



★ \$100M PTSD and TBI Study

In a press release from September 19, 2012, the VA and DoD announced they are investing more than \$100 million in research to improve diagnosis and treatment of mild traumatic brain injury (mTBI) and posttraumatic stress disorder (PTSD).

“At VA, ensuring that our veterans receive quality care is our highest priority,” said Secretary of Veterans Affairs Eric K. Shinseki. “Investing in innovative research that will lead to treatments for PTSD and TBI is critical to providing the care our veterans have earned and deserve.”

In partnership, the VA and the Congressionally Directed Medical Research Programs (CDMRP) (on behalf of the DoD) will manage the Consortium to Alleviate PTSD (CAP) and the Chronic Effects of Neurotrauma Consortium (CENC).

With more than 15% of service members and veterans with impaired functioning resulting from PTSD, one goal of the CENC is to establish an understanding of the aftereffects of an mTBI. CAP, using biomarker-based research, will study potential indicators of the trauma in addition to prevention strategies, possible interventions, and improved treatments. The study will also look at potential comorbidities.

“PTSD and mTBI are 2 of the most prevalent injuries suffered by our warfighters in Iraq and Afghanistan, and identifying better treatments for those impacted is critical,” said Assistant Secretary of Defense for Health Affairs, Dr. Jonathan Woodson. “These consortia will bring together leading scientists and researchers devoted to the health and welfare of our nation’s service members and veterans.”

An executive order, signed by the President on August 31, 2012, was designed to improve access to mental health services for our veterans, service members, and military families. In that order, the President directed the DoD, the VA, HHS, and the Department of Education to develop a National Research Action Plan that will include strategies to improve early diagnosis and treatment effectiveness for TBI and PTSD.

For more information, log on to <http://www.grants.gov> and <http://cdmrp.army.mil>.

★ VA, EIC Introduce Tool for Veteran Mental Health

In a September 25, 2012, press release, the VA and Entertainment Industries Council (EIC) announced their launch of a new tool with the release of *Picture This: Veteran Mental Health Challenges and Solutions*, a guide to assist members of the creative arts community in accurately portraying mental health issues veterans may face.

“I encourage those in the entertainment industry who seek to tell stories about veterans to focus on the topic of veteran mental health in ways that transcend stereotypes and present a more honest, compelling, and powerful product,” said Secretary of Veterans Affairs Eric K. Shinseki. “The true stories of the veterans I know and have served with are more engaging than a simple caricature of a veteran with a mental health problem.”

This VA-sponsored guide was developed in a joint collaboration with EIC and VA with input from mental health experts, veterans, advocates, policymakers, the entertainment industry, and many others who are

committed to honoring the service of veterans and helping them overcome challenges. This guide was designed to help writers, actors, producers, and others create authentic depictions of veterans facing and overcoming mental health challenges.

“EIC has been fortunate to work with the Department of Veterans Affairs to support some of the most valiant and important citizens in our country. This effort serves to help returning service members take greater control of the challenges they face,” said Brian Dyak, EIC president and CEO.

For more information, visit <http://www.eiconline.org/eic-resources/publications/national/picture-this/VA-MH>.

★ Study Links Combat Stress to Brain Changes

In an online news release of September 4, 2012, Medline Plus detailed the results of a study on combat stress and its effects on brain wiring. A study of 33 healthy soldiers who just returned from deployment in Afghanistan showed that problems with concentration during complex thinking tasks were common early on but eventually improved. However, subtle changes involving brain circuitry seemed to last longer.

“Almost a quarter of soldiers coming back from Iraq and Afghanistan experience some difficulty in social and operational functioning,” said lead researcher Guido van Wingen, from the Brain Imaging Center at the University of Amsterdam, Amsterdam, The Netherlands. “What we wanted to know is how that could be related to brain function.”

The study, published online on September 3, from the journal *Pro-*

ceedings of the National Academy of Sciences, includes an observation of members of the NATO International Security Assistance Force peacekeeping operation before and 6 months after a 4-month deployment in Afghanistan. These soldiers were compared with 26 soldiers who were never deployed.

