HSR&D Targets Research for OIF/OEF Veterans

The Department of Veterans Affairs is now faced with the many complex issues confronting veterans who have suffered battlefield injury and trauma in Iraq (Operation Iraqi Freedom – OIF) and Afghanistan (Operation Enduring Freedom – OEF). Due to advanced body armor and state-of-the-art field-based treatment, many more soldiers are surviving injuries sustained during combat that might otherwise have been fatal. In fact, the percentage of fatal casualties has decreased dramatically from previous conflicts, from 19.1% for those who served in WWII – to 15.8% for those who served in Vietnam – to 9.4% for those serving in Iraq and Afghanistan.

More soldiers are surviving, but with multiple injuries that will require long-term care for conditions that include traumatic brain injury (TBI), spinal cord injury, amputation (600 amputations, thus far), burns, and mental health issues such as post-traumatic stress disorder (PTSD). From the start of the conflicts in Iraq and Afghanistan in 2003 through the end of FY06, more than 631,000 soldiers have been discharged. Approximately 32.5% have sought VA healthcare and, of these, 35.7% have had a mental health condition or concern. In 2008, VA expects to treat 5.8 million veterans – an increase of 2.4% over 2007. Of these 5.8 million, VA will see 263,000 OIF/OEF veterans, an estimated increase of 54,000 veterans, or 25.8% more than the current fiscal year.

As these numbers increase, it is vitally important that VA be prepared to meet the unique healthcare needs of this new generation of veterans. Many of these veterans have experienced multiple injuries or polytrauma, which can include injuries to several organs, limb loss, sensory loss, burns, and chronic pain. Moreover, OIF/OEF combat veterans are at higher risk for PTSD and other mental health disorders, and have sought care for a variety of these problems that can include adjustment disorder, anxiety, depression, and substance abuse.

VA research plays an important role in improving the health and care for these veterans. It is imperative that we continue our commitment to conducting research that will result in providing optimal care for all veterans, and that we place a high priority on addressing the urgent needs of these newest veterans returning from conflicts in Iraq and Afghanistan.

Congress recently provided a supplemental allocation of $32.5 million in additional research funds to VA’s Office of Research and Development to specifically target OIF/OEF-related research.

HSR&D research should address treatment effectiveness and/or quality of care, in terms of patient- or system-level outcomes. Funding opportunities in the area of deployment-related health are varied and include, but are not limited to:

- Diagnosis and treatment of traumatic brain injury;
- Effective treatments and management of acute pain and prevention of chronic pain with complex injuries;
- Early identification and treatment of psychiatric disorders, including PTSD and depression (35% of returning veterans have a mental health diagnosis);
- Optimal care for the unique needs of women veterans;
- Measurement of the quality of care in inpatient settings and during transitions between acute care and other delivery settings;
- Facilitation of access to care for the returning veteran, including a smooth transition from DoD (Department of

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Defense) to VA care; and
• Rehabilitation-related issues, including long-term care.

Severely injured veterans also may require extensive periods of rehabilitation to successfully integrate back into the community. Amputation and/or traumatic brain injury, particularly in combination with PTSD and other mental health problems, are among the conditions that require extensive rehabilitation, including help with transitioning back to “normal” life at home.

VA investigators are encouraged to submit proposals for projects that establish collaborations between HSR&D and VA’s Rehabilitation Research and Development Service. In addition, the Department of Defense recently announced funding opportunities for FY07 through their Post-Traumatic Stress Disorder and Traumatic Brain Injury Research Program, which will provide $150 million for PTSD research and another $150 million for TBI research. To learn more about the funding mechanisms available through this new DoD program (i.e., new investigator award, investigator initiated research award), visit www.grants.gov.

I encourage investigators to submit research applications that focus on OIF/OEF veterans and help us to meet our mission to provide the best care possible for our nation’s veterans.

Seth A. Eisen, MD, MSc
HSR&D Director

HSR&D National Meeting 2008—Call for Abstracts

SAVE THE DATES: meeting tentatively planned for February 12-14, 2008.

(UPDATE: After print, dates moved to Feb 13-15)

“Implementation across the Nation: From Bedside and Clinic to Community and Home” is the theme for the 2008 HSR&D National Meeting. This year’s meeting host is HSR&D’s Center for Research on the Implementation of Innovative Strategies in Practice, located at the Iowa City Veterans Affairs Medical Center. For meeting and abstract submission details, visit the National Meeting web site at www.hsr.d.research.va.gov/meetings/2008. Abstracts are due October 9, 2007.

Are You Interested in Using STATA with VA Data?

Learn from self-awowed STATA devotee, Dr. Todd Wagner as he takes you through an hour-long session “STATA: Getting Started and Being Productive with VA Data”.

This HERC Health Economics Cyber Seminar was recorded and is available online for on-demand viewing. Join Dr. Wagner as he shares some of the tips, tools and techniques he’s learned through more than 10 years experience using STATA. In this “STATA Primer” presentation, you’ll learn about:
1. tips for avoiding the traps in getting VA data into STATA,
2. editing in STATA,
3. how STATA handles data (and how it does this differently than SAS),
4. STATA notation and help,
5. using STATA and basic STATA commands, and more.

