Research to Improve the

Lives of Veterans Who Served

in Afghanistan & Iraq



AFGHANISTAN & IRAQ

VA's Research and Development program has a comprehensive research agenda to address the deployment-related health issues of the newest generation of veterans—those returning from Operation Enduring Freedom and Operation Iraqii Freedom (OEF/OIF).



A Message to Our Veterans

As the largest integrated health care system in the country, the Veterans Health Administration (VHA), part of the Department of Veterans Affairs (VA), provides health care to more than five million veterans each year.

VA is committed to providing the best care possible to all veterans, including our newest generation of veterans – the men and women returning from combat in Afohanistan and Irao.

We Office of Rescards and Decodepannet is homed to support these efforts through costing-edge research initial at anyoning the locality and equility of the approxing the locality and equility of the hore neural vacuum who areved and were inpart of Operation Itagi Freedom (DFI/CUF) are extensible freedom (DFI/CUF) are extensible for the resummant operation Itagi Freedom (DFI/CUF) are sensible for the resummant bount support (FIR), limbi anyorations, and bours. Furthermore, due to imported localy armor and compared localy armor and a compared in the sensible of the sensible of the magnetize endance of the new termany. For some of the new termany are howed local in the sensible of the sensible at lows. For some of the new termany endiperment or coving support of the sensible health childing species as post compared health childing species post options of the sensible health childing species post options of the sensible health childing species post options options options are post options options options options options options the sensible options options options options options options options and the sensible options options options options options are also options options options options options options options and the sensible options options options options options are also options options options options options options options are also options options options options options options options are also options options options options options options o

Wa'o Office of Research and Development is dedicated to conducting research that will advance the care for all verenan. The urgent health care needs of our military returning from conflicts in Afglunitara and Irag are a top research afglunitar and Irag are a top research origin the state of the state of the finite research and the state of the issues and highlights research advances that improve the health care of returning OEF/OIF verenans.

Joel Kupersmith, M.D. Chief Research and Development Officer Department of Veterans Affairs

Research Agenda

VAO Office of Research and Development has a comprehensive research agenda to address the deployment-related health issues of the newest generation of veteransthose returning from Operation Enduring Freedom and Operation Itagl Freedom (DEF/OIF). VA researchers are working to develop new treatments and tools for elinicans to case the physical and psychological pain of returning solders; hmprove access to health care services, and accelerate discoveries of new and innovative ways to evaluate and rearc OEF/OIF) reterant needs.

This research will also benefit veterans of other military conflicts and improve the lives of civilians suffering from disability due to injury or disease. In addition, the VA Office of Research and Development works collaboratively with other organizations, such as the Department of Defense (DoD) and the National Institutes of Health (NH4), to advance research aimed at improving the health and care of all generations of veterans.

Collaborations



In an effort to provide the highest quality and most cost-effective specialized care for returning OEF/OIF service members, VA Research and Development collaborates with other programs within the Veterans Health Administration and with other federal agencies, including DoD and NIH.

Below are just a few examples of collaborative work.

- VA researchern are collaborating with clinical staff at the four regional VA Polytzmat Rehabilization Cortex, which provide specialized rehabilization rearment, to expand clinical expertise in polytzman and blast related injuries throughout VA and between VA and DAD. Research provise induced valuation of a pain assessment tool and work to improve family support and provider family communication during an injured service member's star in the Polytraman Rehabilitation Center.
- DoD, NIFL and VA researchers are collaborating to develop a family intervention program with spouse of service members being treated for traumatic limb loss or traumatic brain injury. This project was designed to each spouses techniques in alternative and complementary medicine that have been shown to lessen anxiety and pain levels and allow for reduced use of pain medication.
- Va. In collaboration with the National Institute of Mental Health and Do.D. issued a call for collaborative research forcing on combine cluted mental fields order and stress reactions involving active-duty or recently separated National Guard and Reserve troops from OEF/OIE. Funding has begin for projects to screen, asses, and provide direct care (dutis is early inversion, prevention, transment, relabilitation, and maintenance) to groups and individual who are at risk because of their combat exposures or who have been diagnosed with PSD.
- DoD-VA projects will examine the short- and long-term benefits of advanced regional anesthesia techniques for pain control following combat-reduced traumatic injuries to extermitise. This research could result in a significant reduction in pain and disability. Moreover, early pain intervention on the battlefield could reduce the incidence and severity of associated mennal health disorders.

