

DCoE in *Action*

VOL 2/NO. 2 | MARCH 2009



Dr. James Kelly Named NICoE Director

Dr. James P. Kelly, a neurologist who is one of America's top experts on treating concussions, has been appointed director of a new Department of Defense center that will conduct research, diagnosis and treatment planning to help members of the military with complex psychological health problems and traumatic brain injury.

The National Intrepid Center of Excellence (NICoE), which is scheduled to open in spring 2010, is a component center of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE).

Ideally situated on the National Naval Medical Center (NNMC) campus and served by the Medical Center Metro station, NICoE's facility will have close access to the Uniformed Services University, the National Institutes of Health and the National Library of Medicine. NNMC will soon be called the Walter Reed National Military Medical Center.


The new center is being built and equipped through the philanthropy of the Intrepid Fallen Heroes Fund, Fisher Foundation and other individuals and groups. When construction is completed, DCoE will operate the center.

"We are bringing Dr. Kelly to NICoE now to assemble a world-class team and plan landmark programs and research so

the new center can begin benefiting our warriors as soon as its doors open," said Brig. Gen. Loree K. Sutton, DCoE director and. "Thanks to the generosity of donors who are raising money to build NICoE and the talented staff we will assemble, we're looking forward to making major strides to help build better lives for the brave men and women we serve."

Kelly is on a leave of absence from his position as professor of neurosurgery and physical medicine and rehabilitation at the University of Colorado Denver School of Medicine. His past positions include assistant dean for graduate medical education at the University of Colorado School of Medicine, and the neurology residency program director at Northwestern University medical school.

The new NICoE director has also served as director of the Brain Injury Program at the Rehabilitation Institute of Chicago. He was the neurologist for the Chicago Bears of the National Football League and is consulted frequently by professional, elite amateur and youth athletes who have sustained concussions.

Kelly co-wrote the sports concussion guidelines of the American Academy of Neurology and the Standardized Assessment of Concussion that are widely used in athletic and military settings. 



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From the Director



March is Brain Injury Awareness Month, and the focus of the month is traumatic brain injury, which is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain.

This is a good time to remind warriors who believe they may have had a

concussion to always get a prompt medical evaluation, even if they think they don't need it.

Concussion, also known as mild traumatic brain injury, accounts for more than 80 percent of traumatic brain injury in the military. Nearly all people who get concussions recover without permanent problems.

A concussion can be accompanied by a variety of symptoms, including headaches, dizziness, a loss of balance, a change in the senses of taste and smell, ringing in the ears, vision problems and nausea.

Because it is the mildest form of traumatic brain injury, concussion is harder to detect than moderate and severe traumatic brain injury.

Warriors who think they may have experienced a concussion should get a brief medical assessment to determine whether they need rest or treatment, or whether they can return to their units immediately. It's possible to be exposed to an explosion and have no visible

injury, so it is important to document what has happened if an individual has felt dazed or confused after such an event.

The MACE – Military Acute Concussion Evaluation – is needed as a precaution, even if a troop says, "Hey Sarge, I'm OK, I can go back" into battle or on duty.

The MACE was developed in 2006 based on research studies from sports injury literature. It can be performed by medics and medical corpsmen on the battlefield in five minutes and contains standardized tests of memory and concentration.

Warriors want to stay in the fight, and not take a time out even when they need it. But getting checked out after a possible concussion is the smart thing to do, and can help warriors preserve their brain health and be in better shape to serve our nation.

Brig. Gen. Loree K. Sutton, M.D.
DCoE Director 

Brain Injury and Collaborative Efforts To Address It

The new Center for Neuroscience and Regenerative Medicine at the Uniformed Services University of the Health Sciences will study blast injury to the brain and post-traumatic stress disorder (PTSD) by examining the combat casualties cared for at Walter Reed Army Medical Center in Washington, D.C., and the National Naval Medical Center in Bethesda, Md. The new center will focus on moderate to severe brain injuries, with an emphasis in these areas: Neuroregenerative medicine to restore neurological function; improving neuroimaging to diagnose traumatic brain injury and post-traumatic stress disorder; neuroplasticity as a tool to improve traumatic brain

injury therapeutic outcomes; and rehabilitation medicine for traumatic brain injury and post-traumatic stress syndrome.

The acting director of the center is Regina Armstrong, Ph.D., a Uniformed Services University of the Health Sciences (USU) professor of anatomy, physiology and genetics, neuroscience, and molecular and cell biology. The center's acting co-director is Walter Koroshetz, M.D., who is the deputy director of the National Institute of Neurological Disorders and Stroke.

