

TBI TODAY

News, Ideas, and Resources from the Virginia TBI Model System

THE VIRGINIA TBIMS TEAM

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What Makes Us Strong? by Rosemary Rawlins

Alstromeria, the Peruvian lily, is my favorite flower. I love its brilliant color, its deceivingly delicate appearance, and its grit. I say grit because alstromeria lasts longer than almost any other cut flower. The bouquet in this pitcher is now fourteen days old, and still, the stems stand tall and the petals hold on. And yet, if I shook the pitcher holding them, every perfect petal would detach and float to the ground. Alstromeria seldom fades, wilts, or turns brown, but when it falls apart, it does so all at once.

TBI caregivers can be a lot like this flower. We often stand tall and hide what's hurting us. We keep marching forward and most people don't see the signs that we're fading. We may look fine to the outside world even as our hearts are breaking and our brains are fogging from the strain of exhaustion and worry. But if someone shakes us up with a simple question like, "What are you really feeling? What are you going to do?" we might instantly fall apart. When I was younger, I thought strong people were the ones who never cried, who always took bold action, and magically knew exactly what to do. The strongest could "go it alone." (contd on pg.2)

Goodbye Mary Beth King!

This month, we bid a fond farewell to Mary Beth King, Office Manager for the Neuropsychology and Rehabilitation Psychology Clinic. After 16 years managing the clinic and a total 29 years working in the health services field, Ms. King is retiring. More time to enjoy her sweet grandbabies is sure to make her happy! We will miss Mary Beth and wish her the very best.



Hugh's brain injury* taught me to see personal strength in an entirely new way. I found that I was stronger when I had others to lean on, when I asked for help, and when I reached out to other caregivers, doctors, and therapists to figure out options before making important decisions about therapies or medications.

Over time, I learned that I needed to draw strength from others to keep from falling apart. The building blocks of my tower of strength turned out to be simple yet powerful moments that made up my days: a long embrace with my daughters, a heart-to-heart talk with a sister while shedding a few tears, or accepting a favor from a friend.

What makes us strong? I can only say what I now believe. Strength comes from being vulnerable enough to seek knowledge — knowledge shared by others who understand our situation from experience, or knowledge shared by experts. It comes from feeling connected and understood. My strength doubled when I stopped trying to be strong, when I reached for and accepted the help and love offered by family, friends, and the community.

I keep bunches of alstromeria in my home as often as possible. It's the flower Hugh always gives to me for my birthday or our anniversary, so its very presence releases happy memories in me. These beau-



tiful flowers never fail to remind me that I can be strong and fragile at the same time, and that's just fine with me.

*Hugh, Rosemary's husband, experienced a brain injury following a bike accident in 2002. Their journey is the subject of her memoir, Learning by Accident.

This article reprinted with permission from BrainLine.org. You can read Rosemary's blog on cargiving and TBI at www.brainline.org/rosemary.

Mark Your Calendar,

Supportive Survivors

- When: Tuesdays 6-8pm
- Location: Usually at the Regency Mall Food Court (Richmond)
- Contact: Contact Ted Taylor at (804) 852-6644 or taylorted58@yahoo.com

Richmond Aphasia Support Group

- Location: 2nd Thusday of every month from 6-7pm at the Weinstein JCC, 5403 Monument Ave, Richmond, VA 23230
- Contact: (804) 439-2657 or email at ricaphasia@yahoo.com

Richmond Area Support Group

- Location: 2nd Monday every month at 6:30pm, Woodlake Methodist United Church, 15640 Hampton Park Drive in Chesterfield
- Contact: Liz Perry-Varner at 804-276-5761

Chesterfield Support Group

- Location: 2nd Monday every month at 6:30pm at the Woodlake United Methodist Church, 15640 Hampton Park Drive, Chesterfield VA 23832
- Contact: Call Elizabeth Perry-Varner at 804-276-5761 or email eperryvarner@verizon.net

April 15-17, 2015

- Event: 39th Annual Williamsburg Brain Injury Rehabilitation Conference Hampton Park Drive, Chesterfield VA 23832
- Location: Doubletree by Hilton Hotel Williamsburg
- Contact: Call 703-451-8881, ext 224 or visit www.tbiconferences.org. See the write-up on page 7 for more info!

