The Directors' Corner

ONE OF RECENTLY appointed Department of Veterans Affairs (VA) Secretary David Shulkin's top five priorities for the Veterans Health Administration (VHA) is to be a “high performance network” or one which provides the highest quality health care for Veterans. The WRIISC, a national program that is part of VA's Post Deployment Health Services (PDHS) of VHA, is contributing to this goal by providing expertise and supporting the education of health care team members about deployment health and military related exposure concerns of Veterans.

Veterans and their providers in every issue and reiterate Secretary David Shulkin's top five priorities for the Veterans Health Administration (VHA is to be a “high performance network” or one which provides the highest quality health care for Veterans. The WRIISC, a national program that is part of VA's Post Deployment Health Services (PDHS) of VHA, is contributing to this goal by providing expertise and supporting the education of health care team members about deployment health and military related exposure concerns of Veterans. Servicemembers can experience a wide range of exposures during military service. The complexity and number of exposure concerns can make it difficult for primary care providers to obtain accurate, up to date information and may fall outside their expertise. Our goal is to ensure that providers are aware that the WRIISC can help with questions about health effects possibly related to deployment or military exposures. We do this through several means.

FIRST, you’re reading the WRIISC Advantage, the newsletter we publish three times a year. We cover deployment and exposure concerns of relevance to Veterans and their providers in every issue and reiterate the WRIISC mission to be a resource for these concerns.

SECOND, we partner with our colleagues in PDHS on their communications to VHA providers and directly to Veterans, including the registry newsletters, communications to priority Veteran groups, and the Public Health website (http://www.publichealth.va.gov).

THIRD, a number of our monthly webinars for VA providers and staff address exposure-related subjects. These are publicized in a variety of ways to thousands of providers and offer providers a chance to learn about these topics and WRIISC services and resources. Recent webinars have focused on Gulf War Illness (GWI), Airborne Hazards and burn pit smoke concerns, garrison exposures, and registry exams. We also offer classes and look for ways to get information directly to Veterans on the issues—stay tuned!

FOURTH, we use other communication and dissemination channels offered by VHA. Through these methods we hear and respond to clinicians who are providing deployment-related care. These are accessible to providers inside and outside VHA (read more about our e-learning in our “Around the WRIISC News” feature on page 7).

FINALLY, and most importantly, we listen! We review every consult placed for specialized WRIISC clinical services to understand both the providers’ reasons for a referral and the concerns of Veterans. We also regularly receive queries from providers and patients through our website's contact page.

In closing, the WRIISC program is committed to building a network of clinicians able to better address Veterans’ health concerns. As the directors of the three sites, we work together to promote the WRIISC mission of education, clinical care, research, and risk communication and continue to serve Veterans and their health care team!

Drew Helmer, MD, MS
Director, NJ WRIISC

West Ashford, MD, PhD
Director, CA WRIISC

Matt Reinhard, PsyD
Director, DC WRIISC

WRIISC: Addressing Deployment-Related Exposure Concerns for Veterans

OUR CLINICAL TEAM has extensive medical experience helping Veterans with their exposure concerns and potential health effects. When a Veteran is referred to the WRIISC, our team may determine the Veteran would benefit from an environmental exposure assessment. An occupational medicine physician or nurse practitioner experienced in exposure issues takes a lifetime exposure history of the Veteran in complete detail, concentrating on deployment exposures, and carefully addresses each health concern. Veterans are then provided with a plan to move forward and offered supplemental educational material. The plan often includes recommendations to minimize future exposures that might increase the risk of a bad health effect. A Veteran’s referring provider is given a copy of any recommendations to assist with continued care of the Veteran. We also offer educational classes at each WRIISC site on deployment-related exposure, such as Agent Orange. For local education offerings visit: http://www.WarRelatedIllness.va.gov/education/local-offerings/index.asp.

