WRIISC Advantage
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Health and Wellness for Veterans with LIMITED MOBILITY

A National Newsletter for Veterans and their Health Care Providers
VETERANS OF ANY ERA may experience limited mobility (in the short-term or long-term) for a variety of reasons including: injury in service, medical conditions, or chronic pain. If you are experiencing limited mobility, your health and safety may be at risk. Regardless of the specific health symptoms you may be experiencing, two of the most valuable things you can do to reduce risk and live better are: preventing falls and maintaining a healthy weight.

PREVENTING FALLS

Preventing falls is a top safety priority for Veterans with limited mobility. It is important to use any assistive device (cane, walker, wheelchair, etc.) prescribed or recommended by your provider. In addition, creating and maintaining a living space to meet your physical needs will lead to higher levels of safety and comfort and also make it easier to get around day to day. The following are some examples:

- Ensure that there is at least one sturdy handrail on staircases. Adding a handrail on the other side makes a huge difference regardless of the side of impairment
- De-clutter your space by making sure that throw rugs, electric cords, and telephone wires are not tripping hazards
- Skid-free mats can prevent falls on slippery floors and in shower stalls
- A sturdy chair by the bathroom sink can make it easier for you to brush your teeth and groom yourself while seated.

When it comes to preventing falls, it is critical to use caution, practice good decision making, and ask for help when you need it. If you live alone, you should ask a family member or a friend to visit and help you rearrange your living area to best meet your needs. The general rule is: do not take chances.

WEIGHT MANAGEMENT

Maintaining a healthy weight can be a challenge when you have limited mobility, but it is vital to overall health and well being. You can manage your weight with a combination of physical activity* and calorie management. Non-strenuous physical activity is highly recommended for those with limited mobility and has several key benefits for all Veterans regardless of the specific health symptoms you may experience.

Even if you are unable to walk, there are still several exercises you can do. Some gyms are designed for people with limited mobility. Cardiovascular (cardio) or aerobic exercises are vital to weight loss as they raise your metabolism to burn body fat more efficiently rather than store it. Some cardio exercises you can try are:

- Water aerobics at a gym and/or local YMCA with a trainer
- Physical therapy with light weights, stability balls, and exercise bands
- Arm cycling on an arm ergometer - a tabletop pedal for your arms you can use while seated
- Simple home exercises requiring little movement like continuous cleaning of your living space or wheelchair workouts (Wheelchair Yoga).

*Always speak with your doctor before beginning an exercise program. Read more about aerobic exercise, its overall benefits, and how to get started on the next page!
Graded Aerobic Exercise: What 30 Minutes a Day Can Do

ALL VETERANS, regardless of age, weight, or athletic ability will benefit from incorporating aerobic exercise into daily life.* For those with limited mobility, a program of graded aerobic exercise 30 minutes a day can help you live longer and healthier. As your body adapts to regular aerobic exercise, you’ll get stronger and more efficient. Consider some of the many ways that aerobic exercise can help you feel better and enjoy life to the fullest.

Regular aerobic exercise can reduce health risks by:

- Helping you manage chronic conditions.
- Keeping excess pounds at bay.
- Keeping your arteries clear.
- Strengthening your heart.
- Boosting your mood.
- Increasing your stamina.
- Helping you stay active and independent as you get older.

During aerobic exercise, you repeatedly move muscles in your body. You’ll breathe faster and more deeply. This maximizes the amount of oxygen in your blood. Your heart will beat faster, which increases blood flow to your muscles and back to your lungs. Your small blood vessels (capillaries) will widen to deliver more oxygen to your muscles and carry away waste products, such as carbon dioxide. Your body will even release endorphins, natural painkillers that promote an increased sense of well-being.

START SLOWLY

Check with your doctor before you begin to exercise. Once you have your doctor’s permission, start slowly. You can select an aerobic exercise that is right for you and begin five minutes in the morning and five minutes in the evening. The next day, add a few minutes to each exercise session. Pick up the pace a bit, too. Eventually, you will work your way up to 30 minutes a day. The short- and long-term benefits of aerobic exercise are well worth your time and commitment! \( \star \)

*If you have a condition that limits your ability to exercise (or are limited in mobility for any reason as discussed above), ask your doctor about alternatives.

