Sidney Kimmel Medical College - Thomas Jefferson University February 13, 2017

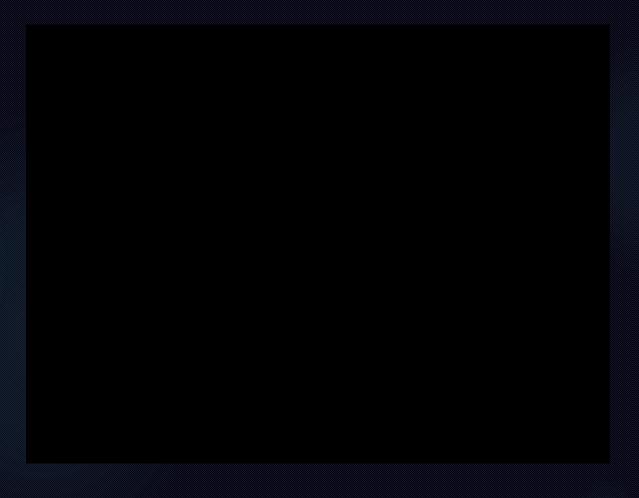
Veterans' Healthcare: The Role of Community Medicine

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Disclosures: None



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Community medicine is a weak link in veterans' healthcare









Veterans' Healthcare Quiz

Which of the following statements are true?



One of every ten U.S. adults (10%) 18 years and older has served in the military.

21.2 million veterans in 2012* plus

1.4 million active duty military

One of every six males (16%) between the ages of 35 and 65 years has served in the military.*

(* NCVAS)

<u>Eight of every ten veterans</u> (80%) receive most of their healthcare from civilian non-VA sources.

40 percent are registered with the VA
Most are insured. (Private, Medicare, Medicaid)

a)

All of the above.

Which of the following statements are true?



- a. Few community healthcare providers <u>routinely</u> ask their patients if they or someone close to them has served in the military.
- b. Patients don't usually identify themselves as veterans without being asked.
- Community physicians frequently believe that veterans' healthcare does not pertain to them or their specialty.

d. All of the above.

"Veterans' health issues do not pertain to me or to my specialty."







One-third of military personnel have children under the age of 11 years.



"Veterans' health issues do not pertain to me or to my specialty."



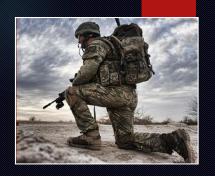




Greater than 15 percent of active duty military personnel are female.



Civilian patients are <u>not</u> identified as veterans because:



- a. Military health history and veterans' cultural awareness are not usually included in teaching curriculum and CME.
- Most electronic health records <u>do not include</u> military health history questions.
- c. The VA <u>does not require</u> veterans' competency training before healthcare personnel rotate through their facilities. 70% of US medical grads.
- d. Many <u>providers feel insecure</u> when responding to affirmative answers.
- e. 🗹 All of the above.

When civilian patients are not identified as veterans, what are the likely results?



- a. Diagnostic errors
- b. Lack of proper referral
- c. Difficulty tracking medical data.
- d. Loss of opportunity to create patient rapport.

☑ All of the above.



Prior military service can affect which of the following?

- a. Past medical history
- b. Present medical history
- c. Occupational history
- d. Psychiatric history
- e. Social and family history
- f. Preventive screening and anticipatory guidance

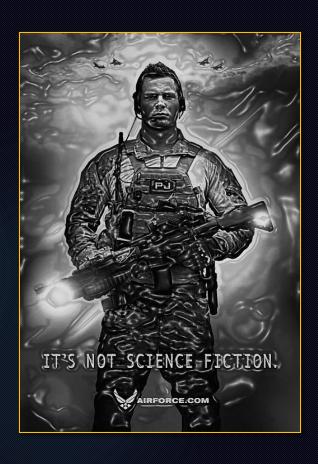
 \square All of the above.