Beyond Deployment: A Focus on Garrison Exposures and Camp Lejeune

WHILE DEPLOYMENT-RELATED EXPOSURES remain a top WRIISC priority, there are also instances when a Veteran may have an exposure concern not related to a deployment. The term Garrison exposure refers to exposures that occur when a Veteran is stationed on a military base, usually in the U.S., and includes the potential for hazardous environmental exposure. An important garrison exposure which has been a focus of media reports and received much attention by Veterans and VA is contaminated water at the U.S. Marine Corps Base Camp Lejeune, North Carolina. New presumptions have been established by VA for Camp Lejeune Veterans. In a Final Rule, created in January 2017 and effective in March 2017, VA established a presumptive service-connection for Veterans, Reservists, and National Guard members exposed to contaminants in the water supply at Camp Lejeune for at least 30 days from August 1, 1953 through December 31, 1987. Qualifying health conditions include:

- Bladder cancer
- Esophageal cancer
- Non-Hodgkin’s lymphoma
- Lung cancer
- Leukemia
- Breast cancer
- Myelodysplastic syndromes
- Kidney cancer
- Neurobehavioral syndromes
- Multiple myeloma
- Scleroderma
- Renal toxicity
- Bladder cancer
- Female infertility
- Kidney cancer
- Liver cancer
- Neurobehavioral syndromes
- Myelodysplastic syndromes
- Scleroderma
- Non-Hodgkin’s lymphoma
- Renal toxicity
- Lung cancer
- Scleroderma
- Myelodysplastic syndromes
- Neurobehavioral syndromes
- Liver cancer

Previously established by Congress and the President was the “Camp Lejeune Families Act of 2012.” In accordance with this law, VA provides health care for certain conditions at no charge to Veterans who served at least 30 days of active duty at Camp Lejeune from January 1, 1957 and December 31, 1987. Qualifying health conditions include:

- Bladder cancer
- Non-Hodgkin’s lymphoma
- Leukemia
- Myelodysplastic syndromes
- Kidney cancer
- Neurobehavioral syndromes
- Lung cancer
- Scleroderma
- Hepatic steatosis
- Bladder cancer
- Myelodysplastic syndromes
- Scleroderma
- Neurobehavioral syndromes
- Kidney cancer

Family members of Veterans who resided at Camp Lejeune during the qualifying period may also be eligible for reimbursement of out-of-pocket medical expenses related to the 15 covered health conditions. For more information visit: http://www.publichealth.va.gov/exposures/camp-lejeune/index.asp.

PDHS recognizes the importance of addressing concerns that Veterans have regarding garrison exposures. PDHS works with other agencies, such as the Agency for Toxic Substances and Disease Registry and the Department of Defense, as new information and studies become available.

Check out the Public Health website for the latest on many exposure topics; the Exposure Ed App is currently available to providers and Veterans through Apple’s iTunes store https://mobile.va.gov/app/exposure-ed and is an excellent information source.
Volunteer for Research at the WRIISC

THE WRIISC conducts cutting edge research to answer questions about the underlying mechanisms of disease and the effects of deployment on health. WRIISC also conducts studies of novel treatments for Gulf War Veterans (GWV) with GWI. Participating in a research study may provide information that will improve the lives of other Veterans in the future. Please consider volunteering for one of the following WRIISC research studies at a location near you!

For all NJ WRIISC studies call 1-800-248-8005 and indicate the study and person specified in contact information. For DC and CA WRIISC use the contact information provided at the end of each study description. Some studies may offer compensation.

For Gulf War Veterans

WRIISC as a Model of Care for Chronic Multi-Symptom Illness

**POPULATION:** GWV with symptoms of GWI who have an upcoming appointment with a provider at a primary care clinic or WRIISC

**PURPOSE:** Investigate how providers and GWV think and talk about GWI.

**CONTACT:** Call your local WRIISC and ask about the "Communication Study."

**CA WRIISC**

Gulf War Vestibular Study

**PURPOSE:** Determine if use of a hand-held device that activates a nerve called the Vagus Nerve reduces widespread pain.

**CONTACT:** Sara Tom

NJ WRIISC

For Veterans of All Eras

Breathing Meditation Intervention for Post-Traumatic Stress Disorder (PTSD)

**POPULATION:** Open to all Veterans with PTSD with no diagnosis of severe TBI or uncontrolled seizure disorder

**PURPOSE:** Compare a group treatment using breathing-based meditation with cognitive processing therapy, a well-established one-on-one talk therapy.