MAKING CHANGES

The key to making changes to improve and maintain your health and wellness is self-motivation. This can be supported by setting short and easy goals that will excite you and help you reach your ultimate goal. You may want to write down the specific date once you reach each goal and keep these notes where you can see them every day (taped to a mirror or on your refrigerator) to serve as motivation. While putting yourself in the supportive environment of a friend, family member, or trainer may further help you, motivation from within is ultimately the key to your success. \( \star \)

HELPFUL TIP
If you’re unable to shop for food ingredients, local supermarkets may offer home delivery of items on your shopping list. Some organizations provide home delivery of meals.

WATER AEROBICS IS A GREAT WAY TO STRENGTHEN YOUR HEART AND INCREASE YOUR METABOLISM.

Eating the same amount as when you were mobile can lead to weight gain, worsening problems with your mobility. It is important to follow a well balanced diet. Eating five smaller meals rather than two or three large meals may help reduce your overall calorie intake and increase your metabolism. Speak with your physician or a registered dietitian who can evaluate your calorie needs and how to best meet them.
BRENT CASEY: A Veteran’s Story

BRENT CASEY WAS INSPIRED AT AN EARLY AGE to serve his country. His grandfather, a World War II Medal of Honor recipient, taught him about discipline, work ethic, and selflessness and was his role model. At the age of 19, Brent joined the Army to serve in the Medical Corps and was trained as a combat life saving medic. In October 1990, he was deployed to Saudi Arabia to support Operation Desert Shield/Desert Storm. During his deployment, Brent remained calm while focused on dealing with the fear of never knowing what the next minute would hold. During an air attack as his unit moved towards the Iraq border, Brent witnessed what he describes as “pure destruction.”

When Brent returned from deployment in March 1991 there were a number of readjustment challenges he faced from dealing with his marriage to employment issues. As he continued to struggle personally and professionally, Brent saw himself on a “path of destruction.” In 2005, with the encouragement of his family, Brent visited his local Department of Veterans Affairs (VA) hospital. He was quickly diagnosed with post-traumatic stress disorder (PTSD) and eventually, fibromyalgia. Finally, after almost 15 years, Brent was able to better understand why he had been struggling. When he received care in the VA hospital, he was also able to learn tools to cope with his illness.

In spite of this progress, Brent also faced some medical challenges. He continued to suffer with pain, fatigue and gastrointestinal symptoms. In searching for more answers, he was eventually referred to the War Related Illness and Injury Study Center (WRIISC) at the East Orange Campus of the VA New Jersey Health Care System. After receiving a letter from the Department of Defense that he was in the vicinity of Khamisiyah, he also had questions about his possible exposure to Sarin gas and whether that was linked to any of his health concerns.

When Brent visited the WRIISC, he was struck by the comprehensiveness and highly personalized nature of the WRIISC evaluation. During his visit, the team of providers was able to diagnose him as having Chronic Fatigue Syndrome and Irritable Bowel Syndrome which finally explained many of his symptoms. An important part of his WRIISC evaluation was receiving information on how to better manage his symptoms. Specific recommendations for his conditions included new medications for pain management, graded aerobic exercise to combat fatigue, and dietary information to minimize gastrointestinal symptoms. With his plans to return to school, Brent was also worried whether his ability to concentrate and memory were impaired. His WRIISC neuropsychological evaluation indicated that Brent was above average in attention and concentration skills which reassured him and gave him the confidence to be able to return to school. Brent’s questions about Sarin were related to the possibility that there might be future health effects. Although the exposure assessment part of the evaluation was not able to answer all his concerns about future health effects from Sarin gas, Brent left the WRIISC encouraged to better manage his health with the tools to help him get there.