VA's Research and Development program will continue to discover new knowledge and create innovations that will advance the health and care of veterans and the nation. Health and Care of Veterans Who

Served in Afghanistan & Iraq

Our New Generation of Veterans



Polytrauma

Many of the wounded soldiers returning from the OEF/OIF conflicts are victims of car bombs or improvised explosive devices (IEDs)

that cause severe injuries to several parts of the body. These multiple complex injuries are called polytrauma. Polytrauma can include injuries to internal organs, limb loss, vision loss, hearing loss, paralysis, chronic pain, burns, and psychological disorders.

To help address these critical needs, VA researchers are working to:

- Improve coordination of care for veterans with multiple injuries.
- Identify subtle indicators of potentially significant problems caused by head trauma, such as disordered perception and judgment.
- Repair the injured brain, spinal cord, and other organs, and protect them from further damage.
- Advance technologies such as hearing and vision implants and computerized or robotic prostheses.
- Develop strategies that will reduce the burden for family members of injured veterans.

Mental Health

VA researchers developed a screening tool for depression for use in primary care settings. The tool has been adopted in other healthcare systems in the U.S.



and in the United Kingdom. JAMA 2006 295(24) 2874-2881. Military personnel face many psychological challenges during their toous of dury that can make it difficult to realguint to life back home. As many as one in three soldiers may seek or need mental health care fare returning from dury in Afglunistan of raad, Soldiers may experience symptoms of psychological distress, "readjustment disorders," or nore serious problems such as post-traumatic stress disorder (PTSD). Depression and anxiety are fairly common, and returning soldiers, especially younger verzans, may turn to aloohod or drugs in an attempt to deal with their psychological distress. Use of aloohol or drugs can exacterbur hene mental and emotional disorders.

VA researchers are working to improve mental health care by:

- Developing methods to screen for mental health problems because early recognition and treatment results in better patient outcomes.
- Leading the way in conducting studies on both drug and psychosocial/behavioral therapies.
- Studying treatment for women veterans, who may experience trauma differently than male veterans.

Post-Traumatic Stress Disorder

VA researchers have found that prazosin, an inexpensive generic drug already used by millions of Americans for high blood pressure and prostate problems, improves sleep and reduces nightmares for veterans with PTSD. A larger trial to confirm the drug's effectiveness is underway.

Biological Psychiatry. 2007;1(8):928-934

PTSD is a special form of anxiety disorder that may occur after a person experimence or witnesses a transmite event, such as military combar, natural disastens, serious accidents, or physical or sexual assault. Many soldiers diagnosed with PTSD respond well to standard treatment, but others do not. Research is entital to better understand this disorder so that effective preventive strategies and treatments are developed and available for everyone.



Some key research questions include:

- · What determines which individuals will develop PTSD?
- How can we correctly identify those at risk for PTSD and determine the most effective interventions?
- Can we identify biological markers that might help guide psychological evaluation, treatment selection, and outcomes?

To help answer these critical questions, VA researchers are:

- Testing whether computer-simulated, "virtual reality" combat environments can enhance the effectiveness of prolonged exposure therapy.
- Developing new ways to provide care to veterans living far from VA medical facilities, such as the delivery of health information and services via telephone, the Internet, and videoconferencing.
- Striving to ensure that evidence-based, state-of-the-art care is available to all veterans with PTSD by quickly moving scientific breakthroughs from the laboratory into patient care.

Traumatic Brain Injury

VA researchers demonstrated that the intravenous infusion of bone marrow stem cells taken from adults can protect against brain trauma. This has major implications for an early intervention in veterans with brain trauma and spinal cord injury. *Neurotem* 200:1011614

Tranunctic brain injury (TBI) is a general diagnosis covering a vide range of injuries to the brain hac can occur during combat. These injuries can result in physical symptoms such as vision injuriement, dizzinesa, and headache, as well as cognitive and emotional problem such as memory impairment, instruction, poor ladgenet, anxiety, and depression. VA investigators are conducting cutting-edge research to help return maximum function to verterans with TBI.

