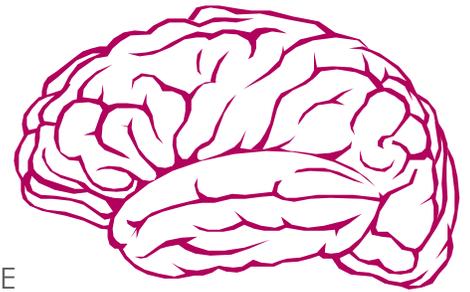


TBI Updates

TRAUMATIC BRAIN INJURY MODEL SYSTEM
UNIVERSITY OF WASHINGTON
DEPARTMENT OF REHABILITATION MEDICINE



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Overcoming Barriers to Exercise. By Denise Hansen

When the initial motivation to exercise wears down, the hard work to maintain the routine begins. Those of us plagued with TBI and/or permanent and debilitating physical injuries face the normal, yet legitimate excuses which inevitably interrupt even the healthiest of athletes. Our rationalizations to skip exercise are further encouraged by compromised cognitive function, the extra time and drain it takes to finish normal daily tasks, or the additional rest we may need just to persevere through a day. We can rarely rely on a predictable routine which healthy folks can take for granted. With TBI, physical and brain fatigue is higher and organic changes in the brain may effect motivation. Negotiating the hindrances of physical balance, coordination, fear, pain, and disabilities heighten the exercise effort. Exercise feels like one more undertaking in an already difficult-to-manage day. The positive message I bring, is that despite the hardships and resultant avoidances, you can and must find a way to get regular exercise. The cognitive, emotional and physical benefits, as described in the previous newsletter, have the power to change you. It won't rid you of your injuries, but it most certainly will enable you to better cope and live more productively. The following gives a structure for creating a plan to insure your success. Once you identify your specific barriers to exercise, and realize that these are simply problems to be solved, you can begin and sustain a life changing program for health. Begin with the premise that there is no such thing as "just do it" and get rid of your judgments resulting from erroneous ideas that there is a right or wrong way to exercise. Keep in mind that remaining motivated and committed to an exercise routine takes planning and practicing new skills. It requires that you change pre-accident attitudes and expectations. The barriers are real, don't discount them. They will always call to you, but with this approach you can outsmart any barrier and reap the endless benefits from your commitment to exercise.

Identifying the Benefits and Barriers:

Make a list of the pros and cons of exercise. How will you benefit from exercise? Remind yourself of these benefits when you need motivation for the times you will want to skip it for the day. Consider what will happen if you don't exercise – gain weight, think less clearly, depression and self criticism - but also be aware of what you may have to give up to exercise – television, an extra hour of sleep.

Identify your barriers. *Barriers can come in the form of people, situations, and emotions. Brainstorm and create plans to break through the barriers using countering positive messages and alternatives. Don't let barriers derail you. If you don't have an hour for a walk, break it up into a few 15 minute walks. If you feel too tired, make a commitment to walk just to the corner.*

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Research Corner

Powell, J.M., PhD, OT, Temkin, N.R., PhD, Machamer, J.E. MA, & Dikmen, S.S. PhD. Gaining Insight into Patients' Perspectives on Participation in Home Management Activities Following Traumatic Brain Injury. Accepted for publication in The American Journal of Occupational Therapy. Expected publication date Spring 2007

This study looked at changes in home management activities (such as cooking, cleaning, laundry) following traumatic brain injury. 164 people who had been rehabilitation inpatients took part in the study. The average age was 35 years. Just over three-fourths of the participants were male. The severity of brain injury ranged from moderate to severe.

Over half of the people had more difficulty and/or needed more assistance with home management at 1 year after injury compared to how they were doing before being injured. Older adults and people with more cognitive difficulties were especially likely to have problems. Some people completely stopped doing some tasks around the home they had done before being injured. The activities that were discontinued the most were yard care, child care, and car care. There were also people who had not been doing some common household tasks before injury. For example, about a fourth of people had not cooked or done laundry regularly.

This study found that home management activities are challenging for many individuals with TBI. The study also showed that it is important for rehabilitation professionals to know about each person's performance of home management activities before injury. People who are not experienced with household tasks may need more or different types of help to learn how to do these tasks after injury.

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The bottom line is: if you want to attain the benefits you will have to exercise! There is no magical alternative which would allow you to skip the exercise yet end up with a strong, fit body and mind.

Set Goals and Make Plans to Achieve Them:

Make goals specific and measurable. How will you know if you are successful? Instead of "I'll start exercising more," say, "I'll walk for 30 minutes, 3 times per week on Mon., Wed., Fri., at 10:00 am." "I will lay my exercise clothes on the floor next to the bed as a reminder." I've actually worn exercise clothes to bed. This tactic can work for those of us who can barely open their eyes in the morning.

Make goals realistic, and create incremental plans to reach your goals. First, give up trying to square the wheel. Adjust your pre accident beliefs and expectations as these will reduce your motivation. Realize and tolerate your limitations to avoid sabotaging your efforts with frustration and discouragement. Don't set yourself up for failure with plans that are too demanding or physically difficult. Instead, build on your new strengths. Adapt to new activities or a slower pace of performance.

Build in flexibility and creative back up plans. If you missed your scheduled time, have another plan rather than avoiding your commitment altogether. So, maybe it's not the 30 minutes you had planned but you can still achieve the goal even if something gets in the way. Get rid of your judgments and allow yourself credit for doing something, even if all you end up with is 15 minutes. Some exercise is better than none.

Accountability and Support

Track and evaluate your progress. Tracking will allow you to measure progress and celebrate successes.

