The Veteran with TBI/PTSD Panel Discussion

Maj. Gen. (Ret) Byron Hepburn, MD, FAAFP
Rebecca Tapia, MD
SFC (Ret) Victor Medina, MRC, CRC

DISCUSSION

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The content of my material/presentation in this CME activity will not include discussion of unapproved or investigational uses of products or devices.

Roxana Delgado, PhD

Health scientist/epidemiologist, Military Health Institute, University of Texas (UT) Health San Antonio.

Delgado is the wife of retired Sg t. 1st Class Victor L. Medina, MRC, CRC, a combat wounde d veteran. Medina is a Purple Heart recipient who was wounded in Iraq on June 29, 2009, sustaining a moderate traumatic brain injury that resulted in long-lasting physical and cognitive disabilities. Delgado assumed the caregiving role for her husband in 2010 and has dedicated her life and profession to helping wounded, ill, and injured veterans and their caregivers. Delgado’s goal is to use epidemiological studies to identify the determinants of health and the risk factors that adversely affect caregivers’ well-being. Active in the military and veteran caregiver community, she is a public health scientist/epidemiologist with the Military Health Institute, where she works closely with academic, national, and international partners to improve the care of wounded, ill, and injured service members, veterans, and their families. Delgado has contributed to The Complementary & Alternative Medicine (CAM) Portfolio, a platform that addresses the short- and long-term health-related outcomes of military caregivers.

Delgado is a 2015 Elizabeth Dole Foundation Fellow.

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Maj. Gen. (Ret) Byron Hepburn, MD, FAAFP

Professor, Department of Family and Community Medicine/Assistant Dean for Military Health/Associate Vice President and Director of the Military Health Institute, University of Texas (UT) Health San Antonio.

Dr. Hepburn is a Distinguished Graduate of the U.S. Air Force Academy and one of only a few Air Force pilot physicians. He has extensive experience in aeromedical evacuation and human factors. As an Air Force physician, he has had worldwide experience as a clinician and leader in humanitarian and military medical operations. Dr. Hepburn currently practices with the UT Health San Antonio Family Medicine Residency Program. In his role as Director of the Military Health Institute, he collaborates frequently with the U.S. Army Institute of Surgical Research, the Audie L. Murphy Memorial VA Hospital and its associated Polytrauma Rehabilitation Center, and the SIP Medical Wing. In addition, Dr. Hepburn is a strong advocate for improving veterans’ well-being through his work with The San Antonio Epilepsy Center and the Military and Veteran Community Collaborative. He believes that a significant challenge facing our nation’s family physicians in the decades to come is how to best care for our wounded, ill, and injured military, veterans, and their families.

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Rebecca Tapia, MD

Physician, Audie L. Murphy Memorial VA Hospital, San Antonio, Texas

Dr. Tapia is board certified in physical medicine and rehabilitation. Since 2012, she has worked in an outpatient traumatic brain injury (TBI) rehabilitation clinic that carries a patient panel of more than 2,000 veterans and is consistently among the top five busiest TBI clinics in the VA health care system. The clinic’s philosophy focuses on challenges to community reintegration that are secondary to TBI and mental health-related deployment conditions, particularly chronic headaches, cognitive dysfunction, and behavioral conditions. The program achieved full accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF) in 2014 and has been recognized repeatedly as a leader in innovative approaches to a complex patient population.
SFC (Ret) Victor Medina, MRC, CRC

Public speaker/advisor, San Antonio, Texas

Retired Army Sgt 1st Class Medina is a Purple Heart recipient and a national traumatic brain injury (TBI) advocate. In June 2009, while serving his third tour in Iraq, he was wounded when an explosive-formed projectile impacted his vehicle. He was medically evacuated and diagnosed with moderate TBI, among other injuries. During his three years of rehabilitation, he noticed gaps and challenges in the identification, diagnosis, and treatment of TBI. Along with his wife, Roxana E. Delgado, PhD, Medina began working with military and legislative leaders to improve health care policies. While receiving medical care, he developed a blog (www.tbiwarrior.com) to describe his healing journey, a project that subsequently was featured by the United States Department of Defense. He also became a blog contributor for the military Health System. In 2014, Medina became a certified rehabilitation counselor, and he has been actively involved with national leaders to improve the identification, diagnosis, and treatment of TBI. He is a public speaker and serves as advisor to organizations advocating for veterans and their families.

