



# VISN 6 Mid-Atlantic MIRECC Post Deployment Mental Health

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## New MIRECC Fellowship sites

### Hunter Holmes McGuire (Richmond) VAMC

The Richmond VA Medical Center (RVAMC) is a new site for the MIRECC-sponsored psychology and psychiatry fellowship program. Robert Schneider, MD, is director of the psychiatry fellowship. Treven Pickett, PsyD, ABPP-Rp is director of the psychology fellowship. RVAMC is a tertiary care medical center and specialty care center for the VA in many areas. In addition to PTSD and OIF/OEF clinics, the Richmond site houses one of the VA's four Polytrauma centers. The opportunities in clinical training include inpatient, outpatient, and specialty care clinics. Fellows will be able to gain expertise in PTSD, Substance Abuse, Polytrauma, Primary Care, and Spinal Cord Injury.

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## Presentations from our MIRECC

### 3rd Annual VA Mental Health conference

#### Meeting the Diverse Mental Health Needs of Veterans: Implementing the Uniform Services Handbook

Baltimore MD, July 21- 23, 2009

#### Plenary Session

*Clinical Guidance on the Treatment of Co-Occurring PTSD/TBI: Report from the Recent Consensus Conference, Matthew Friedman & Robin Hurley*

#### Breakout Sessions

*Mild Traumatic Brain Injury Workshop: Assessment and Treatment of Cognitive Impairment, Robin A. Hurley, David L. Butler, Kathleen Goren, Mary Lu Bushnell & Elizabeth W. Twamley*

Workshop Coordinators: **Robin A. Hurley & Katherine H. Taber**

Following an overview and introduction by Dr. Hurley, three programs from across the VHA healthcare system that are assessing and treating patients with mild TBI and cognitive deficits were presented:

**CogSMART** - Cognitive Symptom Management & Rehabilitation Therapy

**Brain Boosters**

**FACT** - Functional Adaptation & Cognitive reTraining

The team discussed successes, challenges, lessons learned, and opportunities for improvement.

*Use of the Electronic Structured Clinical Interview for Psychiatric Diagnosis: Implementation in VA Research and Clinical Settings, Kimberly Green*

*Gender Specific Mental Health Finding Among OEF/OIF Veterans Seeking VA Care, Harold Kudler*

## Poster Sessions

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### Approved Research Sites & Contacts:

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## Presentations from our MIRECC

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### *PTSD and Suicidality in an OEF/OIF Sample*, Vito Guerra, Patrick Calhoun & Registry Workgroup

The relation between PTSD and suicidality (suicide ideation, intent, and planning) was examined in a sample of OEF/OIF veterans. Of particular interest was whether PTSD was a separate risk factor. We found that prior suicide attempt(s), PTSD, and depression were each uniquely predictive of heightened suicidality. The influence of PTSD was found even in the absence of depression or alcohol use disorder. The 'emotional numbing' cluster of PTSD symptoms (e.g., restricted range of affect) and the 'cognitive-affective' cluster of depression symptoms (e.g., feelings of worthlessness or excessive guilt) were uniquely associated with suicidality. These results suggest that PTSD heightens risk for suicidality. Moreover, attention to specific symptom clusters might benefit future efforts to identify those most likely to be struggling with urges toward suicide.

### *Candidate Biomarkers for Suicidality in OEF/OIF Era Veterans: Relevance to Suicide Risk Reduction and Prevention*, Nagy Youssef, Chris Marx, Victoria Payne, Jason Kilts, & Jennifer Strauss

The detection and prevention of suicidality in Operation Enduring Freedom and Operation Iraqi Freedom (OEF/OIF) era veterans represents an urgent clinical need. The identification of biomarkers of suicide risk could enhance understanding of this critical area and facilitate early intervention strategies. Prior evidence suggests that amino acids may be relevant to the neurobiology of suicidality and depression. In this pilot study we analyzed serum samples from OEF/OIF-era veterans for candidate amino acid biomarkers. We compared levels in veterans reporting suicidal ideation with those with no suicidal ideation. Initial results suggest difference in the levels of specific amino acids between these groups. Findings will require replication in a larger cohort. These differences may prove useful for the identification of suicidality risk and inform early intervention and prevention strategies.

