

**NINETY-SIXTH NATIONAL CONVENTION
OF
THE AMERICAN LEGION
Charlotte, North Carolina
August 26, 27, 28, 2014**

Resolution No. 292: Traumatic Brain Injury and Post Traumatic Stress Disorder Programs
Origin: Pennsylvania
Submitted by: Convention Committee on Veterans Affairs & Rehabilitation

WHEREAS, According to the Department of Veterans Affairs (VA) Office of Public Health estimates in January 2014, 2.6 million servicemembers who deployed to support Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND), 1,724,058 have left active duty and are eligible for VA health care, of which 998,004 have received VA health care.; and

WHEREAS, The “signature wounds” of Iraq and Afghanistan are Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD); and

WHEREAS, Mental disorders are the second largest frequency of diagnoses among returning OEF/OIF/OND servicemembers which are currently estimated at 50.7 percent; and

WHEREAS, In 2007, VA established a TBI, PTSD Clinical Reminder in VA’s electronic medical record for any new patient to identify veterans that need additional screening for a possible TBI or PTSD diagnosis; and

WHEREAS, VA has screened and diagnosed hundreds of thousands of veterans with TBI/PTSD and continues to have several challenges in the proper diagnosis and treatment of TBI and PTSD because of the overlap of symptoms; and

WHEREAS, According to VA, the overlapping symptoms between mild TBI and PTSD are headaches, dizziness, fatigue and noise/light intolerance, re-experiencing, avoidance and emotional numbing; and

WHEREAS, Currently, there are not any definitive medical treatments for TBI and providers/clinicians use therapy and medications to treat the symptoms; and

WHEREAS, Evidence-based treatments for PTSD include Cognitive Processing Therapy, Prolonged Exposure Therapy, Eye Movement Desensitization and Reprocessing, as well as medication management; and

WHEREAS, VA’s Veteran Health Administration has several different research offices involved in studying TBI/PTSD including: VA Office of Research and Development; TBI Centers of Excellence; National Center for PTSD; Mental Illness Research, Education and Clinical Centers; War Related Illness and Injury Study Center; and Office of Public Health Environmental Epidemiology Service Office but lacks central oversight for management of all the different research studies and trials through the current decentralized research model; and

WHEREAS, The Department of Defense (DOD) and VA developed a DOD/VA Integrated Mental Health Strategy which recommended as one of the strategic objectives to “develop a system to deliver evidence-based psychotherapies” but in the plan it does not mention coordinating research jointly between both departments; and

WHEREAS, The American Legion developed a TBI/PTSD Ad Hoc Committee in 2010 to investigate the existing science and procedures and alternative methods for treating TBI/PTSD; and

WHEREAS, The committee has found several concerns including: the overlapping of symptomology between TBI/PTSD and Substance Abuse Disorder which makes it difficult to

diagnose and treat the correct injury/illness; ineffective and overuse of medications; and reluctance of servicemembers and veterans to receive and continue mental health treatment; and

WHEREAS, VA conducted a study on Risperidone, a second generation antipsychotic, which is not approved by the Federal Drug Administration for use in treating PTSD; and

WHEREAS, Researchers of the study concluded that Risperidone did not improve PTSD symptoms but had several negative side effects which included weight gain, sleepiness and increased saliva in the mouth; and

WHEREAS, Researchers in the study concluded that in FY 2010, VA treated 86,852 veterans for PTSD last year, of which nearly 20 percent were prescribed this off-label and ineffective medication, and currently the only antidepressants and serotonin reuptake inhibitors such as sertraline and paroxetine are currently approved for treatment; and

WHEREAS, Veterans that have participated in past DOD/VA TBI/PTSD research studies have not always been properly informed that they are participants in the study and are not given a disclosure of the effects of any treatment they may be receiving through a study; and

WHEREAS, Additionally, the TBI/PTSD committee in their charge found several new innovative treatments for TBI/PTSD which include Hyperbaric Oxygen Therapy and Virtual Reality Exposure Therapy that have not been prioritized for clinical studies to determine if they are evidence-based treatments; now, therefore, be it

RESOLVED, By The American Legion in National Convention assembled in Charlotte, North Carolina, August 26, 27, 28, 2014, That The American Legion urge Congress to provide oversight and funding to the Department of Defense (DOD) and Department of Veterans Affairs (VA) for innovative Traumatic Brain Injury (TBI) and Post Traumatic Stress Disorder (PTSD) research currently used in the private sector, such as Hyperbaric Oxygen Therapy and Virtual Reality Exposure Therapy and other non-pharmacological treatments; and, be it further

RESOLVED, That The American Legion urge Congress to increase the budgets for DOD and VA to improve the research, screening, diagnosis and treatment of TBI/PTSD as well as provide oversight over DOD/VA to develop joint offices for collaboration between DOD/VA research; and, be it further

RESOLVED, That DOD/VA both establish a single office for their agency's research and serve as a clearinghouse to track all DOD or VA research, and that all DOD/VA individual research programs and activities coordinate and provide monthly and as needed updates on research activities; and, be it further

RESOLVED, That servicemembers and veterans who participate in DOD/VA TBI/PTSD research studies are properly informed and give their consent to be included in the study as well as be provided with a disclosure of any negative effects of treatment; and, be it further

RESOLVED, That DOD/VA accelerate research efforts to properly diagnose and develop evidence-based treatments for TBI/PTSD; and, be it finally

RESOLVED, That The American Legion urge Congress to exercise oversight over DOD/VA to ensure servicemembers and veterans are only prescribed evidence-based treatments for TBI/PTSD and not prescribed off-label and non-Federal Drug Administration approved medications or treatments for TBI/PTSD.

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