If you have an upcoming event of interest to the Brain Injury community in Virginia, we would be glad to consider including it here. Please call 828-3703 or email wetselme@vcu.edu.

Survivor Stories Wanted!

Recovering from a brain injury can be very difficult. Sometimes, one of the most helpful and inspiring things is simply hearing from other survivors who have gone through recovery and faced the same challenges. Are you a survivor with a story you'd like to share? If so, then we'd like to hear it, and it might get into a future issue of TBI Today!

Submit to: jhmarwit@vcu.edu

or TBI Today, VCU P.O. Box 980542 Richmond, VA 23298-0542

New Years

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Happy New Year! As we continue into 2015 (and accidentally keep writing 2014, oops!), see if you can find all the words and phrases hidden in the puzzle above. If you get stumped, answers are on page 7!

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Pat answers your personal questions about brain injury with compassion and practical advice. However, advice from Pat's column should not be substituted for consultation with a doctor or rehabilitation specialist. The identity of individuals submitting questions to "Chat with Pat" is kept strictly confidential.

DEAR PAT: My daughter Allie was in what seemed to be a minor fender-bender car accident about a month ago. She was hit from behind by a pickup truck at a red light on the way to work. She called me all shook up but was able to tell me what happened pretty clearly. Allie was worried about getting to work and missing work, but I insisted that she go get checked out by a doctor. I met her down at the ER and was surprised to see how bruised up she was. She looked terrible! She had a big bump on her forehead from apparently hitting the steering wheel. And, she started complaining of headaches, neck pain, and nausea.

I started to get worried but the doctor assured me that Allie would be fine. She just needed some rest for a few days. Her body was reacting to the accident and in shock. All the tests came back normal, but the doctor thought she might have a concussion. We were given some documents on concussion to take home. I made Allie take off work for the rest of week and I stayed with her to keep an eye

on her. Yes, I am an overprotective mom. Even though she is a grown adult in her 30's, I still treat her like my little girl. What

Allie finally felt better by the weekend and ready to go back to work on Monday. She seemed like she was fine so I went home thinking that this was the end of it. She has to deal with the insurance company and take care of her car, but she got a rental and told me she got everything under control. Then, I got a call from her around lunch time, she was crying asking me to pick her up from work. The headaches were back and she felt jittery the whole time she



was in office. She had a hard time driving to work but made it since it was really close to her home. But the day just got worse and she needed to leave work before she made a mistake or fell apart. Of course, I dropped everything and moved in with her to take care of her. I didn't know what was going on, but it didn't matter. I just needed to be there for her.

A month later, Allie is pretty much back to herself. She's able to laugh and joke again. She's more relaxed when driving or being out in the public. She has

also gone back to work, only working two days for a few hours. No more headaches or pain. As a worried mom, I'm can I say? I worry about my kids. scared to let her go back to work full-time. What if she falls apart again? We have gone to see a specialist and he thinks Allie can go back to work without problems. How do I know she's ready though? I thought she was ready that first time. Any advice would be greatly appreciated.

> Sincerely, Concerned Mom

Dear Concerned Mom,

It is understandable that you are worried about your daughter. You want to protect her and keep her safe. As a parent, you will likely always see her as your little girl.

The experience you went through sounds pretty traumatic. This past month probably feels like forever as you took care of your daughter, wondering when she will be better. Typically, the majority of the recovery from a concussion occurs within the first 6-12 months, though improvements continue to happen at a slower pace after that period. Feelings of frustration are common because people want to get back to their "normal" life.

Returning back to work prematurely could place Allie at risk for failure. Besides physical limitations, cognitive challenges are also barriers to carrying out job responsibilities. People are often unaware of the cognitive changes because they have been focused on the physical aspect of rehabilitation. (contd page 5)

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(Pat, contd) In addition, the person has not been challenged to perform complex tasks because others, including caregivers and family members, often keep them from doing too much.

To determine readiness for return to work, a comprehensive neuropsychological evaluation is recommended. A neuropsychological evaluation assesses for cognitive changes, including attention/concentration, learning and memory, motor abilities, visual skills, and reasoning. Consult with Allie's treating physician part-time versus full-time hours).

regarding a referral.