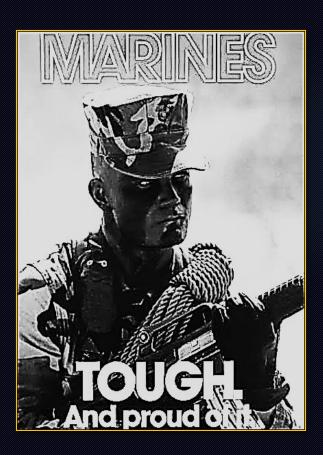
Veterans Demographic

- ► <u>Male Veterans</u> = 20,013,903 <u>Median Age:</u> Veterans 64 Non-Veterans 41.
- ► <u>Female Veterans</u> = 1,583,048; <u>Median Age:</u> Veteran 49 Non-Veterans 47.
- Ethnicity: Whites over-represented; Hispanics under-represented.
- Marital status: Same as non-vets but females have 2x divorce rate of nonvets.
- ► Education: 79% of female and 61% of male veterans had completed some college, a Bachelor's degree, or an advanced degree.
- ▶ Income: Veterans of both sexes <u>had higher personal incomes</u> than non-Veterans. (Median earnings men: \$51,000 vs \$46,000)
- ► Health Insurance: Male and female Veterans had lower <u>uninsured</u> rates than non-Veterans in 2011. (6% vs 20%)

Erroneous Public Perception

Professional Soldiers ARE Highly Trained to Withstand Physical and Emotional Stress... BUT





<u>45 Seconds</u> of Two 12 Month Tours in Afghanistan





Helmet-cam

UGH. I MISS IT.

Transitioning from military to civilian life, and from camaraderie to isolation

April 19, 2014



The Washington Post

Washington Post and Kaiser Foundation Nationwide Survey of Iraq and Afghanistan Vets

64%

of those who served in combat feel disconnected from civilian life 33%

think about their service in war every day 56%

miss something from their time at war, mainly their fellow soldiers and camaradarie 54%

of injured veterans do not like talking about their service with casual acquaintances





Miscalculation in career planning

5 weeks from civilian (PG-1) to Vietnam arrival

Entered military: 17 July

Arrived in Vietnam: 27 August

Cu Chi 25th Infantry Division 1st Bde, 2nd Bn/14th Inf









Life in the suburbs: 900 Infantry, 30 Medics, One Doctor









Transportation



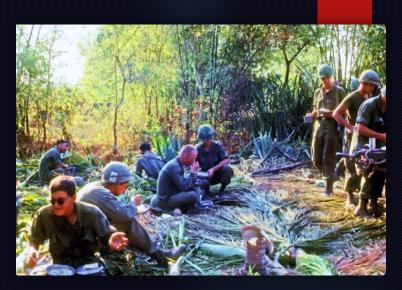




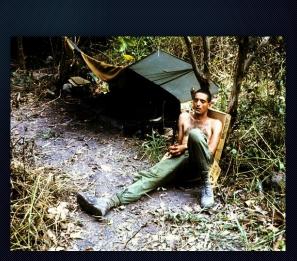


Lodging Dining





Amenities







Medics 2/14th Infantry









Forward Battalion Aid Stations

2nd/14^{th |} Infantry



Forward Battalion Aid Stations

Scenic View



Water View

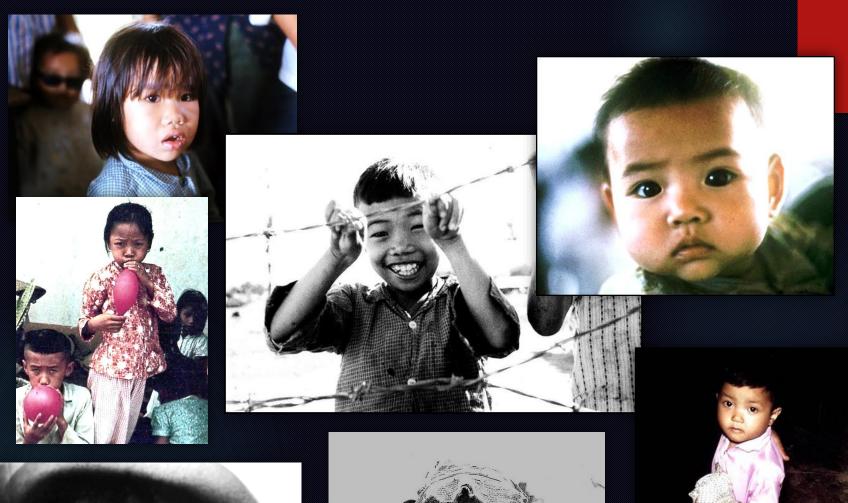




Forward Aid Station Operation Attleboro

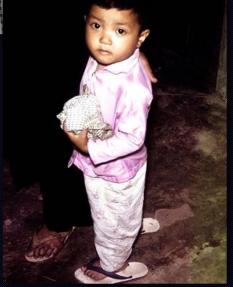
Garden View











November 2013



The Unasked Question

- One of every ten adults is a veteran.
- Eighty percent of veterans receive most of their healthcare from civilian doctors, but
- Most physicians do not routinely ask their patients, "Have you or someone close to you ever served in the military" and then document followup.
- Public health consequences may be significant because large numbers of families may be affected.