**CONTACT:** Julia Tang, 650-785-6661

Repetitive Transcranial Magnetic Stimulation to Improve Cognitive Function in TBI

**POPULATION:** Individuals who are between the ages of 20 and 65 with a history of TBI

**PURPOSE:** Evaluate Repetitive Transcranial Magnetic Stimulation (rTMS) a method of delivering therapeutic, non-invasive brain stimulation as a treatment for Veterans with mild to moderate TBI.

**CONTACT:** Girish R. Swaminath, 650-852-3233.

Chronic Pain in GWV

**PURPOSE:** Compare two non-drug treatments for chronic pain in GWV: Yoga and a pain management wellness group for chronic pain.

**CONTACT:** Rachael Cho, 650-665-0159

**CA WRIISC**

Yoga and Group Treatment for Chronic Pain in GWV

**POPULATION:** Open to Veterans who served in the military in 1990-1991 regardless of deployment and have chronic pain

**PURPOSE:** Investigate whether CAM can provide improvement for GWI specifically looking at chronic pain, fatigue, and cognitive impairments.

**CONTACT:** Study team, 202-745-8000, ext 5-5768

For Gulf War Veterans

Post-Exertional Malaise in GWI: Brain, Autonomic and Behavioral Interactions

**POPULATION:** GWV and Veterans who served but were not deployed between 1989 and 1994

**PURPOSE:** Use brain imaging and ultrasound techniques to examine different aspects of a Veteran’s nervous and immune systems and determine how function is affected by exercise.

**CONTACT:** Maran Shaker

Small-fiber Polyneuropathy in Veterans with GWI

**POPULATION:** GWV

**PURPOSE:** Determine the presence of small-fiber polyneuropathy in Veterans with GWI and develop screening tools to help assist in diagnosis.

**CONTACT:** Christina Gonzalez

For Gulf War Veterans

Vagus Nerve Stimulation: A Non-Invasive Treatment to Improve the Health of GWVs with GWI

**POPULATION:** GWV who have symptoms of GWI including widespread pain

**PURPOSE:** Determine if use of a hand-held device that activates a nerve called the Vagus Nerve reduces widespread pain.

**CONTACT:** Will Van Doren

Gulf War Vestibular Study

**POPULATION:** GWV

**PURPOSE:** Determine if underlying balance issues are seen in GWV and determine if the balance system can be improved by using a low level electrical stimulation via electrodes placed on the ears.

**CONTACT:** Faria Sanjana

Development of Dietary Polyphenol Preparations for Treating Veterans with GWI

**POPULATION:** GWV who have symptoms of GWI

**PURPOSE:** Investigate the potential of daily Concord grape juice consumption in alleviating clinical symptoms in Veterans with GWI.

**CONTACT:** Yaa Haber

Role of Cerebral Blood Flow in Nausea and Motion Sickness

**POPULATION:** Veterans of all eras and civilians, age 18-59

**PURPOSE:** Assess how blood flow changes when people are rotated in a chair that might increase motion sickness.

**CONTACT:** Leslie DeLa Cruz

**DC WRIISC**

Vestibular Consequences of Blast Related Injury Study

**POPULATION:** Open to Veterans of all eras

**PURPOSE:** Measure balance using a state of the art rotational chair designed by NASA, as well as brain blood flow (through a non-invasive ultrasound technique), to better understand effects of head trauma.

**CONTACT:** Leslie DeLa Cruz

Comparison of a Group Intervention Using a Portable Stimulator

**POPULATION:** Open to Veterans of all eras

**PURPOSE:** Examine whether applying low levels of electrical stimulation, via electrodes placed behind the ears, can improve balance function.

