to diagnose, prevent, and treat infection after high-energy limb injury, including advanced local techniques for the field, austere settings, and staging facilities; plus damage-control and temporary-stabilization strategies and lightweight, deployable tools for imaging, monitoring, and local therapy when evacuation is delayed.



Faster, Fuller Return to Duty

Strategies that speed return to duty after fracture and limb injury, including point-of-injury diagnostics and interventions, early weight-bearing, fixation approaches that promote return to duty, rehabilitation programs, and methods to measure and restore peak function relative to baseline.



Limb Salvage & Joint Preservation

Advanced limb-salvage techniques for nerve reconstruction, bone gaps, soft-tissue coverage, and muscle replacement; reduction of post-traumatic osteoarthritis after combat and non-combat injuries; and the role of orthobiologic therapies such as stem cells and platelet-rich plasma.



Psychosocial Recovery

Better psychosocial outcomes after combat and non-combat musculoskeletal injury, including patient psychology, pain, PTSD, anxiety, depression, and related measures of recovery and well-being.