Important areas that VA researchers are investigating include:

- Developing and testing comprehensive rehabilitation strategies.
- Searching for ways to improve memory and attention and protect brain cells from injury.
- Testing new drugs for treating traumatic brain injuries.
- Helping veterans with TBI to regain a measure of independence—for example, by using a driving simulator to evaluate veterans' driving ability or provide driver retraining.

Spinal Cord Injury

A neuromotor prosthesis (NIMP) is a brain-computer interface that helps replace or restore lost movement in paralyzed patients. The technology uses a miniliantized array of electrodes that pick up brain signals and sends them to a computer for decoding. VA researchers and others recently demonstrated that an NMP could enable a paralyzed patient to operate an artificial hand, robotic arm, computer, or television by using only his thoughts.

Nature. 2006; 442(7099):164-171.

VA has the largest network of care for spinal cord injury (SCI) in the nation and provides primary and specialty care at 23 regional SCI centers. VA leads the health care profession in



defining new methods of rehabilitation through SCI research and engineering. For example, VA researchers identified a molecular basis for "phantom pain," a phenomenon in which patterns experience the sensation of pain in a limb that has loss all feding, as in SCI, or in a limb that is no longer there, as in amputation. This discovery has enabled a better understanding of phantom pain and may eventually lead to new methods of pain relief.



Currently, VA researchers are conducting important SCI studies that are:

- Testing tiny stimulators implanted into breathing muscles of veterans with SCI that will help avoid respiratory complications, the leading cause of death in SCI patients.
- Developing systems that deliver low-level, computercontrolled electric current to the muscles, which may allow individuals with incomplete SCI to once again walk and maneuver in their environments.
- · Developing new pain treatments.

Amputation and Prosthetics

Currently available prostheses for transibial (below the knee) amputess do not help promote normal validing; in fact, their "passive" design can result in balance difficulties and slow walking. A team parity funded by VA has addressed his problem by developing a powerd and-foot prosthesis that promises to help restore amputes' ability to walk normally. A preliminary study involving three transibial amputes confirmed the benefits of the new prototype: the patients expended less energy during walking, had tever balance problems, and walked 15 percent faster.

Approximately 6 percent of wounded solidiers returning from Iraq are amputees. The number of veterans accessing VA health care for prosthetics, sensory aids, and related services has increased by more than 70 percent since 2000. VA's Research and Development program currently supports a broad research portfolio related to amputation and prosthetics.

VA researchers are:

 Implementing cutting-edge technology using microelectronics and microchips (very small electronic components), as well as robotics, to create lighter, more functional prostheses that look, feel, and respond more like real arms and legs.

- Collaborating with Brown University and the Massachuters Institute of Technology to develop a "biohybrid" limb that will combine regenerated tissue, lengthened bone, implement sensors to allow the limb to be controlled by the user's brain signals, and new anchoring techniques to reduce the discomfort associated with current protheses.
- Partnering with the Department of Defense (DoD) to improve prosthetic designs, define standards of function, and conduct outcome studies.

Burns

Many burn injuries result in the loss of fingers and thumb. VA researchers are developing a state-of-the-art prosthetic for people who still have a wrist but have lost their fingers and thumb due to burns or other injuries.

US Medicine. June 2005. www.usmedicine.com

Severe burns cause excruciating pain and debilitation. VA is further expanding its research focus on burn injury to advance knowledge in this area of growing importance.

VA researchers are:

- Exploring new approaches to pain treatment that will help veterans continue rehabilitation and achieve maximum restored function.
- Working on a five-finger prosthesis to help restore function to those who have lost fingers as a result of severe burns.



 Working on the jointly outlined VA and DoD research agenda on burns to address priority areas such as managing burn scar contractures (rightening of muscle, tendons, ligaments, or skin that prevents normal novement), fostering successful psychological adjustment, and establishing reliable outcome measures to guide clinical care.

R&D Communications (12) 103 South Gay Street, Ste. 517 Baltimore, MD 21202 (410) 962-1800 x223 research.publications@va.gov