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**HSR&D Resources for Providers**

Health Services Research & Development Service

## Evidence-based Synthesis Program

<http://www.hsr.d.research.va.gov/publications/esp/>

### Assessment and Treatment of Individuals with History of TBI and PTSD (August 2009)

**Dr. Robin Hurley** (Associate Director, Education) served on the Technical Advisory Panel that helped guide and refine this systematic review of the literature.

## Publications

Calhoun PS, Boggs CD, Crawford EF, Beckham JC. Diagnostic Efficiency of the Personality Assessment Inventory LOGIT Function for Posttraumatic Stress Disorder in Women. *Journal of Personality Assessment*, 2009;91(5):409-15.

Campbell TA, Nelson LA, Lumpkin R, Yoash-Gantz RE, Pickett TC, McCormick CL. Neuropsychological Measures of Processing Speed and Executive Functioning in Combat Veterans with PTSD, TBI, and Comorbid TBI/PTSD. *Psychiatric Annals*, 2009;39(8):796-803.

Eggleston AM, Calhoun PS, Svikis DS, Tuten M, Chilsom MS, Jones HE. Suicidality, Aggression and Other Treatment Considerations Among Pregnant, Substance Dependent Women with Posttraumatic Stress Disorder. *Comprehensive Psychiatry*, 2009;50(5):415-23.

Morey RA, Dolcos F, Petty CM, Cooper DA, LaBar KS, McCarthy G. The role of trauma-related distractors on neural systems for working memory and emotional processing in posttraumatic stress disorder. *Journal of Psychiatric Research*, 2009;43(8):809-17.

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## Resources for Providers



**CME**

### Educational Objectives

1. Evaluate measures of processing speed and executive functioning in OEF/OIF combat veterans with posttraumatic stress disorder (PTSD), traumatic brain injury (TBI), and comorbid TBI/PTSD.
2. Assess the role that comorbid TBI/PTSD may play in the speed of verbal processing.
3. Justify potential reasons slowed speed of verbal processing may impact therapies for PTSD.

### Neuropsychological Measures of Processing Speed and Executive Functioning in Combat Veterans with PTSD, TBI, and Comorbid TBI/PTSD

Thomas A. Campbell, PhD; Lonnie A. Nelson, PhD; Robin Lumpkin, BA; Ruth E. Yoash-Gantz, PsyD; Treven C. Pickett, PsyD; and Cortney L. McCormick, MA



Citizen Soldier Support Program

## Community Outreach "Operation Compassion"



The goal of "Operation Compassion" is to connect pastors and congregations with families of deployed service members, Veterans and returning service members. VISN 6 MIRECC clinical staff have served as consultants and faculty for this effort, funded by a grant from the Duke Endowment and Citizen Soldiers Support Program (CSSP). A two-tiered training approach aimed at behavioral health care providers and clergy as well as lay leaders and congregants in eastern North Carolina. "Working Miracles in People's Lives" is a one-day training session developed and presented by Dr. Harold Kudler and Rev. John Oliver. In collaboration with Rev. Dennis Goodwin, an Army Chaplain who serves as superintendent of the New Bern, NC district of United Methodist church, 4 sessions have been held in rural NC and 179 clergy and health care providers have completed the training. Mentoring is available through the project director (Rev. Billy Spencer) for lay leaders and congregants who want to launch support team ministries for military families in their respective churches.

### New MIRECC Fellowship sites Hunter Holmes McGuire (Richmond) VAMC

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This site offers many unique training opportunities in research. Two MIRECC research projects are active. Recruitment for these studies of post-deployment mental health and neurocognition is robust. Research volunteers are drawn from both the general Veteran population and active VAMC patients. Richmond MIRECC staff collaborates with practitioners in each of these areas by taking patient referrals and by assisting with psychological assessment through the research protocol. In addition, Mental Health and Physical Medicine and Rehabilitation staff have developed multi-site research programs in neurobehavioral recovery and interventions. One area of emphasis is sleep disorders and the effects of PTSD interventions that target sleep issues. Finally, the affiliated Virginia Commonwealth University Department of Psychiatry is home to nationally known research leaders. Areas of expertise include behavioral genetics, twin studies, mood disorders, and schizophrenia. There is an extensive array of ongoing research and databases available.