In addition to undergoing a neuropsychological evaluation, it is important for Allie to maintain open communication with her employer. Keeping them informed of her health and return to work status will allow them to be prepared for her full return. From your description, it sounds like her employer has been accommodating and willing to work Allie will be successful with her with her on the schedule. A gradual return to work is typically recommended (i.e., working

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Fatigue often lingers as a residual effect of brain injury. Slowly increasing her responsibilities and work hours will increase her chance of success. Having Allie seek feedback from her supervisor will also be a key to maintaining a positive impression.

Allie sounds like a determined girl. With support from you and her employer, I am hopeful that return to work. Good luck!

JUST THE

FREQUENTLY ASKED QUESTIONS

THE INFORMATION PROVIDED IN THE FAQ IS INTENDED TO FAMILIARIZE THE PUBLIC WITH ISSUES RELATED TO TBI. NO INFORMATION PROVIDED HEREIN SHOULD BE CONSTRUED AS THERAPEUTIC ADVICE OR AS A SUBSTI-TUTE FOR CONSULTATION WITH A COMPETENT MEDICAL OR MENTAL HEALTH PROFESSIONAL.

Q: I know fatigue is common after TBI; however, there must be something I can do about it. I feel tired all the time, but it's worst in the evening. My family has stopped trying to have a conversation with me after 7pm.

A: Fatigue is one of the most common problems people have after a TBI. Specifically, survivors often complain of mental fatigue. Here are suggestions to help decrease your fatigue:

- □ Stop an activity before getting tired. Learn to identify the early signs of fatigue, such as becoming more irritable or distracted, so you can prevent overexertion.
- Get more sleep and rest. Talk to your doctor if you have sleep troubles.
- □ Set a regular sleep-wake schedule (i.e., same bed time and wake up time) and incorporate frequent rest breaks or naps into your daily routine.
- Avoid alcohol and marijuana use.
- Avoid caffeine consumption after lunch.
- ☐ Gradually resume activities over time. Start with

- familiar tasks that require less mental demands and gradually increase the complexity of each task.
- ☐ Improve your time management by a) plan and follow a daily schedule, b) prioritize activities, c) do things that require the most physical or mental effort earlier in the day, when you are fresher, d) avoid over-scheduling, and e) if visitors make you tired, limit time with them.
- Exercise daily. Research has shown that TBI survivors who exercise have better mental function and alertness. Over time, exercise and maintaining a more active lifestyle can help lessen physical and mental fatigue and build stamina.



Questions for Pat or the FAQ column are welcomed. Send them to: "ASK PAT" OR "FAQ" P.O. BOX 980542. RICHMOND, VA 23298-0542 or e-mail: jhmarwit@vcu.edu



VCU TBI Model Systems Research Update

The staff of the TBI Model System at VCU continue to work hard researching the effects of TBI, as well as how we can better help people after an injury.

We have just begun doing 25 year follow-up's with people who agreed to participate in the TBI Model Systems. Since the project began, over 700 people have consented to let us call them to see how they have been doing since their injury. Calls are made at 1, 2, 5, 10, and every five years after the injury. Thanks to all of our research participants who are helping us learn more about recovery after TBI!

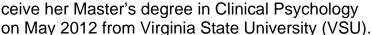
Another project that we are working on is the "Intervention to Promote Survivor Resilience and Adjustment." We hope to learn if seven treatment sessions with a psychologist/counselor will help people feel better and function better. Individuals with TBI work one-on-one with the therapist and discuss topics related to working on recovery, setting reasonable goals, problem solving, managing stress and anger, communicating effectively, and maintaining a positive attitude, to name a few. So far 124 individuals have participated, and we are hoping to include 150. To qualify for the study, volunteers must have had a TBI, be at least 18 years old, and at least 3 months post-injury.

We also have a project to support couples after TBI, the "Therapeutic Couples Intervention" (TCI). We hope to help couples with the common issues and challenges they may face. Research shows that while many people remain together, the quality of the relationship can decline. This project will improve our understanding of marital satisfaction and adjustment after brain injury, and also help us learn if a therapy and education program can help couples' relationships. Couples who enroll in the study will meet with a psychologist/counselor for five to six sessions focusing on adjusting to brain injury, healthy communication, stress management, rebuilding intimacy, strategies for parenting (if appropriate), and other topics. So far 47 couples have participated, and we are hoping to include 120. To qualify for the study, individuals must have had a TBI, be in a relationship, at least 18 years of age, and at least 3 months post-injury.

