

# Congressional Brain Injury Task Force

## NEWSLETTER

110th Congress  
July 9, 2008

In an effort to educate and promote the awareness of brain injury, one of the driving missions of the Task Force, we would like to introduce the first edition of the quarterly **Congressional Brain Injury Task Force Newsletter**. Below you will find recent legislative activity, studies and reports, media coverage, and upcoming events related to traumatic brain injury (TBI). We believe that knowledge and information can inspire the change needed to improve the lives of individuals suffering from TBI.

Approximately 1.4 million Americans experience traumatic brain injury (TBI) each year, and an estimated 5.3 million Americans are living with long-term, severe disabilities as a result of brain injury. TBI is the leading cause of death and disability among young Americans in the United States and has been named the signature wound of the War in Iraq and Afghanistan.

We hope that you and your staff find this newsletter informative. Please contact Mandy Spears ([mandy.spears@mail.house.gov](mailto:mandy.spears@mail.house.gov); 5-5751) in Rep. Pascrell's office or Becky Wolfkiel ([rebecca.wolfkiel@mail.house.gov](mailto:rebecca.wolfkiel@mail.house.gov); 5-5836) in Rep. Platts' office if you have questions about any of the information included in the newsletter, would like more information about the Task Force, or would like to join.

Sincerely,

Bill Pascrell, Jr.  
Co-Chair

Todd Russell Platts  
Co-Chair

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[Recent Legislative Activity](#)

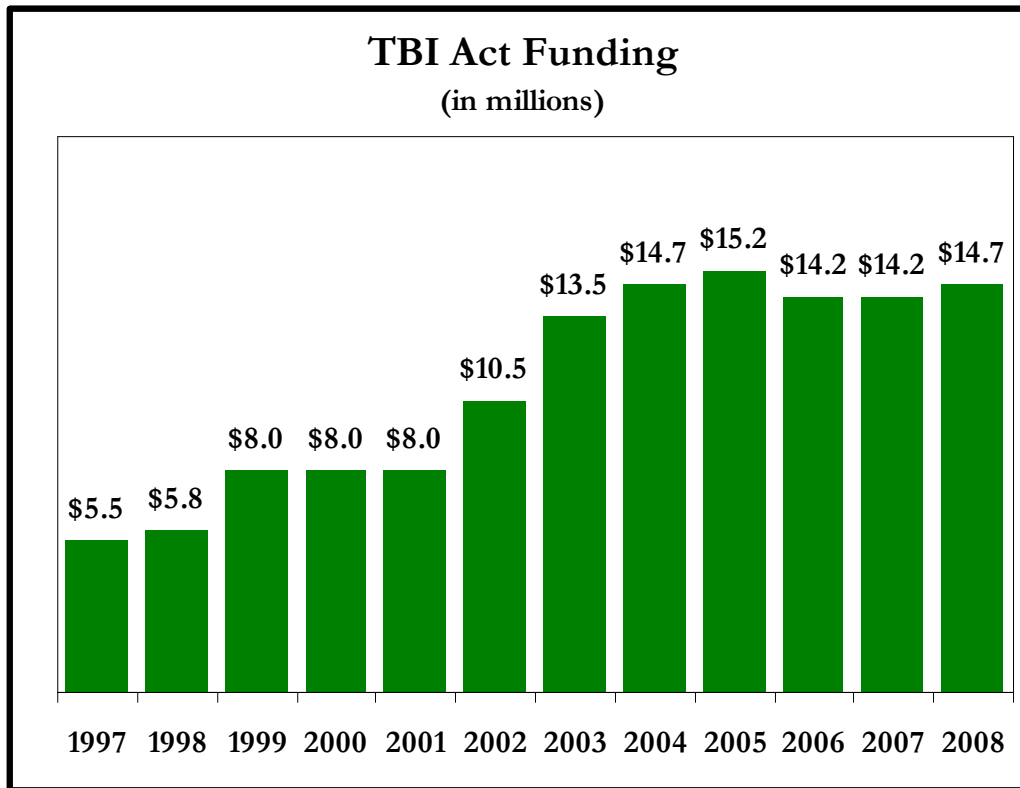
[Recent Studies and Reports](#)

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## RECENT LEGISLATIVE ACTIVITY



### The Traumatic Brain Injury Act ([H.R. 1418](#))

On April 28, 2008, the President signed into law the Traumatic Brain Injury Act, which reauthorized TBI programs within the Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), and the National Institutes of Health (NIH), all within the Department of Health and Human Services (HHS), through 2011.