All training activities are structured according to a developmental model. Fellows are expected to become involved as an investigator for an ongoing study, or to develop a new protocol to implement at RVAMC. Participation as an author on manuscripts is possible within the first year. Submitting a manuscript as first author will be expected by the second year. Upon completion of this program we expect fellows to possess the skills to develop, conduct, and synthesize mental health research and function as part of an interdisciplinary research team. The first psychology fellow, NiVonne Thompson, will start in October 2009 upon successful completion of her dissertation. She comes to Richmond with a strong history of research and practice in neuropsychology, mental health, and social services, including experience at VA Medical Centers in Palo Alto and San Francisco.

### Publications

(continued from page 2)

Morey RA, Petty CM, Xu Y, Panny Hayes J, Wagner HR, Lewis DV, LaBar KS, Styner M, McCarthy G. A Comparison of Automated Segmentation and Manual Tracing for Quantifying of Hippocampal and Amygdala Volumes. *NeuroImage*, 2009;45(3):855-66.

Taber KH, Hurley RA. Endocannabinoids: Stress, Anxiety and Fear. *Journal of Neuropsychiatry and Clinical Neuroscience*, 2009; 21(2): iv, 109-13.

### In The News!



**WAR NEWS RADIO**  
from Swarthmore College

<http://www.warnewsradio.org>

## Piecing it Together

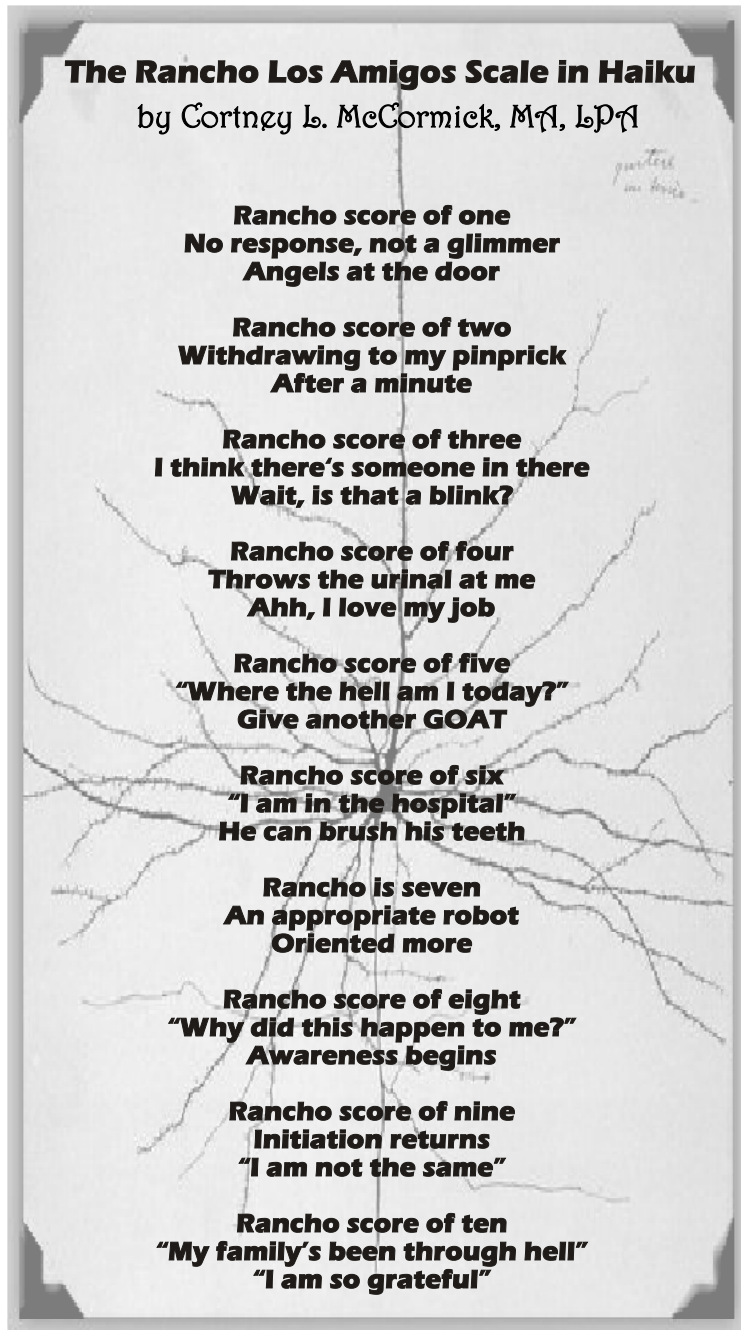
August 7, 2009

This week on *War News Radio*, we learn about scientific efforts to understand and help soldiers suffering from traumatic brain injuries. *Emily Hager reports.*

<http://www.warnewsradio.org/2009/08/07/piecing-it-together/>

**Dr. Robin Hurley** (Associate Director, Education) and **Dr. Katherine Taber** (Assistant Director, Education) were among the scientists and clinicians interviewed for this report.

One of our MIRECC researchers recently participated in the Neuropsychology Listserv 2009 Annual Haiku and Poetry Contest. She was selected as a "junior colleague" winner! Here is her winning haiku.



The Rancho Los Amigos scale is based on observations of the patient's response to external stimuli. It provides a descriptive guideline of the various stages a brain injury patient will experience as he/she progresses through recovery.