A PRECE OF MY MIND



The Unasked Question

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What Community Providers Need to Know

Occupational History
Physical and Psychological Sequelae

<u>Psychological History</u>

<u>Social History</u>
Family – Job/School – Recreation and Risk Taking

Occupational History: Essentials

- Did you or someone close to you serve?
- WHEN did you serve?
- WHERE did you serve?
- WHAT was your job description?
- DO YOU BELIEVE you were injured or have symptoms now as the result of your time in the military?
- Did you receive any TREATMENT?
- Are you registered at the VA?

Traditional Military Work Hazards Trauma: Enemy, friendly, accidental, and training









Traditional Military Work Hazards:

Booby traps and land mines









Traumatic Brain Injury (TBI)

- Usually from blast injury
- ► Immediate Symptoms
 - Dizziness, confusion, LOC, seeing "stars", transient loss of memory.
- ▶ Later Symptoms
 - ▶ Persistent headache
 - Sensitivity- light and noise
 - Visual disturbance
 - Loss of balance
 - Low energy
 - ► Tinnitus
 - Depression, apathy, anger, anxiety
 - Impaired cognition





EXPOSURE to Environmental Hazards

- ▶ Asbestos
- ▶ Industrial solvents
- ▶ Lead
- ▶ Radiation
- ► Fuels











- ► PCBs
- Vibration
- ▶ Noise
- Chemical resistant paint









Toxic Exposures Not Always Disclosed by Military and Not Always Related to Combat

Army Apologizes to Troops Exposed to US-Designed Chemical Weapons in Iraq



After it was reported that more than 600 service members suffered from chemical exposure in Iraq, the undersecretary of the Army issued an apology this week. The scandal goes deeper with its lack of proper medical treatment for these service members.

More Than 600 Reported Chemical Exposure in Iraq, Pentagon Acknowledges

By C. J. CHIVERSNOV. 6, 2014 nytimes.com | Nov. 6, 2014

More than 600 American service members since 2003 have reported to military medical staff members that they believe they were exposed to chemical warfare agents in Iraq, but the Pentagon failed to recognize the scope of the reported cases or offer adequate tracking and treatment to those who may have been injured, defense officials say.

The Pentagon's disclosure abruptly changed the scale and potential costs of the United States' encounters with abandoned chemical weapons during the occupation of Iraq, episodes the military had for more than a decade kept from view.

Navy sailors have radiation sickness after Japan rescue

By Laura Italiano and Kerry Murtha

December 22, 2013 | 6:40am



Crew members scrub contaminated snow off the deck of USS Ronald Reagan in March 2011 during a humanitarian mission off tsunami-stricken Japan.

Troops Who Cleaned Up Radioactive Islands Can't Get Medical Care

By DAVE PHILIPPS JAN. 28, 2007









Agent Orange (Dioxin) - 2.5 Million Exposed









Agent Orange (Dioxin) - 2.5 M Exposed





- Birth defects in offspring –esp. spina bifida
- > Amyloidosis
- Chronic B Cell Leukemias
- Chlorachne
- Diabetes Type II
- Hodgkin's Disease
- Ischemic Heart Disease
- Lou Gherig's Disease
- Multiple Myeloma
- Non-Hodgkin's Lymphoma
- Parkinson's Disease
- Peripheral Neuropathy
- Porphyria Cutanae Tarda
- Prostate Cancer
- Respiratory Cancers -Lung, Bronchus, Larynx
- Soft Tissue Sarcomas not osteosarcoma

Gulf War Service





<u>Exposures</u>

- Vaccinations
- Oil well fires smoke and petroleum
- Fine dust and sand particles
- Chemical and biological weapons
- Depleted uranium
- Noise
- Chemical agent resistant paint
- Pesticides
- Infectious diseases
- Heat injuries

Symptoms

- ▶ Chronic Fatigue
- ▶ Fibromyalgia
- Functional gastrointestinal disorders
- Chronic Multisymptom Illness
- ► Weight loss, fatigue, CVD, myalgia, arthralgia, headache, neurologic and psychiatric disorders, sleep disturbance, dermatologic disorders, respiratory disorders.

