Foreword

As the largest integrated health care system in the country, the Veterans Health Administration (VA) provides health care to more than 5.5 million veterans in its 1,400 sites of care that include 872 ambulatory care and community-based outpatient clinics, 135 nursing homes, 45 residential rehabilitation treatment programs, 209 Veterans Centers, and 108 comprehensive home-care programs. VA is committed to providing the best care to all veterans, including our newest veterans. VA’s Office of Research and Development supports these efforts through cutting-edge research aimed at discovering new knowledge that will improve the health and quality of life of all veterans.

Many of our newest veterans are retuning home from conflicts in Iraq and Afghanistan with multiple complex injuries. One such complex injury, traumatic brain injury (TBI), is actually being referred to as the signature injury of the current conflicts. While VA is committed to providing the best care to these veterans, there are many challenges and knowledge gaps regarding TBI.

VA’s Office of Research and Development is sponsoring this State of the Art (SOTA) Conference to advance the knowledge base on traumatic brain injury. The purpose of the SOTA is to identify what we know and what we need to know about TBI, from the basic science, diagnosis, and treatment, as well as identifying what we know and need to know about managing the system of care for TBI. The goal is to make recommendations for further research, policy, or processes that will address the gaps in our knowledge and improve the quality and outcomes of VA TBI care.

The SOTA process began with the assembly of a prestigious planning committee made up of a multidisciplinary group whose expertise covered the range of basic science, pain, neuroimaging, sensory loss, and rehabilitation. Henry Lew, MD, PhD, was the chairperson of the SOTA planning committee. With Dr. Lew’s guidance, the planning committee developed the goals and objectives for the SOTA and commissioned 14 papers as background for SOTA workgroup discussions. Invited participants representing VA and non-VA health care settings, academics, policy makers, clinicians, and researchers self-selected into one of six topic areas which will be the focus of the SOTA. Each workgroup will identify what we know, identify gaps in our knowledge, develop research questions to fill the gaps, and make recommendations for overcoming obstacles to improving the diagnosis and treatment of TBI. After the SOTA conference, staff will work to develop products for dissemination of SOTA recommendations, strategies, and other outputs.

Special thanks go to Dr. Lew and the SOTA planning committee, as well as to authors, reviewers, and staff who have contributed to the planning and content of the conference. I also extend special thanks to each of the invited participants for your time and expertise. I am confident that this effort will yield important insights and results that will help move VA forward toward a better understanding of mild to severe traumatic brain injury and how we can provide the best care for our brave men and women who have suffered a TBI.

I look forward to the results of your SOTA deliberations.

Joel Kupersmith, MD
Chief Research and Development Officer

1 Department of Veterans Affairs Fact Sheet, December 2007.
http://www1.va.gov/opa/fact/vafacts.asp