### Noon V-tel Lecture Schedule:

#### September 11

Elizabeth Twamley, PhD (VISN 22 CESAMH & San Diego VAMC)

*"Cognitive Rehabilitation for Mild to Moderate TBI"*

This series is presented by V-tel and audio conferences. We are having increasing participation from sites outside VISN 6, so our assigned numbers may change. The number that each VISN 6 site will use to dial in will be included in an email notification prior to each presentation.

If you wish to attend from a site outside of VISN 6, please contact Mary Peoples (mary.peoples1@va.gov; 704-638-9000 ext 2956) so she can make the necessary arrangements.

### Presentations from our MIRECC

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*Prevalence and Correlates of Trading Sex for Payment Among Male Veterans With Severe Mental Illness*, Jennifer L. Strauss, Julie C. Weitlauf, Karen M. Stechuchak, Patrick S. Calhoun, Kristy Straits-Troster, Christine E. Marx, Maren K. Olsen, Marian I. Butterfield & Eugene Z. Oddone

A recent study of men receiving outpatient substance abuse treatment suggests greater involvement in prostitution than commonly thought. Relevant correlates included history of childhood sexual abuse and a greater propensity for severe mental health problems. We evaluated the prevalence in male veterans using VHA inpatient psychiatric services. Approximately one quarter reported a lifetime history of trading sex for payment. Rates did not differ significantly by education, current employment, or marital status. Trading sex for payment was strongly associated with exposure to sexual violence, in both childhood and adulthood, and to substance abuse. It was also linked to problem behaviors and negative outcomes. Additional research to further clarify the prevalence, correlates, and consequences of trading sex in male psychiatric populations is warranted.

*Cognitive Rehabilitation of Mild Traumatic Brain Injury: Design and Outcomes of a Group-Based Model for Intervention*, Brandon Bryan, David Butler, Katherine Taber & Robin Hurley

*Reaching OEF/OIF Veterans in Rural and Community Settings*, Kristy Straits-Troster, Harold Kudler & Jaimie Marinkovich

*Alcohol and other substance use among OEF-OIF combat veterans with and without posttraumatic stress disorder*, A. Meade Eggleston, Vito S. Guerra & Patrick S. Calhoun