Infectious Disease History

- ▶ Did you develop any unusual infectious illnesses while on active duty?
- ▶ Treated?
- ► Residual?
- ▶ Blood transfusions?

Infectious Diseases

Gulf War and Afghanistan



- Malaria
- ▶ Brucellosis
- Campylobacter jejuni
- Coxiella Burnetii(Q Fever)
- Mycobacterium tuberculosis
- ▶ Nontyphoid Salmonella
- ▶ Shigella
- Visceral Leishmaniasis
- ▶ West Nile Virus

Infectious Diseases

Common vectors





Sexually Transmitted Diseases

Indigenous vectors





Now includes HIV/AIDS

Vaccinations and Preventive Medications

- Anthrax
- Smallpox
- Pyridostigmine
 - GI, Musculoskeletal, Neurologic, Respiratory Symptoms
- Mefloquin (Larium)
 - Severe and sometimes chronic symptoms (many years): Anxiety, paranoia, depression, hallucinations, abnormal dreams.
 - May also have tinnitus, vertigo, seizures, insomnia.
 - ► May mimic PTSD





Social History

- ▶ Home Work Recreation and Risk-taking
- Do you have a spouse, partner, or children?
- Were they affected by your deployment?
- Are any of them receiving psychological or medical services?
- Do they require services they are not currently receiving?

"Everyone in the family serves!"



- Long deployments.
- Concerns about safety.
- Uncertainty about the future.
- Single parenthood.
- Marital and financial stresses.

Mothers

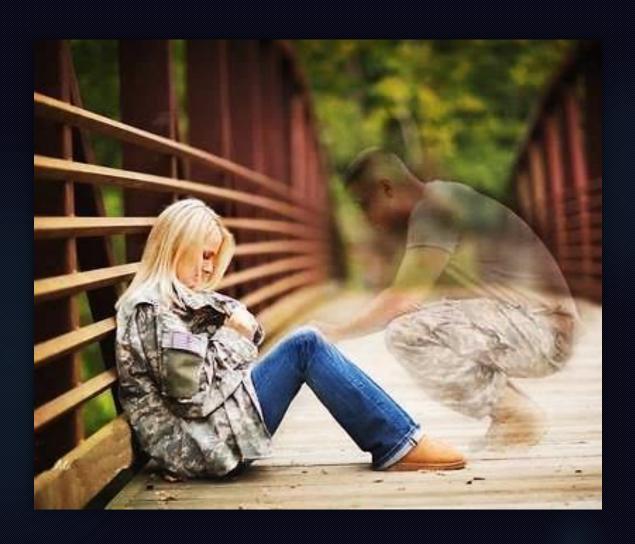




Fathers



Spouses and Partners



Even



But, especially the children.











Family Challenges Include:



Social History

- Separation and divorce.
- Domestic violence and substance abuse.
- Guns in the home.
- Depression and anxiety.
- > Suicide.
- Insecurity.
- Balancing spouses' careers. Military-nonmilitary Military-Military
- Unemployment and financial difficulties.

Children's Challenges Include:



- School and behavioral problems.
- Depression and anxiety.
- Multiple moves, schools, friends, and doctors.
- Parental stress and separations.
- Adolescents: Acting out.
- Child care and extended family.
- Changes in family structure.
- Dealing with "damaged" parents.

15 Percent of Active Duty Military Personnel are Women



15 Percent of Active Duty Military Personnel are Women.

.....some of them are mothers





Psychological History

- ▶ Believe there is a problem?
- ▶ Anxiety?
- ▶ Depression?
- ▶ Substance abuse?
- ▶ Suicidal ideation?
- ► Ever received psychological counselling?

Imposter?







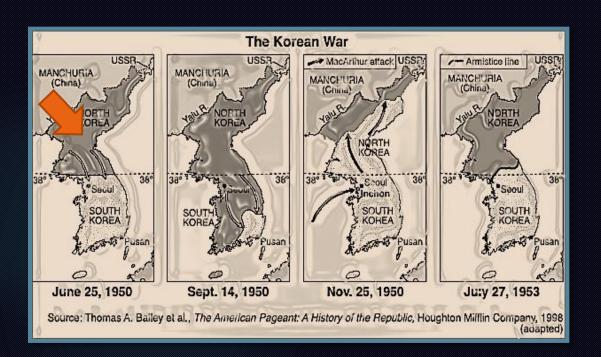
MILITARY to CIVILIAN

Mental Health Disorders Veterans and Families



- Almost all combat veterans have some sort of mental challenges.
- About 20% develop a diagnosable mental disorder shortly after deployment.
- 2/3 of those who screen positive do NOT seek help
 - Cultural bias civilian or military
 - Seems normal or understandable for circumstances
 - ▶ Thought to be transient
 - Do not want it on record
 - Believe others won't understand
 - ▶ Denial "I just want to move on with my life."