**CONTACT:** Leslie DeLa Cruz

**JOINT SITE STUDIES- NJ, DC, & CA WRIISC**

**CONTACT:** Girish R. Swaminath, 650-852-3233.

Blast Related Injury Study

**POPULATION:** Open to Veterans of all eras

**PURPOSE:** Assess the ability of a hand-held device to quickly evaluate sensory and motor function and see who will benefit from rehabilitation therapy.

**CONTACT:** Yaa Haber

**CONTACT:** Faria Sanjana

For Gulf War Veterans

Medication Study (CAM) Study

**POPULATION:** Open to Veterans who served in the military in 1990-1991 regardless of deployment and have chronic pain

**PURPOSE:** Compare two non-drug treatments for chronic pain in GWV: Yoga and a pain management wellness group for chronic pain.

**CONTACT:** Rachael Cho, 650-665-0159

**FOR VETERANS OF ALL ERAS**

**CONTACT:** Study team, 202-745-8000, ext 5-5768

For Gulf War Veterans

Chronic Multi-Symptom Illness

**PURPOSE:** Determine if 12 weeks of telephone-delivered problem-solving therapy can reduce disability in GWV with GWI.

**CONTACT:** Will Van Doren

**FOR VETERANS OF ALL ERAS**

**CONTACT:** Sara Tom

**CONTACT:** Leslie DeLa Cruz

**CONTACT:** Apollonia Fox

**CONTACT:** Will Van Doren

**CONTACT:** Faria Sanjana

**CONTACT:** Yaa Haber

**CONTACT:** Christina Gonzalez

**CONTACT:** Maran Shaker

**CONTACT:** Leslie DeLa Cruz

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**CONTACT:** Apollonia Fox

**CONTACT:** Will Van Doren

**CONTACT:** Faria Sanjana

**CONTACT:** Yaa Haber
Around the WRIISC News

DC WRIISC
Helping Veterans One by One

THE DC WRIISC is proud to share some very positive feedback from a Veteran who recently attended our clinical program. The Veteran sent a thank you letter after his visit and reported that he was greeted with “the highest levels of medical professionalism and expertise” by our WRIISC clinicians during his visit. Additionally, he felt that “the medical discoveries [made by our team] may lead to an extended quality of life” for him. Furthermore, the Veteran was impressed with the individual attention and care he received in all of the steps he took before the scheduled evaluation. In summary, the Veteran stated, “The WRIISC is a promise kept [for excellence in health care offered to Veterans by VA].” Feedback such as this reinforces that our team [may lead to an extended quality of life] for Veterans enrolled in the PDHC. As a result, the PDHC as an optional complementary service to the Public Health Foundation supported by the VA’s Employee Education System (EES).

NJ WRIISC
Development of On Line Training for Providers

AS A NATIONAL RESOURCE for post-deployment health, the WRIISC has developed a series of web-based offerings (referred to as e-learning) as part of an educational curriculum for VA and community health care providers. The modules provide important and clinically-relevant information about the issues faced by deployed Veterans. They provide useful resources to better address Veteran health concerns regardless of where a Veteran receives care.

E-learning modules will be available to VA providers through the VA’s Talent Management System (TMS) and to VA and community providers via the Training Finder Real-Time Affiliate-Integrated Network (TRAIN), a free service of the Public Health Foundation supported by the VA’s Employee Education System (EES).

The first module called “Assessing Deployment Related Environmental Exposures” focuses on health concerns related to exposures Veterans may encounter while preparing for and during deployment and instructs the provider on how to assess and manage this key clinical need. To locate this module, search for TRAIN Course ID: 1070234 on the TRAIN website: https://www.train.org. Accreditation is offered.

Additional modules in the planning phase will focus on topics including understanding and managing GWI, and identification and management of chronic multisymptom illness. All of the WRIISC e-learning modules are designed to ensure providers can deliver the care Veterans need. To learn more about WRIISC education efforts of providers and Veterans, visit: http://www.WarRelatedIllness.va.gov/education/

ATTENTION READER: Do you prefer to receive the WRIISC Advantage newsletter electronically? Email us at wriisc.nj@va.gov with your full name and preferred email address.
Visit our website for more information about WRIISC research:

www.WarRelatedIllness.va.gov/research/