Armstrong has played leading roles in neuroscience education at USU as the director of the neurosciences graduate


program for six years, and nationally as treasurer and member of the Executive Committee of the Association of Neuroscience Departments and Programs.

Recognition of a knowledge gap with prevalent brain injuries from Operation Iraqi Freedom and Operation Enduring Freedom led to funding by Congress to find new diagnostic tools and innovative approaches to increase neuroplasticity.

Such tools are critical to a better understanding of traumatic brain injury. This is especially true with mild brain injury, also known as concussion, which often goes undetected because of few or very subtle changes not

easily discerned in routine exams. When appropriate, use of regenerative medicine will address brain injury at the organ, cellular and molecular level.

A detailed information paper on Neural Stem Cell Research can be found at http://www.dcoe.health.mil/media/DCoE_News/Information_Paper_on_Neural_Stem_Cell_Research.aspx.

More information on the Center for Neuroscience and Regenerative Medicine can be found at <http://www.usuhs.mil/cnrm/>. 



Uniformed Services University of the Health Sciences (USU)

DHCC Program Helps Service Members With Deployment-Related Stress

The Deployment Health Clinical Center (DHCC), which is a DCoE component center, operates a three-week, multidisciplinary program for service members with deployment-related stress, post-traumatic stress disorder (PTSD) and/or difficulties adjusting to the return home.

The program addresses deployment-related stress injuries, which include the experience of immediate danger to life or personal safety, the fatigue of prolonged high operational tempo, or grief over the loss of unit members.

Patients in the program have the opportunity to work through their difficult memories, grieve over their losses, deal with their anger, and learn proven techniques to reduce physical and emotional stress reactions.

The program is designed to meet individual patient needs, with an internist evaluating and providing medical treatment for physical symptoms. The treatment program is group-oriented, with three to eight individuals going through the three-week program together to facilitate trust and mutual support.

DHCC recently held a ceremony for eight patients who graduated from the Specialized Care Program Track II. The commander of the Walter Reed Medical Health System, Col. Norvell V. Coots, addressed patients who graduated from the program and their families, thanking the service members for their sacrifice and the DHCC staff for their help in support of the service members.

Dr. Roy Clymer, director of the Specialized Care Program, congratulated the service members for all of the hard work they did during the program and let them know DHCC's greatest hope is that "this really is a commencement for you, a new beginning. We hope that while here, you've gotten some tools, some understanding that helps you head off on a different path."


Graduates may contact DHCC for any needed extra support and may return to the center to receive future care or referrals.

Each graduate was given a certificate of completion with Charles M. Province's poem "It is the Soldier" inscribed on the back of the certificate. Graduates were

given a chance to give their thoughts upon completing the course.

One of the graduates, an Army sergeant, discussed how the course helped him resolve anger toward the combat unit designated to rescue his five-man team when the team took on enemy fire during a sandstorm. The convoy did not arrive in time, and members of the team were killed during the operation.

During his stay at Walter Reed, the sergeant met the member of the convoy who had been on the radio with him when he was calling for help. The sergeant then learned that the other soldier felt very guilty about not being able to rescue the team. The convoy had been unable to use a satellite positioning system due to enemy trackers and improvised explosive devices.

"I came so far in the program that three weeks ago, I would have beat the guy up... because that's all I wanted to do." The sergeant added, "For me to get that closure...I thought back...we're not cured, but we've started to take those steps." 



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OFFICIAL BUSINESS

TOOLS YOU CAN USE

We are collecting “tools you can use” to feature in each newsletter. A more complete and growing collection is available in our online, Team DCoE “toolkit” (Resources) — www.dcoe.health.mil

Resources for Warriors, Families, Military Leaders and Medical Professionals

- Defense Centers of Excellence for PH and TBI: www.dcoe.health.mil
- Defense and Veterans Brain Injury Center: www.dvbic.org
- Department of Veterans Affairs: <http://www.va.gov>
- Mental Health Self Assessment Program presentation:
fhp.osd.mil/vso_mso/2008/MentalHealthSelfAssessmentProgram_MSO.ppt
- After-deployment concerns: www.afterdeployment.org
- Armed Forces Foundation: www.armedforcesfoundation.org
- Deployment Health Clinical Center: www.pdhealth.mil



DCoE In Action is a publication of the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE). We are committed to delivering the most relevant, useful and timely news on psychological health and traumatic brain injury and, as such, ask for your input and feedback on how to best accomplish this and improve our newsletter. Please send your input and feedback to our editor at dcoemedia@tma.osd.mil.

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Views expressed are not necessarily those of the Department of Defense.