Today, Brent is pursuing a PhD in strategic management and is the president of the Student Veterans Association
at his college. As part of this group, he has helped raised funds to build a Medal of Honor Memorial Garden to honor Veterans. Brent continues to deal with his symptoms but credits the WRIISC and VA with helping him learn strategies to minimize his symptoms and live a healthier and more productive life. “I am an absolute firm believer that the WRIISC was instrumental in changing my life for the better. Through the knowledge about my own health and the suggestions for healthy coping skills I gained from the WRIISC team, I have gone on to do things in life I never thought possible.” When asked if he would recommend other Veterans to the Center, he enthusiastically replied, “absolutely, absolutely, absolutely. Veterans will gain the necessary health information to get better.” For more information on referrals to the WRIISC, visit our Web site at: www.warrelatedillness.va.gov.

“The WRIISC evaluation is on a whole different level.”

WRIISC Events for Providers

THE WRIISC, in conjunction with the Employee Education System and Office of Public Health and Environmental Hazards (OPHEH) of VA, hosts several educational events for VA health care providers taking place this year.

WEBINAR SERIES

Recognizing how busy providers are, we launched our first Webinar series on topics that can assist the VA provider community to better meet the needs of the Veterans we serve. The Webinar series began in February and ends in June. The 90-minute courses are specifically designed for health professionals including: physicians, physician assistants, nurses, psychologists, social workers, counselors, occupational therapists, physical therapists, administrators, and health care executives.

To date, attendance and feedback on the Webinar series have been positive and there are plans to record the series so that even more providers have an opportunity to participate. Stay tuned!

Integrative Health Care for Veterans: Examples in Practice and Research
Monday, February 14, 2011

Risk Communication and Communicating with Patients
Wednesday, March 16, 2011

Pulmonary Effects of Combat Theater Exposures
Tuesday, May 24, 2011

TBI and PTSD in Post Deployment Veterans
Monday, June 27, 2011

CARING FOR VETERANS: MOVING FORWARD IN PROVIDING QUALITY CARE
AUGUST 9-10, 2011, WASHINGTON, DC

This conference aims to provide participants with relevant clinical information necessary to care for Veterans with post-deployment health concerns and conditions. The topic areas covered include: deployment-related illnesses and injuries, medically unexplained symptoms (MUS), traumatic brain injury (TBI), infectious diseases from Operation Enduring Freedom/Operation Iraq Freedom/Operation New Dawn (OEF/OIF/OND), environmental exposures of concern, PTSD, women’s issues, integrative health care for MUS, VA presumptive service-connected conditions, wellness and readjustment issues, and much more! The target audience for this event is VA physicians, nurses, social workers, psychologists, and VA administration/leadership employees.

FOR MORE INFORMATION: Call 973-676-1000, extension 1177, Email: wriisc.nj@va.gov, or visit us at: www.warrelatedillness.va.gov.

DC WRIISC

The MIND Study (Markers for the Identification, Norming, and Differentiation of TBI and PTSD)

Julie C. Chapman, PsyD

CURRENT DIAGNOSTIC PROCEDURES for traumatic brain injury (TBI) and PTSD in both the military and civilian population rely heavily on patient self-report, an important source of information in the diagnosis of any condition. However, both TBI and PTSD can impact an individual’s ability to recall or to communicate important aspects of the event. Significant symptom overlap between TBI and PTSD presents another challenge to accurate diagnosis. Current treatments for TBI and PTSD are different, time-consuming, expensive, and can be emotionally draining for the patient. Objective instruments, differential measures and long-term assessment of multiple TBIs may increase diagnostic speed and accuracy for these conditions as well as lead to the discovery of more effective treatments.

The MIND Study is a VA-funded investigation of 800 OEF/OIF Veterans with TBI, PTSD, both, or neither. Led by Dr. Julie C. Chapman, Neuroscientist, at the Washington, DC VA Medical Center location of the WRIISC, the study also involves the NJ and CA WRIISC sites. The MIND study aims to integrate a very large data set of comprehensive measures to thoroughly describe TBI and PTSD in Veterans, build prediction models, identify objective measures that may bolster diagnostic criteria, and illuminate potential new therapies.