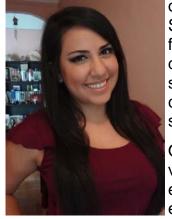
There are no charges for participation in the studies, and volunteers are compensated for their time. If you or someone you know is interested in participating in the TBI Model Systems research programs, or if you would like to learn more about the projects, please contact Jenny Marwitz at (804) 828-3704 or toll free at (866) 296-6904. You can also email Ms. Marwitz at jhmarwit@vcu.edu.

Melody Moadab, M.S. is a psychometrist and research associate in the Department of Physical Medicine and Rehabilitation at Virginia Commonwealth University (VCU). She was born in Texas but raised in the Richmond area. Melody received her bachelor's degree in Chemistry with a minor in Psychology on May 2009 from VCU. She went on to re-

HAVE YOU MET MELODY MOADAB, M.S.?



She is currently conducting research and neuropsychological assessments for adults with TBI and other health concerns. During her time at VSU, Melody worked as a brain scan analyst in the engineering department to help a study using fMRI scans of adolescents engaging in cognitive tasks. She also completed her practicum curriculum by working alongside psychiatrists and social workers at Riverside Regional Jail.



Outside of work, Melody enjoys oil painting, reading fiction novels, playing video games, watching Jeopardy, and traversing the world by herself. Presently, to enrich her knowledge, she is taking advantage of psychology courses at VCU and is excited to further pursue her interests.

Join Us in Williamsburg!

It's that time of year again, and we're excited to announce the 39th Annual Williamsburg conference, Rehabilitation of the Adult and Child with Brain Injury: Practical Solutions to Real World Problems. The conference will take place on April 16-17, 2015 in Williamsburg, VA. For almost four decades, TBI service providers and researchers have gathered in Williamsburg to learn about the problems facing individuals with TBI as well as their loved ones and caregivers.

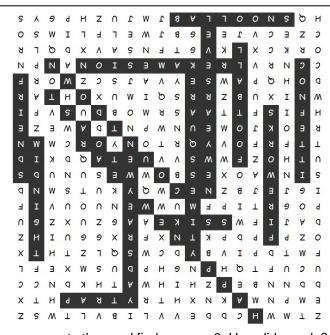
Keynote and plenary presentations will focus on translational neuroscience, concussion and cognitive rehabilitation and ethical issues. Breakouts will focus on retraining thinking, mTBI, mood and affect disturbances, assistive technology, resilience, rebuilding identity, behavioral dyscontrol and PTSD. The conference will also feature peer-reviewed oral presentations and rapid podium presentations. For professionals interested in some in-depth, hands-on training, we also offer a choice of two exceptional daylong pre-conference workshops: one focused on neurobehavioral assessment and intervention for the challenging client, the other on brain injury family intervention (BIFI).

The Williamsburg conference is designed primarily for multidisciplinary rehabilitation professionals and others who serve individuals with brain injuries and their families.

For more information, visit www.williamsburgtbiconference.com.

Happy New Year! Here's to a fantastic 2015 from everyone at the VCU TBI Model System!





Here are the answers to the word find on page 3. How did you do?



Did you Know? You can subscribe to TBI Today by email and get every issue sent directly to your computer, tablet, phone, or any other device that supports PDF. Best of all, it's free! Go to http://model.tbinrc.com and look for 'Join Our Mailing List' on the lower right. We also have back issues available.

In addition to the newsletter, the website is host to a variety of materials and fact sheets about recovery from brain injury which you can download for free!

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Founded in 1983 by families and concerned professionals, the Brain Injury Association of Virginia is the only statewide non-profit organization in Virginia exclusively devoted to serving individuals with brain injury, their families, and those that care for and about them. Over 10,000 people find help from BIAV each year.

BIAV is a chartered state affiliate of the Brain Injury Association of America and exists to be the voice of brain injury through help, hope and healing for Virginians with brain injury and their families. We edu-

cate human service professionals and the community on the risks and impact of brain injury and advocate for improved medical and community-based services. Many of our staff members are Certified Brain Injury Specialists (CBIS Certified).

To find out more information about BIAV, contact us at 1-800-444-6443 or 804-355-5748. Or visit our website at www.biav.net.



The Voice of Brain Injury: Help, Hope & Healing