Learning Objectives

1. Validate the importance of understanding the military culture/patient perspective.
2. Recognize the unique challenges facing the caregiver.
3. Assess the physician’s role to ensure coordinated, holistic patient care — longitudinally.

Audience Engagement System

Patient and Family Perspective

The Healing Journey of a Combat Wounded Veteran and the Family

Patient and Family Perspective:

SFC (Ret.) Victor L. Medina, MRC, CRC

• 3 Time Combat Veteran
• 2x Operation Iraqi Freedom
• 1x Operation Enduring Freedom
• Wounded In Action (WIA) in 2009 (Purple Heart Recipient)
• Certified Rehabilitation Counselor (CRC)
• Medically Retired Sergeant First Class
• National TBI Advocate-Congressional Record
• Certified Rehabilitation Counselor
• Sustained a moderate TBI

Patient and Family Perspective:

Roxana E. Delgado, PhD

• Health Scientist
• Military Health Institute Post-Doctoral Fellow
– Military Caregiver Research
– Long-term effects of TBI
• Wife & Caregiver of SFC (Ret.) Victor L. Medina
• Elizabeth Dole Foundation Fellow for TX
• Caregiver advocate
A Day in the Combat Zone

- 4 hours sleep
- 3-4 hours mission preparation
- 4-12+ hours on missions or patrols
- 2-4 hours mission debrief and re-set
- 2 hours personal time

A Multidisciplinary Rehabilitation Team

Specialized Centers

Medical Evaluation from Theater

- National Intrepid Center of Excellence (NICoE) at Naval Medical Center, Bethesda, MD
  - Unique approach to comprehensive diagnostics
  - Interdisciplinary team worked synergistically between themselves and with the family to maximize the care.

Who Are Our Military Caregivers?

- 5.5 million Pre and Post 9/11 Military/Veteran caregivers
- 1.1 million post-9/11 military caregivers
- What makes military caregivers a unique population?
  - Younger (more than 40% are between ages 18 and 30)
  - 33.2% are spouses
  - 25.1% are parents
  - 23.4% are a friend or neighbor
  - Approximately one-third of post 9/11 caregivers does not have health care coverage.

A Provider and Family Relationship

- Military caregivers are more likely caring for a younger individual with a mental health, substance use condition or polytrauma.
- Incorporating the family may improve patient outcomes.
- Instrumental in the healing process
- Main support system.
- Military caregiver may be experiencing Ambiguous Loss
  - Type One: Physical absence and psychological presence
  - Type Two: Physical presence and psychological absence
Disability vs. Ability
• Focus to strengthen abilities.
• Setting goals and plans of action that build on abilities.
• Assisting the Veteran in redefining success.
• Service providers should strive to include the Veteran’s Family Members.
  – Strengthen the existing individual’s support network.
  “Healing towards a bright future”
SFC (Ret.) Medina

Ultimate Goal
• Veterans redefinition of personal cause.
• Veterans redefinition of success.
• Veterans independence.
• Veterans pursuit of a career and success.

Warrior Ethos
I will always place the mission first.
I will never accept defeat.
I will never quit.
I will never leave a fallen comrade.
  Core Values:
  Loyalty
  Duty
  Respect
  Selfless Service
  Honor
  Integrity
  Personal Courage

Therapeutic Relationship and Approach
• Direct Approach
  – In the military culture everything starts with a “mission”.
  – Veterans are used to directives and instructions.
• Helpful factors
  – Accountability
  – Commitment
• Patient and Family Centered Care

Questions/Comments

Questions
## Resources

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<td><a href="http://www.ptsd.va.gov">http://www.ptsd.va.gov</a></td>
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<td>Defense Veteran Brain Injury Center (DVBIC)</td>
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