



VISN 6 Mid-Atlantic MIRECC Post Deployment Mental Health



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VISN 6 Leadership

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Focus on the VISN National Service

Dr. John Fairbank (MIRECC Director) is serving a 90-day assignment as the Scientific Advisor to the Specialized Mental Health Centers of Excellence (MHCOE) Liason in VA Central Office.

Several MIRECC faculty are participating in the DoD/VA Joint Incentives Funding project to create a Practice-Based Implementation (PBI) Network, an organizational infrastructure for testing practice change. Along with DoD partners, the VISN 6 MIRECC joins with the National Center for PTSD (NC-PTSD) Disseminations and Training Division in building and maintaining the PBI Network. **Dr. Patrick Calhoun** serves as one of three VA points of contact, along with Dr. JoAnn Kirchner (Mental Health QUERI) and Dr. Josef Ruzek (NC-PTSD). **Drs. Keith Shaw** and **Jennifer Runnals** are participating as VA External Facilitators. The PBI Network brings together managers, leaders, and field clinicians to collaborate on the adoption of innovative practices that may later be implemented in the larger health care system. In their roles as External Facilitators, Drs. Shaw and Runnals consult with field sites to train and support clinicians during the first six months of testing a change practice. The first project for the PBI Network is to increase Outcomes Monitoring for PTSD.

Dr. Treven Pickett (MIRECC Faculty, Richmond Site) recently completed a 7 month detail as the Acting VA Senior Consultant/Liaison for Traumatic Brain Injury for the for the Department of Rehabilitation and Prosthetic Services in VA Central Office (VACO). His role involved maintaining and enhancing a close working relationship with the Defense Centers of Excellence (DCoE) for Psychological Health and

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Clinical Core Update

Dr. Harold Kudler (MIRECC Associate Director, Clinical) was honored with induction into the *Order of the Long Leaf Pine* at January 23, 2014 meeting of the North Carolina Focus on Service Members, Veterans and their Families. Membership is reserved for outstanding North Carolinians who have a proven record of service to the State. Dr. Kudler - pictured here receiving his certificate of membership from Ilario Pantano, Director, North Carolina Division of Veterans Affairs - was recognized for his service to the Military Members and Veterans of North Carolina and their families through his leadership of the North Carolina Focus since 2006. Among the group's accomplishments over those years:



- ★ Partnered with the North Carolina Area Health Education Centers in developing trainings on deployment-related mental health issues which have reached over 20,000 community providers nationwide;
- ★ Creation of a Provider Directory searchable by county which lists over 1,250 clinicians across NC;
- ★ Partnered with the NC Institute of Medicine on a comprehensive report whose recommendations have been enacted as state law.

Approved Research Sites & Contacts:

Durham VA

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Focus on the VISN

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Traumatic Brain Injury, and within DCoE the Defense and Veterans Brain Injury Center (DVBIC). After his detail, Dr. Pickett transitioned into the role of Associate Chief and Supervisory Clinical Psychologist, Mental Health Service (Research) at Richmond VAMC.

Dr. Pickett reflects on his recent detail

This VACO opportunity arose because Alison Cernich, PhD, ABPP vacated the Acting TBI Liaison role to assume the Interim Deputy Director role within DCoE, which is administratively managed by VA Office of Mental Health Services (OMHS). The detail opportunity was completed in the context of support from Cheryl Jones, MD, Chief, Mental Health Service at Richmond VAMC, in conjunction with front office leadership including the Chief of Staff and Hospital Director. Immediate family support was also essential. As a detail opportunity, this position was consistent with my professional background in TBI/Polytrauma, as well as leadership training through the Executive Career Field (ECF) program (2008-2010) targeting a VISN or VACO role. Further, I would not have accepted the detail were it not for an awareness of other

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CBOC Mental Health Rounds

Each CBOC MH Rounds presentation is now offered twice a month.

Wednesday May 14 from 9-10 am ET

Thursday May 15 from 12-1 pm ET

Early Stage Dementia and Cognitive Loss Group

You must register in TMS for these sessions in advance to receive credit.

June 11 & 12 *The Challenge of Treating LGBT Veterans in Rural Settings*

July 9 & 10 *Chronic Pain*

August 13 & 14 *Veterans' Justice Program*

Sept 10 & 11 *Evaluation of Cognitive Complaints in a Clinical Setting*

Contact Ashley McDaniel with any questions:
ashley.mcdaniel@va.gov or 501-257-1223

Meeting Presentations

**Division of Rehabilitation Psychology - Division 22
American Psychological Association
16th Annual Conference
February 27 - March 2, 2014, San Antonio TX**

Chopin S, Mutchler B, Ellwood M, Trapp SK, McDonald S. *The effects of appraisals of disability on psychological functioning in patients with spinal cord injury.*

Trapp SK, Ellwood M, Mutchler B, Chopin S, McDonald S. *Resilience, functional independence, and physical health of veterans at annual SCI evaluations.*

Invited Lectures

Drs. Jason A. Nieuwsma (MIRECC researcher) and G. L. Jackson presented "*Integrating mental health and chaplaincy: From evaluation to implementation in VA and military contexts*" at the Durham VAMC Health Services Research and Development Monthly Seminar in February 2014, Durham, NC.



