INSIDE THIS ISSUE:

Learn more about the ROLE OF EDUCATION in VETERAN HEALTH

Initiatives to Enhance PROVIDER EDUCATION

A Veteran's Story of Managing HER OWN HEALTH
WRIISC Classes for Veterans
★ HONORING SERVICE THROUGH EDUCATION AND EMPOWERMENT★

The WRIISC developed a number of specially tailored educational classes to educate and support Veterans. These classes provide Veterans with the most up-to-date scientific and medical information and allow them to address any concerns while fostering patient-centered care.

An occupational medicine physician or a nurse educator at the WRIISC leads classes on exposure concerns on these topics:

★ Fuels and Solvents (NJ)
★ Camp Lejeune and other Domestic Military Exposure Concerns (DC)
★ Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn Military Exposure Concerns (DC)
★ Operation Desert Shield/Desert Storm Military Exposure Concerns (DC)
★ Vietnam War and Agent Orange Military Exposure Concerns (NJ/DC)
★ Non-Ionizing Radiation and Ionizing Radiation Military Exposure Concerns (DC)

Other educational activities for Veterans at the WRIISC include:

• Through the DC WRIISC Integrative Health and Wellness (IHW) Program, there is an Integrative Health Education Group for Veterans. This group is designed to provide integrative health education to Veterans with chronic medical conditions.

The IHW Program has recently developed a Nutritional Psychology Group which provides Veterans with psycho-education regarding the basic science of how nutrients affect mood and behavior.

• At NJ WRIISC, the “My Best Self” class is geared towards helping Gulf War Veterans effectively manage chronic symptoms such as pain and sleep that can interfere with daily life quality. The class empowers Veterans to take charge of their health and live the best life possible regardless of symptoms. Veterans noted that our teachers “reach out of the box to provide better solutions to managing everyday problems.”

• CA WRIISC offers a three-hour workshop on “Managing Symptoms of Gulf War Illness” which addresses some of the chronic health problems facing Desert Shield and Desert Storm Veterans such as chronic pain, gastrointestinal (GI) and sleep problems, and cognitive issues. The class is taught by a WRIISC physician and provides Veterans with strategies for managing symptoms of chronic illness.

• CA WRIISC also offers an eight-week weight loss and mindfulness class for Veterans partnering with Behavioral Medicine at the VA Palo Alto Health Care System. The class is led by a WRIISC postdoctoral fellow in Complementary and Alternative Medicine and draws on several successful strategies. (continued)

For more information on any of these classes, visit: www.WarRelatedIllness.va.gov/education/local-offerings/

This edition of WRIISC Advantage focuses on the role and importance of health education for Veterans to assist you on your road to better health. It describes some of the many ways the War Related Illness and Injury Study Center (WRIISC) fulfills our mission to provide education to both Veterans and their providers.

**MAKING A DIFFERENCE:**
*Individualized Health Education for Veterans*

Each WRIISC location is engaged in a number of education initiatives to improve the lives of Veterans.

**COMPREHENSIVE EVALUATIONS** at the WRIISC are for Veterans with the most severe deployment-related health conditions and symptoms. At the NJ WRIISC, each Veteran evaluated receives a one-hour health education session to address current health and to consolidate and reinforce the WRIISC provider team assessments and recommendations. Living with chronic health conditions and the fears surrounding military exposures can be overwhelming.

Health education is a critical part of the services the WRIISC provides to Veterans. Health education is any combination of learning experiences that help individuals and communities improve their health, increase their knowledge, or influence their behaviors. A good health education program sets goals and expectations for how healthier behavior can be achieved. For these reasons, the WRIISC goes beyond simply sharing information and facts regarding diagnoses, tests, symptoms, and treatments.

Too often, health care workers use language that may be difficult to understand and the health care system may be a challenge to navigate which further increases anxiety and frustration. The WRIISC health education session is a time set aside for Veterans to ask questions, review next steps after their evaluation, and learn strategies for what it takes to live a better quality of life.

Our onsite health education session delivers content on Veteran-centered topics necessary for healthful lifestyles; this includes, communicating with health care providers, improving self-management skills, a guide to healthy sleep practices, guidelines for physical activity, strategies to reduce physical and mental tension, how to deal with chronic pain, and an introduction to complementary and integrative medicine practices.

The WRIISC takes great pride in our Veteran and provider education services and we look forward to advancing the health of Veterans through individual education sessions and classes (see information, right). We also aim to educate providers, helping them to better help Veterans (see more in NJ WRIISC’s section of Around the WRIISC News). (continued)

Health literacy is the term used to describe how well patients are able to obtain, process, and understand medical information and allow them to address any concerns while fostering patient-centered care.

100% of Veterans polled this year reported that WRIISC health education material was easy to read. 94% were able to practice the strategies shared in their health education session.