Measurement tools used in the MIND Study include state-of-the-art brain imaging (diffusion tensor imaging, resting-state functional Magnetic Resonance Imaging (fMRI) and task-related fMRI), hormone assessments concurrent with polysomnography, extensive physical examinations, sensorimotor assessments, neuropsychologic testing, and genomic and neuroimmunologic sampling.

The MIND Study will take approximately 24 months to complete and will begin recruiting Veterans in the summer of 2011.

CA WRIISC

Research Advisory Committee (RAC) on Gulf War Veterans’ Illnesses

ON MARCH 1, 2011, representatives from each WRIISC provided an update at the RAC meeting on projects using Complementary and Alternative Medicine (CAM) and Integrative Care to treat Veterans as well as several brain imaging projects underway at the CA WRIISC.

Dr. J. Wesson Ashford, Director of the CA WRIISC, also presented a clinical case report that utilized Single Photon Emission Computed Tomography (SPECT technology) to study the brains of a group of Gulf War I Veterans who came to VA reporting memory problems. SPECT scans allow you to visualize the flow of blood through the brain. Blood flow decreases in individuals with Alzheimer’s disease (AD) and in normal aging but you will not generally detect any abnormalities in SPECT scans in people younger than 50. The mean age of the Gulf War (GW) Veterans was 37 but SPECT scan results from this group revealed decreases in blood flow. When compared to SPECT scans on individuals with Alzheimer’s disease (AD), Veterans without AD, and older Veterans, the GW Veterans exhibited blood flow patterns more like the older and/or AD population indicating possible signs of abnormal aging.

Louise Mahoney, of the CA WRIISC, opened the CAM presentation by providing a brief chair yoga session and an overview of yoga and its potential benefits. She provided results from a 12-week pilot yoga program for Veterans. Veterans reported improvements in energy, pain, fatigue, and PTSD. In a program satisfaction questionnaire, Veterans who completed at least 12 weeks of yoga had the following positive results to report: 1. They felt better after each class; 2. Their symptoms had improved since starting the yoga program; and 3. They would participate in a yoga program again.
Overall, the RAC was quite impressed and pleased with the research done at the WRIISC.

**NJ WRIISC**

**Research Day**

**THE WRIISC RESEARCH PROGRAM** focuses on Veterans’ post deployment health issues. To further this mission, NJ WRIISC hosted a WRIISC Research Strategy Planning Meeting on March 22, 2011 with leadership representatives from major Veterans Service Organizations (VSOs) including the Veterans of Foreign Wars (VFW) and the Disabled American Veterans (DAV). Members of VA Central Office, VA Office of Research and Development, and the Gulf War RAC also attended. The meeting focused on enhancing communication between WRIISC researchers and Veterans they strive to help. Directors from all three WRIISC sites presented current research initiatives with a special focus on how results might translate into clinical practice to benefit Veterans’ health. The research topics included studies on: blast injury, PTSD, burn pit exposure, reintegration, traumatic brain injury, and acupuncture.

Later that day, WRIISC faculty and invited guests had a roundtable discussion about the research shown. This enabled WRIISC researchers to see the Veteran perspective about their priorities and what issues the WRIISC should further examine. For example, concerns were expressed over how Veterans exposed to burn pits are tracked and whether a National surveillance program similar to that of the Agent Orange and Gulf War Registries will be implemented. The input we receive directly from Veterans and VSO leadership helps us chart the course for future research planning. This ensures that the WRIISC research program maintains its focus on projects that can be quickly and efficiently translated into the clinical realm to impact Veterans’ post-deployment health.

**ABOUT THE COVER:** Marine Sergeant Julian P. Torres performs core-strengthening exercises with a medicine ball during a physical therapy session at the Comprehensive Combat and Complex Casualty Care facility in San Diego, CA. (US Navy photo by Mass Communication Specialist 2nd Class Chelsea A. Radford, November 8, 2010.)
We study post deployment health conditions.

Please visit our National Web site for more information on specific services and programs:

www.warrelatedillness.va.gov