Neurosteroid Congress 2014

Dr. Christine Marx (MIRECC Co-Associate Director, Research) led the organization of the Inaugural Neurosteroid Congress, held in Durham on April 3, 2014.

Eighteen researchers from across the country (most pictured below) gave presentations, including three from the MIRECC Interventions and Metabolomics Lab.

Jennifer Naylor, PhD: *Neurosteroid Levels are Inversely Associated with Self-Reported Pain Symptoms in U.S. Military Veterans*

Steven Szabo, MD PhD: *DHEAS in Posttraumatic Stress Disorder and Depression in 662 Male OEF/OIF Veterans*

Chris Marx, MD: *Neurosteroids as Novel Therapeutics and Biomarker Candidates in TBI, Schizophrenia, and PTSD*



In the News!

Taber KH, Hurley RA, Haswell CC, Rowland JA, Hurt SD, Lamar CD, Morey RA. *White Matter Compromise in Veterans Exposed to Primary Blast Forces.* Journal of Head Trauma Rehabilitation 2014 [Epub ahead of print]

This recent publication from our MIRECC garnered a great deal of media attention, including interviews with multiple reporters! Here are links to a few of the stories:

<http://www.usatoday.com/story/nation/2014/03/03/brain-blast-injury-troops-ied-tbi-traumatic/5969077/>

<http://www.foxnews.com/health/2014/03/04/exposure-to-bomb-blasts-may-cause-brain-injury-in-vets-with-no-symptoms/>

<http://medicalxpress.com/news/2014-03-blasts-brain-injury-symptoms.html>

This is also a nice example of how we are developing productive collaborations within our MIRECC based on combining our various areas of expertise. In this case, **Drs. Taber and Hurley** (Education Component, Salisbury site) utilized their differing areas of knowledge about TBI (neurobiology, neuropsychiatry) to design the study, attract funding, and complete the data acquisition. **Dr. Morey** (Neuroimaging Core, Durham site) contributed expertise in neuroimaging analytics to begin to extract knowledge from the data.

Book Chapters

Williams JW Jr, Nieuwsma JA. *Screening for depression.* In Post TW, Fletcher RH, Roy-Byrne PP, Sokol HN (Eds.). UpToDate. Waltham, MA: Wolters Kluwer Health; 2014: <http://www.uptodate.com/contents/screening-for-depression>

Journal Articles

Allen JP, Nieuwsma JA, Meador KG. *The role of military and Veterans Affairs chaplains in the treatment of alcohol problems.* Pastoral Psychology. 2014; 63: 1-11.

Dedert EA, Swinkels C, Dennis PA, Calhoun PS, Dennis MF, Beckham JC. *Ecological momentary assessment of posttraumatic stress disorder symptoms during a smoking quit attempt.* Nicotine and Tobacco Research. 2014; 16(4): 430-436.

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Resources for Building Resiliency

MOVING FORWARD 
OVERCOMING LIFE'S CHALLENGES

www.StartMovingForward.org

The VA and DoD partnered to develop a free and anonymous on-line education and life coaching program that uses interactive exercises and video demonstrations to teach skills for overcoming life challenges such as relationship problems, financial hardship, and re-adjustment issues.



NIH U.S. National Library of Medicine

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Home > History home > Medical Movies on the Web home > The Movies > Combat Fatigue Irritability

The National Library of Medicine recently added the World War II US Navy training film *Combat Fatigue Irritability* (1945) to their movie archive. Gene Kelly, then a rising Hollywood star, both directed and played the leading role of a sailor dealing with what would now be called PTSD. According to the accompanying essay *"To prepare for the role, Kelly had himself admitted to a naval hospital, posing as a sailor suffering from combat fatigue."* Here is a link to the complete training film and associated supporting materials:

<http://www.nlm.nih.gov/hmd/collections/films/medicalmoviesontheweb/combatafatigue.html>

Kelly's daughter, Kerry Kelly Novick, is a practicing psychoanalyst, past President of the International Association for Child Psychoanalysis, and a leading member of the American Psychoanalytic Association's Service Member and Veterans Initiative (which is chaired by VISN 6 MIRECC Associate Director, Dr. Harold Kudler). Dr. Novick was recently interviewed about her father and the making of this film. She also offers valuable insights about concepts of psychological trauma and its treatment embedded in this WWII training which have significance for Service Members, Veterans, family members and their mental health providers today. This link will take you to an edited transcript of a longer conversation with Dr. Novick, in which she discusses *Combat Fatigue Irritability*, Gene Kelly, and the making of this important Navy training film.