100% of Veterans polled this year reported that WRIISC health education material was easy to read. 94% were able to practice the strategies shared in their health education session.

The NJ WRIISC is one of the many ways the War Related Illness and Injury Study Center (WRIISC) fulfills our mission to provide education to both Veterans and their providers.
Penn Deere like many Veterans was drawn to the Military as she explored opportunities for a better way of life. Born and raised in a country setting in upstate New York, she had little interest in college but held a strong desire and tenacity in her search for “something better.” Aligning her spirit with her military options, she advanced into a career as Army Military Intelligence.

Penn enjoyed a 15-year military career before deployment. She had an active, well-adjusted life in the military. “I was a social butterfly. A take-charge type of girl. In the military, I was always the one planning events making people happy. I was in top physical condition, skiing, bowling, and I was a sole parent.” To herself and others, Penny appeared as if she could do it all. But then life seemed to change. In 1989, preparing for deployment in Iraq, she had an experience with military sexual trauma (MST). “Deployment in Iraq meant she had to deal both with the physical and emotional climate of a combat zone as well as the fear of reoccurrence of MST. These were terrible conditions. It was desolate. Sand storms were everywhere. Laundry would be done almost needlessly because a sand storm would develop and get into everything. There weren’t any good showers. All of these things disturb your psyche.”

From November 1990 through May 1991, after six months of deployment in Saudi Arabia, Penny returned to Germany in somewhat of a depressed state. “After Germany, I was then stationed in New Jersey and depression continued to manifest itself. I was drinking a lot and was having trouble adjusting. My troops told me things I did and I had no idea. I knew I needed to clean up my act and gain control. Making a conscious effort to stop drinking, I went to my first sergeant to create a plan and figure out what I had to do. I sought Alcoholics Anonymous and military track programs because I didn’t want to drink myself to death.” Since retiring in 1995, Penny Joyce has remained sober for 13 years. Reunited with her family, she began readjustment to civilian life. But little did she know things were festering. She described her physical and emotional turmoil, “One minute I could be fine then I’m not fine. I was a poster child for Gulf War syndrome. All this stuff affects your daily life. I had fatigue, GI problems (gastroesophageal reflux disease (GERD)), a foggy brain, nightmares, pain all over, depression, anxiety, and post traumatic stress disorder (PTSD). I tried to get help. It was incapacitating.” She began looking for answers and doing a lot of research. “I heard about the WRIISC and saw a flyer. My home VA didn’t have answers for me. Although, my primary care provider was very supportive and placed a consult for the WRIISC.” Penny was pleased by her evaluation at the WRIISC. “I had a whole team to myself. The WRIISC staff dedicated themselves to me. Before the WRIISC, I didn’t realize I needed to be validated. I felt the team listened to me.” Having the entire WRIISC clinical team meet with her at one time was especially important. “At the end, everybody got together and gave me a roadmap and this was the most useful part.” Through her WRIISC visit, Penny was able to learn different coping skills; “My problems are still there but I am better able to deal with them. The WRIISC opened the flood gates to many things that are happening for me today.”

Since her visit to the WRIISC, Penny has taken steps to implement many of the recommendations given to her. The recommendation for a sleep study resulted in finding out she has sleep apnea. Her sleep is improved as a result of practicing the recommended integrative and complementary medicine practices such as yoga, guided imagery, and deep breathing. Speech pathology is a service offered at VA to support verbal and nonverbal communication. This service recommendation has increased her productivity; instruction and use of devices has enabled her to be more organized. Working with a mental health therapist has also helped her to better understand how to deal with social triggers which has enabled her to better cope with her MST and manage her anxiety.

Self-management is a term used to describe what each individual can do to improve their overall health. It includes taking charge of your own health through positive behaviors such as exercise, eating healthy and engaging in relaxation strategies. Penny Deere stands out as a noteworthy story to feature in our newsletter. She exemplifies how these strategies can benefit your overall well-being. To her credit, she has been featured in many newspaper articles in her hometown. Additionally, her story was captured as one of the main characters in a play about women Veterans. To further her engagement, Penny has taken creative writing and photography classes. We are proud to share that Penny credits her WRIISC visit for many of these new attributes.
Dr. Laura A. Thomas Joins WRIISC Team

DC WRIISC

Dr. Laura A. Thomas (pictured right) has joined our staff as a Research Health Scientist. As a cognitive neuroscientist, Dr. Thomas’ responsibilities include creating and running behavioral and neuroimaging experiments with Veterans who have PTSD and mild traumatic brain injury (mTBI). The goal is for Dr. Thomas to help identify differences between these two groups at neurological and behavioral levels to aid in diagnosis and treatment. She will also mentor WRIISC fellows on their research projects.