TRADITIONAL WARFARE



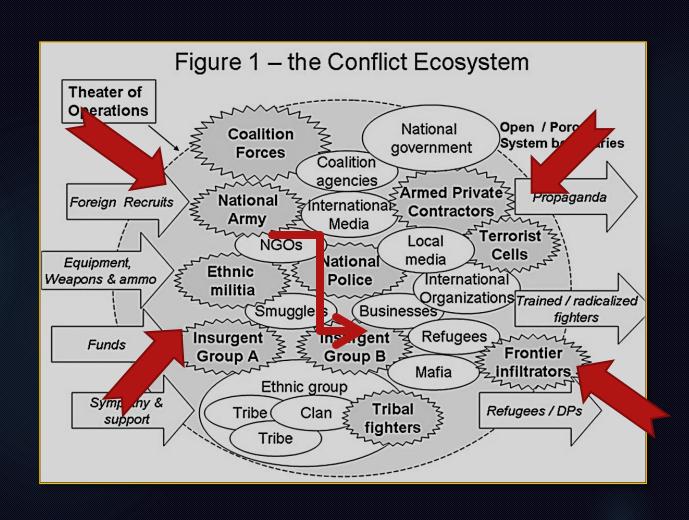
THE KOREAN WAR 1950-53



"Bad Hombres"

Counter-insurgency

Complexity of Modern Warfare



- ►KILL Dehumaníze
- PROTECT Humaníze
- **CAUTION**
- ►KILL Dehumaníze
- PROTECT Humaníze
- **CAUTION**
- ►KILL Dehumaníze
- PROTECT Humanize
- **CAUTION**
- ▶KILL Dehumaníze
- PROTECT Humaníze
- DCAUTION







Post-traumatic Stress

► Symptoms may include:

- ▶ Panic attacks
- ▶ Hypervigilance and startle
- Aggression and paranoia
- ▶ Intrusive thoughts "flashbacks"
- Depressed or flat affect
- Sleep disturbance and nightmares
- Sexual dysfunction (up to 80% combat vets with PTSD)

► May take many forms including:

- ✓ Depression
- ✓ Anxiety
- ✓ Substance abuse



Post-traumatic Stress

- ▶ Risk factors for PTSD associated with Major Depression:
 - Enlisted personnel > Officers
 - ▶ Older > Younger
 - ▶ Female > Male
 - National Guard
 - Injured or exposed to combat
 - Also present in support personnel



- PTSD associated with TBI
 - ▶ Symptoms similar
 - Study numbers are corrupted (TBI combat vs. noncombat)



PTSD: Late Onset Stress Symptoms (LOSS)

- ▶ Occurs months and sometimes many years after stressor.
- ▶ Often symptoms were previously present.
- ▶ Unexpected self and others.
- ▶ Lack of sympathy self and others.
- Presenting Sxs may be somatic .
- ▶ More difficult to diagnose.
- ► Aging veterans especially vulnerable.
 - ▶Time for reflection.
 - Adverse life-events.
 - Increased vulnerability: Physical, Psychological, Financial



Seventy percent of veterans who commit suicide are 50 years of age or older.

Vietnam Veterans: One-third of veteran population















HOMECOMING

- The public did not distinguish between an unpopular war and the warriors who fought it.
- Soldiers did not "decompress" after return home.



Moral Injury

"Damned if they kill.....
Damned if they don't"



Stress Experienced by Medical Personnel



- ► Am I competent?
- ▶ Am I doing "the right thing"?
- ▶ Conflicting responsibilities Patient vs mission.
- ▶ Dying patients Bonding and anonymity.

Stress Experienced by Medical Personnel



Excerpts from *Intrusive Thoughts*Pauline Hebert
Nurse, 12th Evacuation Hospital
Cu Chi, 1966

Fast as I pump that suction pump He bleeds faster Hemorrhages Suffocates Drowns in his own blood.