### FY 2008 Supplemental Appropriations

The FY 2008 Supplemental Appropriations Act, which has been signed into law, provides a total of \$375 million to the Department of Defense (DOD) to stimulate research, educate health care providers, and increase treatment for traumatic brain injury.

### FY 2009 Appropriations

On March 19, 2008, members of the Congressional Brain Injury Task Force called on the Appropriations Subcommittee on Defense to provide \$28 million to support the work of the Defense and Veterans Brain Injury Center within the Defense Center of Excellence in Psychological Health and Traumatic Brain Injury.

On March 19, 2008, members of the Congressional Brain Injury Task Force called on the Appropriations Subcommittee on Labor, Health and Human Services, and Education to provide \$30 million for programs authorized under the Traumatic Brain Injury Act, including \$9 million for CDC TBI Registries, Surveillance, and Education; \$15 million for HRSA TBI State Grants; and \$6 million for HRSA TBI Protection and Advocacy Grants. *Status:* The Senate Appropriations Committee mark-up level funds these programs at \$14.7 million. While the full House Appropriations Committee has not yet approved the Labor-HHS-Education bill, the Subcommittee's mark-up includes a \$3 million increase over FY 2008, including \$11 for the HRSA TBI Grants and \$6.6 million for CDC TBI programs.

## TBI Awareness (H.Con.Res. 91)

This resolution expresses the need for enhanced public awareness of TBI and support for the designation of a National Brain Injury Awareness Month. It currently has 59 co-sponsors

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## RECENT STUDIES AND REPORTS

**In 2005, there were nearly 8,000 fall-related TBI deaths and over 56,000 hospitalizations for nonfatal fall-related TBI among adults 65 and older in the United States.** –CDC, “Fall-Related TBI Deaths”

New England Journal of Medicine: [Mild Traumatic Brain Injury in U.S. Soldiers Returning from Iraq](#); January 31, 2008

*Findings:* Of the 2,500 Iraq soldiers surveyed, nearly 15 percent reported injuries associated with mild TBI. Compared to soldiers with other injuries, these individuals reported significantly higher rates of physical and mental health problems. These cases of mild TBI were also significantly associated with symptoms of post-traumatic stress disorder.

Government Accountability Office: [VA Health Care: Mild Traumatic Brain Injury Screening and Evaluation Implemented for OEF/OIF Veterans, but Challenges Remain](#); February 2008

*Findings:* In April 2007, VA facilities implemented a national protocol for the evaluation and treatment of Operation Enduring Freedom (OEF) / Operation Iraqi Freedom (OIF) veterans who may have a mild TBI, including adoption of a computer-based screening tool. Some facilities had difficulty in following the protocols, and the largest challenge faced by the screening program is the lack of evidence to the validity and reliability of the screening tool.

RAND: [Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery](#); April 2008

*Findings:* An estimated 320,000 individuals deployed for OEF/OIF experienced a TBI, 57 percent of which were not evaluated by a physician for brain injury. The annual cost of care for the 2,700 individuals who were diagnosed with TBI is estimated at \$591 million to \$910 million. The major gaps in TBI-related care for OEF/OIF-deployed individuals include a failure to identify cases of TBI and a lack of care coordination. RAND recommends the use of evidence-based care practices, an increase in the number of specially-trained providers, and research investments to close information gaps.