<http://circulatingnow.nlm.nih.gov/2014/03/12/on-combat-fatigue-irritability-kerry-kelly-novick-part-1/>

Focus on the VISN Dr. Pickett reflects on his recent detail

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capable leaders at Richmond VAMC who were able to readily assume my vacated responsibilities. I am thankful both for the facility support for me to be able to execute the detail, and simultaneously aware of the efforts and strong demonstrations of leadership by others at Richmond VAMC during my absence.

It was a great 7 months. I learned a ton under the experienced mentorship of Drs. Cernich, Scholten, Chandler, and Cifu, who all have pivotal roles within the Department of Rehabilitation and Prosthetic Services and the Polytrauma System of Care. Additional areas of learning were in how to navigate the Amtrak and Metro Systems in the Washington DC area, all the while tracking parallel communications within VA and DoD Systems. I now have a much keener sense of appreciation for the cultural nuances of the military branches, and that there are competencies needed to effectively bridge and foster communications between VA and DoD to move forward on shared initiatives. During my time there I found myself participating in, and leading, workgroups as a VA subject matter expert in the development of clinical practice guidelines for TBI and associated conditions. There was a need to become rapidly aware of and track clinical, research, education, and programmatic directions in both VA and DoD systems as related to TBI/Polytrauma. My travels took me to Capitol Hill, the National Institutes of Health, and many other agencies who together support VA and DoD TBI initiatives. I left the VACO detail with a much richer appreciation for the unique work, culture and experience of many in the Washington DC area. My impression is that many in the field would be surprised at the intensity of work required by many of these centralized positions, and the personal sacrifices made by these individuals to support new and ongoing initiatives and programs. Another aspect of the work that may occur as somewhat of a surprise is the immediacy of the reporting requirements within VA, DoD, Health Affairs, and other legislative branches of the government.

In returning to Richmond I am re-invested in promoting research and educational initiatives within the mental health clinical enterprise. Together with advances in programmatic development, staff hiring, facility expansion through a new 2nd floor Mental Health Recovery Enhancement Center (construction underway), I have renewed administrative support to more formally integrate research and educational programs into the Mental Health Service infrastructure, and for these to naturally complement the excellent clinical services being offered. I look forward to continuing to expand research and education in the Mental Health Service at the Richmond VAMC, and to continue to strengthen and enhance collaborative endeavors as a participating facility in the VISN 6 MIRECC.

Journal Articles

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Kudler H. *Helping clinicians who care for trauma survivors.* Journal of the American Academy of Physician Assistants. 2014; 27(5):12-3.

McDonald SD, Thompson N, Stratton K, VA Mid-Atlantic MIRECC Workgroup, Calhoun PS. *Diagnostic accuracy of three scoring methods for the Davidson Trauma Scale among U.S. military Veterans.* Journal of Anxiety Disorders. 2014; 28: 160-168.

Mitchell JT, Schick RS, Hallyburton M, Dennis MF, Kollins SH, Beckham JC, McClernon FJ. *Combined ecological momentary assessment and global positioning tracking to assess the spatial distribution of risk behavior: A proof of concept study targeting smoking behavior.* Journal of Dual Diagnosis. 2014; 10: 19-29.

Runnals JJ, Van Voorhees E, Robbins AT, Brancu M, Straits-Troster K, Beckham JC, Calhoun PS. *Self-Reported Pain Complaints among Afghanistan/Iraq Era Men and Women Veterans with Comorbid Posttraumatic Stress Disorder and Major Depressive Disorder.* Pain Medicine. 2013; 14(10): 1529-33.

Zullig LL, Jackson GL, Provenzale D, Griffin JM, Phelan S, Nieuwsma JA, van Ryn M. *Utilization of Hospital-Based Chaplain Services Among Newly Diagnosed Male Veterans Affairs Colorectal Cancer Patients.* Journal of Religion and Health. 2014; 53: 498-510.

★ Free ★ Web Courses for Providers

Treating the Invisible Wounds of War
www.aheconnect.com/citizensoldier

Click on **New Users** to register. You will then see the available web courses listed:

- 1 - ***Post Traumatic Stress Disorder (english & spanish editions)***
- 2 - ***A Primary Care Approach***
- 3 - ***Issues of Women Returning from Combat***
- 4 - ***Recognizing the Signs of mTBI during Routine Eye Examinations***
- 5 - ***Understanding Military Family Issues***

These courses were developed by MIRECC faculty in collaboration with Citizen Soldier Support Program (CSSP) and North Carolina Area Health Education Center (NC AHEC). They are designed to help primary care physicians, case workers, mental health providers - who may see a veteran or family member on an unrelated issue - develop a better understanding of the culture in which veterans and their families live and work, and provide best practices for identifying, assessing and treating mental health problems that result from the trauma of war.

Visit our web site for more resources

<http://www.mirecc.va.gov/visn6.asp>