Aware that I am his savior His eyes never leave my face.

I'll never know Whether he would have rather died that day...

We never asked.

Stress Experienced by Medical Personnel



Excerpts from The Last Breath

Kerry "Doc" Pardue Medic, 9th Infantry Division Vietnam, 1968 I will do my best to keep you out of pain ...
It is my job to help you on your final journey.

I didn't even know your name All I have is the memory of your last breath.

Stress Experienced by Medical Personnel

The red cross wasn't bullet-proof,

You, your patients
Could wind up dead, all of them
Your responsibility
To save, to keep safe.

There was never time
To save them all,
There was never time
To take cover,
There was never time
To listen
There was never silence.

From Pauline Hebert's "Luck"



Identification of Civilian Patients Who Are Veterans

Professionalism

Necessary for good patient care.

Responsibility

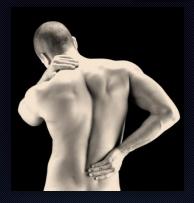
Repay these individuals for their service.

"Did you or someone close to you ever serve in the military?"

NOT: "Are you a veteran?"

Most Common Veterans' Complaints

- Musculoskeletal symptoms.
- ▶ Other chronic pain.
- Psychiatric
 - ▶ May present with somatic complaints.
- May be specific to past deployments or job description:
 - Agent Orange Exposure.
 - Gulf War Syndrome.
 - ▶ Traumatic brain injury.
 - Infectious diseases.



Some Veterans Look Like Veterans









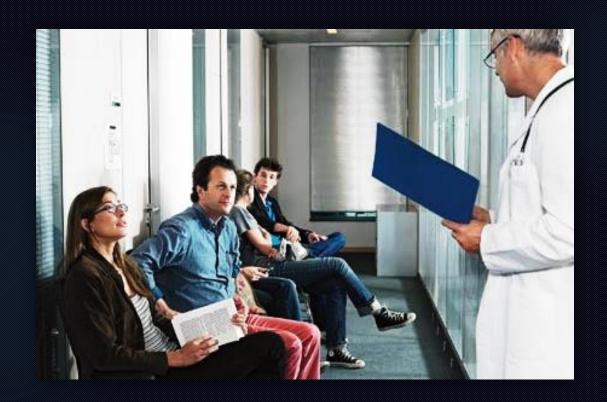
But most military veterans look like your other patients!

Do not make assumptions.



This doctor has no clue which of his patients served in the military.

He was never taught to ask!



Is this mother a veteran?

Her medical team doesn't know.

They don't ask every patient, "Have you ever served in the military?"



She may have served in <u>Iraq</u>.

Gulf War Syndrome was never considered as a possible cause of her abdominal pain, fatigue, myalgia, and headaches.

Did these young patients serve in combat?

Their caregivers don't know.

They don't ask every patient, "Have you ever served in the military?"

They may have served in <u>Afghanistan</u>.

Their symptoms of anxiety, depression and poor concentration might be caused by PTSD or TBI.

They did not tell anyone they served and no one asked.



If these pregnant women are veterans

Their caregivers don't know.

Unless they ask every pregnant patient, "Did you or the baby's father ever serve in the military?"

They have the same risks as male veterans and they more likely to be victims of <u>sexual abuse</u>, or have complications of <u>pregnancy</u> or offspring with <u>birth</u> <u>defects</u> because of toxic exposures.



Are these families ex-military?

Their clinicians don't know

Unless they ask every family, "Did <u>either parent</u> serve in the military?"

Parents and children may require counseling for serious <u>psycho-social</u> <u>problems</u> when parents serve in <u>combat</u> or complete <u>long tours</u> of military duty.







Military Health History: Basics



► Did you or did someone close to you ever serve in the military?

► If NO: The history is completed.

Reminder:

A civilian patient's prior military service can affect ALL of the following

- ▶ Past medical history
- Present medical history
- ►Occupational history
- Psychiatric history
- Social and family history
- Preventive screening and anticipatory guidance

Military Health History: Basics

- ► <u>Stress confidentiality</u>
- ► <u>Sensitivity</u>



- ► Everyone has good and bad experiences in the military. Which were best and worst for you?
- ► How do you think they <u>affected you</u>? Your family?
- ▶ Do you want to talk about any of them in detail?
- ► Were you exposed to <u>killed or wounded individuals</u>? Effects on you personally?
- ▶ <u>Please excuse me</u> if I don't use proper terminology.
- ▶ Do Nots
 - ▶ Did you ever kill anybody?

