



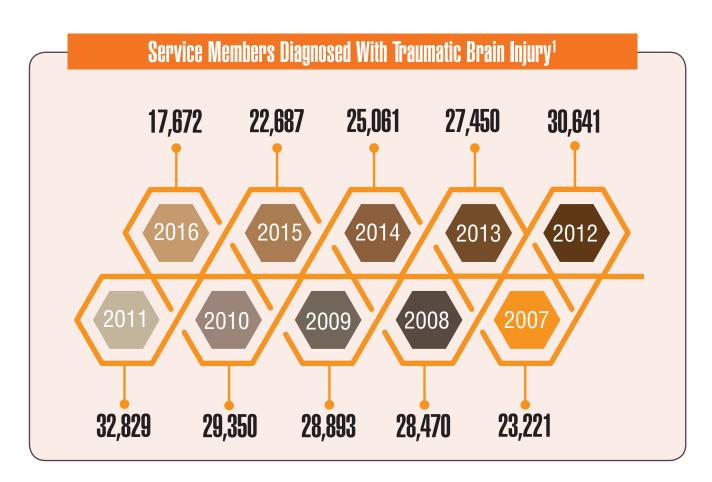
Traumatic Brain Injury

Traumatic brain injury (TBI) is now recognized as a significant health issue that impacts both activeduty service members and veterans. Blast injuries sustained in operations in Iraq and Afghanistan have led to a rising incidence of TBI in the DoD and VA patient populations.

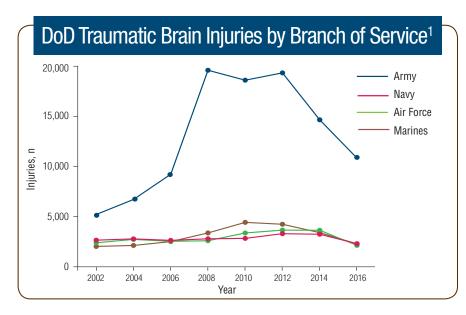
A TBI can result from a significant injury or even during day-to-day activities. Mild TBIs, also known as a concussion, typically result in short-term impacts. However, increasing evidence suggests that multiple mild TBIs can have a cumulative effect and longer term impact on patients. Moderate, severe, and penetrating TBIs can have a more serious impact on the patient.

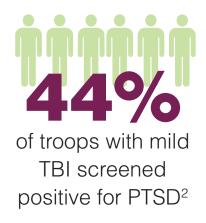
Active-duty and reserve service members are at increased risk for TBI compared with civilians. Not only do combat operations increase the chance of blast-related injuries, but active-duty service members are often drawn from at-risk populations: men between the ages of 18 to 24 years are at greatest risk for TBI. Studies have suggested that between 10% and 20% of post-9/11 veterans experienced a mild-to-moderate TBI.

Posttraumatic stress disorder (PTSD) and TBI are closely linked. Nearly half of the active-duty service members with mild TBI also screen positive for PTSD. For clinicians, diagnosis remains a challenge because of an overlap in symptoms.

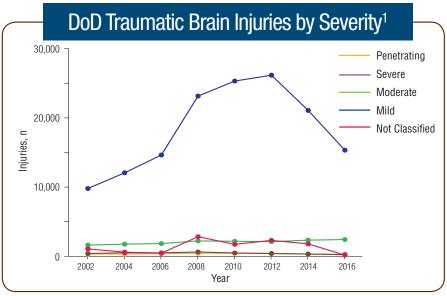








Most service members who sustain a mild TBI return to full duty within 10 days1



Classification of TBI ³	Mild	Moderate	Severe	
Loss of consciousness	< 30 min	30 min–24 h	> 24 h	
Posttraumatic amnesia	< 1 d	1-7 d	> 7 d	
Glasgow Coma Scale score	13-15 points	8-12 points	3-8 points	

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