Dr. Thomas’ expertise is in cognitive and social neuroscience, with over 10 years’ experience in neuroimaging experimental design methodology, data collection and statistical analysis, and hypothesis formation and testing. Prior to joining the DC WRIISC, Dr. Thomas completed a postdoctoral fellowship at the National Institute of Mental Health (NIMH), where her research focused on the neuroimaging of conscious and nonconscious emotion processing with children with severe mood disorders. She graduated from Duke University with a PhD in Psychology and Neuroscience in 2007, with her NIMH-funded dissertation work focusing on implicit (nonconscious) emotional learning and memory.

Dr. Thomas has authored several peer-reviewed publications on a broad range of topics, from behavioral and psychophysiological paradigms examining implicit emotional learning and memory, to neuroimaging studies of emotion and attention processing in youth with mood disorders. She has also recently been elected as a member of the Society of Biological Psychiatry.

Dr. Thomas will employ her expertise in behavioral and neuroimaging experimental design and research with clinical populations here at the DC WRIISC. Her work will help inform clinical practice with Veterans with post-deployment health concerns.

CA WRIISC

Relationships between PTSD Symptom Severity, Chronic Medical Conditions, & Daily Functioning

Veterans seen at the WRIISC often have complex medical problems, including TBI, PTSD, and other chronic and complex symptoms (e.g., chronic pain, fatigue, gastrointestinal, dermatologic issues, etc.). The WRIISC is interested in learning how the presence of multiple medical problems is related to the physical and psychological aspects of Veterans’ daily functions. We performed a preliminary study on a sample of 67 patients evaluated at the WRIISC.

We found that Veterans with more severe PTSD symptoms also had poorer physical functioning, while the presence of TBI, chronic pain, and other medical conditions were not associated with poorer physical functioning. Our findings suggest that PTSD, a mental health condition, might be associated with poor physical functioning, consistent with other research. On the other hand, while many Veterans had medical conditions and symptoms, it appeared these symptoms were not associated with impaired physical functioning.

When we looked at psychological functioning, we found that PTSD symptom severity as well as chronic pain and chronic fatigue were associated with poorer psychological functioning. While the relationship between PTSD and psychological functioning was expected, the associations involving chronic pain and fatigue were not, and this finding suggests a relationship between physical ailments and psychological functioning.

In summary, our preliminary findings suggest a strong link between PTSD symptoms and both the physical and psychological functional health of Veteran patients. In addition, we show that while chronic symptoms such as pain and fatigue were not indicative of poorer physical functioning, they did predict poorer psychological functioning. These results highlight the importance of taking into account medical comorbidities in clinical evaluations and the indications they may have of functional health outcomes in assessing and managing the difficulties of some Veterans.

NJ WRIISC

Enhancing Provider Education

To continuously meet the ever-changing needs of the Veteran population, providers need ready access to the latest scientific information and best practices for Veteran care. Below describes a sampling of our provider education efforts:

SEPTEMBER— On September 16, a day-long training for VA providers in the Veteran Integrated Service Network (VISN 3), which includes NY and NJ, was entitled “Post-Deployment Health Care: Training for Patient Aligned Care Teams (PACT).” The face-to-face session held at the Manhattan VA, focused on providing participants with specific knowledge regarding a wide range of deployment health problems facing Veterans from different eras. Over 70 providers attended this event where WRIISC clinicians presented a number of cases and the latest information for addressing Chronic Multisymptom Illness and exposure concerns.

OCTOBER— MyVeHU (My VA eHealth University Campus) is VA’s virtual classroom with live presentations and encore on-demand showings. This is a main education source for VA providers Nationwide.

VA’s Airborne Hazards and Open Burn Pit Registry went “live” in late spring and VA primary and specialty care providers are at the forefront of addressing Veterans’ health concerns who request an in-person evaluation. On October 21, the WRIISC presented a MyVeHU broadcast titled “The Airborne Hazards Registry and Evaluating Veterans with Airborne Hazards Concerns,” which equipped pulmonologists and allied specialty care providers with the information required to address these issues appropriately.

UPCOMING IN DECEMBER— NJ WRIISC will present a second presentation for December 2nd called “Conducting Deployment Related Environmental Exposure Assessments and Exposures of Concern.” Veterans who have served in combat often have questions as to whether they may have been exposed to substances that might have negatively impacted their health. Up-to-date information on key exposures of concern with an emphasis on solvent exposure will be presented.

Visit our website at www.WarRelatedIllness.va.gov for more information regarding WRIISC provider education events.

For comments or concerns regarding this newsletter, please contact us at: 1-800-248-8005 or wriisc.nj@va.gov.

Around the WRIISC News
Do you want access to WRIISC health education materials?

Do you want to learn more about our wide range of educational offerings?

Visit our website for instant access and to find more information:

www.WarRelatedIllness.va.gov