Military Health History: Basics

- Occupational History
- Physical injury
- Exposures
- Infections
- Psychological Injury
- Not only from combat



- ▶ Home and Family
- ► Work
- ► Recreation and Risk-taking



VA OAA Pocket Card

http://www.va.gov/oaa/pocket_cards.asp

Ask these questions of military service members and all Veterans

General Questions

- Tell me about your military experience.
- When and where do you/did you serve?
- What do you/did you do while in the service?
- How has military service affected you?

If your patient answers "Yes" to any of the following questions, ask:

"Can you tell me more about that?"

- Did you see combat, enemy fire, or casualties?
- Were you or a buddy wounded, injured, or hospitalized?
- Did you ever become ill while you were in the service?
- Were you a prisoner of war?

Compensation & Benefits

- Do you have a service-connected condition?
- Would you like assistance in filing for compensation for injuries/illnesses related to your service?

Call VBA at 1-800-827-1000

Sexual Harassment, Assault, and Trauma

- Have you ever experienced physical, emotional, or sexual harassment or trauma?
- Is this past experience causing you problems now?
- Do you want a referral?

Exposure Concerns

What... were you exposed to?

Chemical (pollution, solvents, etc.)

Biological (infectious disease)

Physical (radiation, heat, vibration, noise, etc.)

precautions were taken? (Avoidance, PPE, Treatment)

How... long was the exposure?

concerned are you about the exposure?

Where... were you exposed?

When... were you exposed?

Who... else may have been affected? Unit name, etc.

Hepatitis C Virus (HCV) Infection

- Have you ever had a blood transfusion?
- Have you ever injected drugs such as heroin or cocaine?

Living Situation

- Where do you live?Is your housing safe?
- Are you in any danger of losing your housing?
- Do you need assistance in caring for dependents?

Stress Reactions/Adjustment Problems

In your life, have you ever had an experience so horrible, frightening, or upsetting that, in the past month you...

- Have had nightmares about it or thought about it when you did not want to?
- Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?
- Were constantly on guard, watchful, or easily startled?
- Felt numb or detached from others, activities, or your surroundings?

American Academy of Nursing





Print your own cards



Did you experience enemy fire, see combat, or

Were you wounded, injured, or hospitalized? Did you participate in any experimental projects or tests? Were you exposed to noise, chemicals, gases, demolition of munitions, pesticides, or other

Have you ever used the VA for health care?

When was your last visit to the VA?

Do you have a service-connected disability or condition?

Do you have a VA primary care provider?

American Academy of Nursing

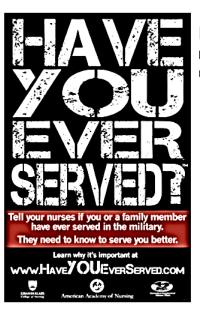
hazardous substances?

CLINICIAN POCKET CARD

Carry the reference pocket card with you.

CONTACT US TO USE IN YOUR HOSPITAL OR CLINIC

OFFER FOR STATE VA DIRECTORS



POSTER

Post this up in your waiting rooms or most visible areas.

Tabloid size (PDF)



PATIENT REMINDER CARD

Give this card to your patients to remind them about their VA benefits and resources.

Resources for Veterans and Professionals

- √ va.gov websites
- ✓ Your state's department of veterans affairs.
- Veterans' support and access groups. (Access through search engines, Wikipedia, etc.)
- National Resource Directory. (nrd.gov)
- Commercial websites. (military.com)











Expanded Role for Community Medical Providers

- Expected downsizing of active duty military will create a larger veteran population.
- Increased out-sourcing?
- The Affordable Care Act meant that more veterans will have comprehensive health insurance through employers and may not use their VA benefits. Future status ???





Government Assistance for Vets

TRICARE: Is Affordable Care Act compliant.

CHAMPVA: For dependents of 100 percent disabled.

A&A (Veterans Pension): Aid and Assistance Low Income Vets: Housebound, Assisted Living, Nursing Home

Recommend that veterans navigate the system with help from a state VA representative or a specialized veterans' advocate group!!

They should NOT try to go it alone.

Questions Comments Suggestions??





Please fill out evaluation forms before exiting the room.

Additional info: www.JLBMD.com