Veteran's Health Administration: [Understanding the Effects of Blasts on the Brain](#); April 2008

*Findings:* The VA and the Office of Naval Research are funding research to understand the biological effects of blasts on the brain. Findings from the research will be used to design therapies that can be administered in the combat zone to troops as a preventive measure or after a blast has occurred to stem damage to the brain. The research also contains a genetic component that aims to identify genes that may get activated in brain injury. Figuring out a way to turn off those genes with a drug could be a breakthrough for the treatment of brain injury on the battlefield and in field hospitals.

Government Accountability Office: [DOD Health Care: Mental Health and Traumatic Brain Injury Screening Efforts Implemented, but Consistent Pre-Deployment Medical Record Review Policies Needed](#);

*Findings:* Pursuant to the FY 2007 John Warner National Defense Authorization Act, DOD added TBI screening questions to the pre-deployment health assessment in January 2008. Beginning in July 2008,

DOD plans to require screening of all service members for mild TBI prior to deployment in order to provide a baseline against which individuals can be assessed post-deployment.

Veteran's Administration Inspector General: [VA's Role in Ensuring Services for OEF/OIF Veterans after Traumatic Brain Injury Rehabilitation](#); May 1, 2008

*Findings:* Of VA patients who initially received inpatient rehabilitation for TBI in 2005, many continue to have significant disabilities. For these patients, significant needs remain unmet, including primarily long-term case management.

Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury: [May/June 2008 Newsletter](#)

The Centers for Disease Control and Prevention: [Fall-related traumatic brain injury deaths and hospitalizations among older adults — United States, 2005](#); June 23, 2008

*Findings:* In 2005, nearly 56,000 seniors 65 and over were hospitalized as the result of traumatic brain injuries. Of these, 8,000 died. In fact, TBIs accounted for 50 percent of unintentional fall deaths and 8 percent of nonfatal fall-related hospitalizations among older adults.

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## **RECENT MEDIA COVERAGE**

**Post-traumatic stress disorder, traumatic brain injuries, major depression and suicide are exacting a fearful price from combat soldiers and marines. These matters are not even being talked about enough, much less dealt with adequately.** □ –Robert Herbert, "Wounds You Can't See"

[House Expands Aid for Brain Injuries](#), USA Today, April 8, 2008

[Pentagon Seeks Battlefield Device to Diagnose Brain Injury](#), *The Wall Street Journal*, April 17, 2008

[Audit: Brain Injured Vets Not Getting Proper Care](#), USA Today, May 1, 2008

[Report: Improve Care of Vets with Brain Injury](#), USA Today, May 2, 2008

['Samantha Who?' Forgets to Check the Facts on Brain Injuries](#), *The Los Angeles Times*, May 5, 2008

[Op-Ed: War Wounds We Don't See](#), *The Los Angeles Times*, May 13, 2008

[Better Brain-Injury Tests Planned for Troops](#), USA Today, May 22, 2008

[The Sergeant Lost Within](#), *The New York Times*, May 25, 2008

[Op-Ed: Wounds You Can't See](#), *The New York Times*, June 24, 2008

[High-Tech Testing for War Vets with Post-Traumatic Stress Disorder](#), *The Chicago Tribune*, June 26, 2006

[Op-Ed: Baseline Maneuvers](#), *The New York Times*, July 6, 2008

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## **UPCOMING EVENTS**

Briefing with [Dr. Ali Rezai](#) of the Cleveland Clinic on Advances in Deep Brain Stimulation to Treat TBI

July 16, 2008

8:30am-10:00am

2105 Rayburn

Session with Michael Paul Mason, Author of ["Head Cases: Stories of Brain Injury and Its Aftermath"](#)

September – TBD

NY Times Book Reviews: [Empathy for the Brain, After Insult and Injury](#); [Damage Control](#)

International Conference on Behavioral Health and Traumatic Brain Injury

[Experts on Brain Injuries to Gather](#), *The Herald News*, June 10, 2004



International Conference on Behavioral Health  
and Traumatic Brain Injury

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St. Joseph's Regional Medical Center, Paterson, NJ  
October 12-15, 2008