Dr. Wagner’s engaging and informative introduction to STATA will help you get started exploring how STATA might be useful for you in working with VA datasets. Even die-hard SAS fans will discover easier ways for getting answers using STATA. If you work with VA data, there’s something here for you!

Access this presentation and others from the HERC Health Economics Cyber Seminar Series in the archives section of the HSR&D Cyber Seminar Catalog at www.hsr.d.research.va.gov/fors_researchers/cyber_seminars/catalog.cfm#archive

New Solicitations for Deployment Health Research

VA is encouraging its investigators to submit proposals for several deployment health-related solicitations, such as the Department of Defense (DoD) Post-Traumatic Stress Disorder and Traumatic Brain Injury (PTSD/TBI) Research Program. For general information about the program, please see the funding announcement on the HSR&D website at www.hsr.d.research.va.gov. In addition, for information about ORD and HSR&D Deployment solicitations visit www.hsr.d.research.va.gov/funding/solicitations.cfm.
Newly Funded

(Only awards/projects with funding start dates that have been confirmed since the last issue of Research Briefs in January 2007 are listed here.) For a complete listing of funded projects/awardees, visit the HSR&D web at www.hsrd.research.va.gov

Career Awardees
Leslie Hausmann, PhD, MS
VA Pittsburgh Health Care System
The Role of Perceived Discrimination in Health Experiences and Behavior

Jennifer Strauss, MS
Durham VAMC
Mental Health Services Interventions for Veterans with PTSD

Rachel Werner, MD, PhD
Philadelphia VAMC
The Role of Performance Measurement in Improving Healthcare Quality

Research Projects

Combat Casualty Neurotrauma
Theresa Pape, DrPH, MA
Hines VAMC
Measurement and Outcomes Post Severe Brain Injury

Implementation – Rapid Response Projects

David Armstrong, DPM
Hines VAMC
CPRS Diabetes Foot Reminder-Based Registry and Decision Support Tool

Bradford Felker, MD
VA Puget Sound Health Care System
Improving Access to and Quality of Mental Healthcare for OIF/OEF Veterans

Paul Heidenreich, MD, MPH
VA Palo Alto Health Care System
Cost-Effectiveness of Nurse Based Program for Heart Failure Patients

Sheri Reder, PhD
VA Puget Sound Health Care System
Long-Term Care Referral Tutorial

Jodie Trafton, PhD
VA Palo Alto Health Care System
Validation of Computerized Risk Assessment of Prescription Opioid Abuse

Sandeep Vijan, MD
VA Ann Arbor Health Care System
Colorectal Cancer Screening Preferences and Endoscopy Demand in VHA

Investigator-Initiated Research

Brian Cason, MD
San Francisco VAMC
Surgical Case Duration in the Department of Veterans Affairs Patient and Provider Attitudes in the Healthcare Context

Alan Christensen, PhD
Iowa City VAMC
Identifying Successful Approaches to Smoking Cessation Treatment for Veterans

Melissa Farmer Coste, PhD
VA Greater Los Angeles Health Care System
Adapting Tools to Implement Stroke Risk Management to Veterans

Teresa Damush, PhD
Indianapolis VAMC
The Effectiveness of FMPO in Improving the Quality of Care for Persons with SMI

Lisa Dixon, MD, MPH
VA Maryland Health Care System
Caregiver Psychoeducation and Support: Improving Outcomes in AD/ADRD

Theodore Hahn, MD
VA Greater Los Angeles Health Care System
Detailing Smoking Attributable Risks for Post-Surgery Morbidity: Planning for Policy and Clinical Interventions

Thomas Houston, MD, MPH
Birmingham VAMC
VA and Non-VA Healthcare Utilization and Outcomes by Veterans with Stroke

Huanguang Jia, MPH, PhD
North Florida/South Georgia VA Health Care System
Modifiable Determinants of Anti-Depressant Adherence among Older Veterans

Helen Kales, MD
VA Ann Arbor Health Care System
Primary Care-Based Disease Management for Alcohol Dependence

David Oslin, MD
Philadelphia VAMC
Hospital Costs and Utilization of Veterans Receiving Palliative versus Usual Care

Joan Penrod, PhD
Bronx VAMC
Inappropriate Drug Use for Seniors: Should VA Adopt New HEDIS Measures?

Mary Jo Pugh, PhD
VA South Texas Health Care System
Hip Fracture Repair and Outcomes: A National Cohort Study of Veterans

Tiffany Radcliff, PhD
Denver VAMC
Re-Engineering Systems for the Primary Care Treatment of PTSD

Paula Schnurr, PhD
White River Junction VAMC
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<td>Theodore Speroff, PhD</td>
<td>Nashville VAMC</td>
<td>Comparing Signs and Symptoms of OEF/OIF Veterans with PTSD to Veterans with PTSD/TBI Using Concept-Based Informatics Indexing of C&amp;P Narrative Reports</td>
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**Center for Information Dissemination and Education Resources**

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