Seek support. Resist the urge to rely on will power and self control or believe that discipline will magically appear to force you on track. Seek support and accountability from family and friends. Tell someone about your goals. Arrange to meet a friend for a walk.

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Reward yourself for short term and long term success. As you begin to practice new behaviors, don't forget to celebrate your successes.

Rewards can make you feel great and keep you motivated.

Relapse and set-backs. Avoid "all or nothing" thinking. Give yourself credit for the changes you've made, however small. It is normal to experience setbacks. Don't give up or beat yourself up. Learn from mistakes and revise your plans and strategies. What worked? What didn't work? What do you need to do differently next time? Renew your commitment and get back at it! And by all means, get rid of your judgments about what you think you should have done.

When motivation wanes. Remember the benefits. Ask yourself "How will I feel if I do it?" "How will I feel if I don't do it?" If necessary, set smaller goals until you get yourself revved up again.

Increase daily activities. Bits and pieces add up over time. Fit in exercise into your daily routine. Park your car further away, walk to do errands, get off the bus a few stops earlier, take stairs instead of elevators.

By letting these benchmarks work for you, you can achieve your exercise and fitness goals. Keep your eyes on where you want to be, and allow your body – with these suggestions guiding you – to lead the way.

International Conference on Vocational Outcomes in Traumatic Brain Injury

May 24 – 26, 2007

Vancouver, BC Canada

The UW TBI Model Systems is proud to again be a co-sponsor of the Second International Conference on Vocational Outcomes in TBI next Spring in Vancouver Canada. It is being housed on the University of British Columbia campus with an international array of outstanding researchers and speakers in the field to include Drs. Paul Wehan, Jeff Kreutzer, Nate Zasler, Paul Deutsch, and others. This is a great opportunity to participate at a very high quality program at reasonable rates given the UBC setting. Pre-conference workshops, presentations and panel discussions will focus solely on vocational outcomes and highlight programs & interventions that are proven to be successful in getting people back into the workforce. Now is the time to consider your paper and/or symposium submissions. Please contact Bob Fraser locally for more info. Attendance is anticipated at about 400, doubling the first conference participation. Continuing education is available for most allied health specialties (contact rfraser@u.washington.edu) or visit the conference website for more information: <http://www.tbicvancouver.com>

Research Volunteers Needed

6 MONTHS LEFT!!!

The Effect of Community-Based Exercise on Symptoms of Depression in Persons with TBI study is examining the effects of aerobic exercise on depression and anxiety in persons who have had a mild to moderate TBI in the previous 6 months - 5 years. The study offers a supervised 10-week exercise program to participants along with education and motivational components. If you are interested in participating in the study, or for more information, contact Aaron at 206-731-5196.

Videoconference Tapes on Sale!

The Fall 2006 Session, Pediatric TBI, is now on sale through the National Clearinghouse of Rehabilitation Training Materials (NCRTM). Please contact Zan Merrill
NCRTM
6524 Old Main Hill
Logan, UT 84322-6524
Toll free: 866-821-5355

Fall Sports: Discussion of Concussion

Along with the cheers and excitement of football, hockey, fall soccer, and snowboarding season comes the dark cloud of sports-related concussion. What is a concussion? The American Academy of Neurology defines it as an “alteration of mental status due to biomechanical forces affecting the brain.” That means a ding to the noggin or having your bell rung. Concussion may or may not be associated with an actual loss of consciousness. People receiving a concussion may just be “out of it”, or be functioning in a state of post-traumatic amnesia (that is, forgetting on a minute-to-minute basis).

Most single concussions do not result in long-lasting injury or symptoms. Within three months after concussions, virtually everyone recovers and is symptom-free. The big concern among athletes in particular is what happens when the brain has repeated “minor” injuries. How common are concussions? Researchers found that more than 5% of all injuries in high-school sports could be classified as mild traumatic brain injuries. Sports most associated with concussions were football (63.4%), wrestling (10.5%), girls’ and boys’ soccer (6.2% and 5.7%).

Soccer

Probably the most common reason for symptomatic concussion in soccer is head-to-head collision. A big concern at present is some reports that imply that repeated “heading” of the ball (hitting the ball with the head) might result in eventual problems. Suggestions for lowering the risk of concussion in soccer players include:

- Restricting the age for heading to older players
- Teaching correct heading techniques
- Giving higher level players a mental skills test before the season starts so that subtle mental changes can be evaluated during the season
- Educating players, coaches, and parents about concussion and taking them seriously.

Football

About 1 in 3 college football players have concussions during a season. Players with repeated concussions had a higher occurrence of learning disabilities than did players without a history of concussion. Studies performed by the National Football League have indicated that most concussions result from helmet-to-helmet hits. What to do?

- Review rules in amateur leagues about helmet hits
- Put pressure on helmet manufacturers to create better helmets
- Again, giving higher level players a mental skills test before the season starts so that subtle mental changes can be evaluated during the season
- Educate players, coaches, and parents about concussion and taking them seriously

Are we suggesting that people, especially children, not participate in these sports? Of course not! However, we are suggesting that consumers become more aware and support efforts to make these sports safer without affecting the nature of the sport itself. Here are two helpful website:

CDC pamphlet about MTBI: http://www.cdc.gov/ncipc/pub-res/tbi_toolkit/patients/preventing.htm

Brain Injury Association of USA has a downloadable pamphlet about sport-related injuries and prevention <http://www.biausa.org/word.files.to.pdf/good.pdfs/2002.Fact.Sheet.sports.and.rec.pdf>

If you would like to receive this newsletter by email contact us at:

uwtbi@u.washington.edu

Or visit our website at:

www.depts.washington.edu/rehab/tbi/