According to van Wingen, using neuropsychological tests and functional MRI, researchers were able to identify changes in brain function, specifically in the midbrain. The prolonged stress of armed combat, enemy fire, and explosions at first interfered with concentrating on complicated tasks, but the ability to sustain attention returned after 18 months.

“The brain rapidly adapted to the situation in Afghanistan, but changes back when it returns to a safe environment,” van Wingen said. “This shows how plastic the brain is and that’s reassuring to know.”

The researchers added that changes to the connections between the midbrain and the prefrontal cortex persisted at the 18-month follow-up, suggesting that combat stress might have long-lasting effects on brain wiring. According to van Wingen, the long-term effect of these changes isn’t known.

Simon Rego, director of psychology training at Montefiore Medical Center/Albert Einstein College of Medicine in New York, New York, stated, “This study is important because while it is clear that prolonged stress increases the risk of psychiatric symptoms, like PTSD symptoms, and negatively impacts mental functioning—problems with sustained attention and memory—it has been unclear whether these deficits are a cause or consequence of one another, or are caused by the stress itself, a pre-existing neural abnormality, or some combination of these factors.”

★ HHS, VA Show Secure Sharing of Sensitive Health Information

In a press release from September 17, 2012, the HHS and the VA announced a demonstration of the standards to allow sensitive information to be shared responsibly and to comply with confidentiality laws and regulations among providers using electronic health records (EHRs). The HHS and the VA also showed how sensitive information can be marked so that when it is sent to another provider with the patient’s permission, the receiving provider will know that they need to obtain the patient’s authorization before further disclosing the information with others.

“This project helps demonstrate that with proper standards in place, existing privacy laws and policies can be implemented appropriately in an electronic environment,” said Office of the National Coordinator for Health Information Technology (ONC) Chief Privacy Officer Joy Pritts.

This demonstration was part of the Data Segmentation for Privacy Initiative created in response to the work of the President’s Council of Advisors on Science and Technology and supported by HHS’ ONC.

“Data Segmentation for Privacy provides citizens choice about sharing their most sensitive health information, enhances patient trust, and improves VA’s ability to support our veteran community in compliance with federal law,” said John “Mike” Davis, VA project lead and VHA security architect.

For more information, log on to the Data Segmentation for Privacy Initiative website at <http://wiki.siframe-work.org/SAMHSA-VA-Pilot>.

★ VA Announces New Diabetes Prevention Tool

An October 5, 2012, VA press release announced the implementation

of a pilot version of the Diabetes Prevention Program (DPP), designed to reduce the number of veterans who develop diabetes. The program is being nationally promoted by the CDC.

“The Diabetes Prevention Program will provide veterans with another tool to help them lead healthier, fuller lives, reducing their risk for diabetes,” said Secretary of Veterans Affairs Eric K. Shinseki.

The major multicenter clinical research study aimed to discover whether modest weight loss through dietary change and increased physical activity or treatment with the oral diabetes drug metformin could prevent or delay the onset of type 2 diabetes. The study’s prediabetes participants were overweight with blood glucose (blood sugar) levels higher than normal, but not high enough for a diagnosis of diabetes. Results showed modest weight loss through dietary changes and increased physical activity sharply reduced the chance of developing diabetes.

“Approximately 24% of veterans have type 2 diabetes,” said Dr. Linda Kinsinger, VA’s chief consultant for preventive medicine. “We’ve monitored the DPP’s results and we feel that it would be another tool to make a difference for veterans.”

Through this strictly voluntary program, some veterans who are at risk for, but not diagnosed with, diabetes will attend a series of group sessions and will be given predetermined weight loss and physical activity goals. Many veterans benefit by establishing their own health goals, but research has shown that others show positive improvement working toward DPP-determined goals.

For more information about VA’s Prevention Program, log on to <http://www.prevention.va.gov/index.asp>. ●