

# TBI Updates

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



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## A New Treatment for Traumatic Brain Injury Irritability

Irritability and aggression are problems that greatly affect the lives of many people living with traumatic brain injury (TBI) and their families. There has been little research to help guide physicians on how to best treat these challenging behaviors. Recent studies suggest that amantadine might have a new use in helping people with TBI. Amantadine is a medication that has been used for decades



to treat Parkinson's disease, prevent viral infections, and promote recovery from coma after brain injury. Flora Hammond, MD, project director of the Carolinas Rehabilitation TBI Model System, recently completed a 76-person

pilot study that found amantadine reduced irritability and aggression in people suffering from brain injuries.

### Amantadine and Post-TBI Irritability and Aggression Study

Based on the encouraging pilot data, a larger study with several study sites across the United States is being conducted to confirm these findings that amantadine improves irritability and aggression often associated with brain injuries. The study is funded by a \$4.2 million grant from

the National Institute on Disability and Rehabilitation Research.

"Many individuals with TBI and their families struggle with irritability and aggression that impacts their day-to-day life through changes in relationships and difficulties at work," says Dr. Hammond. "A need for assistance for these two common problems is needed. With this study we hope to verify our findings and help individuals and caregivers cope with the behavioral effects of brain injury."

People who might be eligible for the study are:

- Age 16 to 65 years
- Brain injury that resulted from an external force (traumatic)
- The TBI occurred at least six-months prior to starting the study

## In This Issue

Irritability & Aggression .....	1-3
TBI Support Group.....	2
Who's Who .....	2
What's Hot .....	3
Comic.....	3
Reducing Irritability .....	4
Art Show: Recreating Me .....	5
TBI Support Group.....	5

# Who's Who



## Silas James

Silas recently joined the TBI Model System Study as a part time research assistant helping to maintain contact with people, locate patients that we have lost connection with, and complete telephone interviews.

In early 2008, Silas graduated from The Evergreen State College with a B.A. in Liberal Arts. While at Evergreen, he focused his studies on Humanities and Writing. During his last year at Evergreen, Silas was an intern in Governor Gregoire's communications office. He continues to avidly follow politics.

Before going to Evergreen Silas earned a degree in Opticianry from Seattle Central Community College; for five years he sold eyeglasses and worked as a contact lens technician.

Silas has volunteered extensively at Children's Hospital. Among other things he has volunteered as a swim lesson instructor and an arts and crafts counselor at the Stanley Stamm Children's Hospital Summer Camp. Silas is also a traumatic brain injury survivor.

## Anger & Irritability Study cntd.



- Irritability that is either new or worse than before the TBI
- Study participation lasts 90 days. Half of the study participants will receive amantadine, and half will receive a placebo during the first 60 days, followed by 30 days on amantadine. So, all the study participants will take amantadine at some time during the study to help them decide if they may want to take the medication after the study.

*Continued on the next page*



## Traumatic Brain Injury Support Group

**Who:** For people who have had traumatic brain injuries (TBIs). Family, friends and caregivers welcome.

**When:** First Thursday of every month, 12-1 p.m.

**Where:** Harborview Medical Center - Maleng Building, Room MB 112.

**What:** Each meeting will consist of a brief presentation on a selected topic followed by an open discussion and problem solving.

**Why:** To offer opportunities to share experiences, coping strategies, and success stories

For more information contact Shannon McKeever 744-8139



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The effectiveness of the treatment will be determined by questionnaires completed by the person with brain injury and an observer (friend or family member).

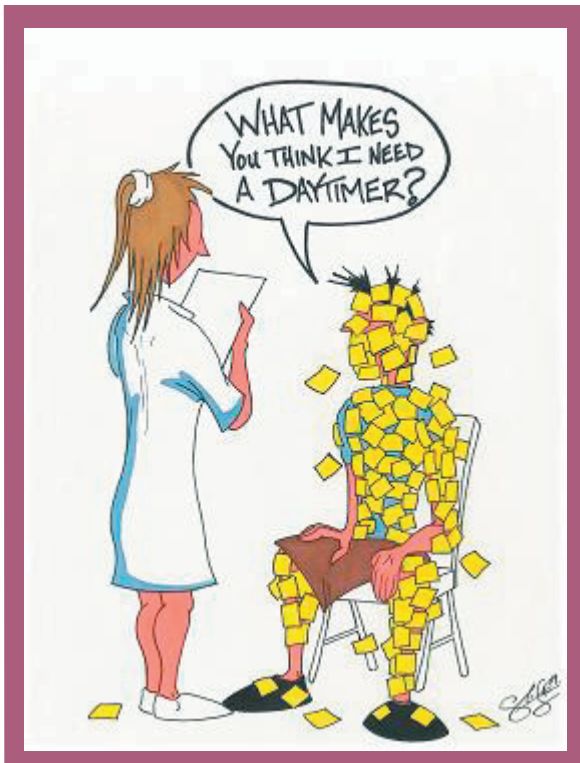
The study involves 3 visits to the study site to complete the study questionnaires and talk to the study doctor. All study visits and treatment are free of charge, and a stipend is provided at each scheduled visit.

If interested in learning about participation in this study call the center closest to you....

### Study Sites and Contact Information:

Carolinas Rehabilitation, Charlotte, NC: Peggy Cook 704-355-4824

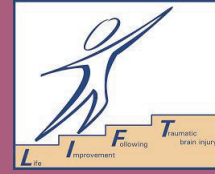
University of Washington, Seattle, WA: Aaron



by Rob Shively

# What's Hot

## Life Improvement Following Traumatic Brain Injury (LIFT)



After a Traumatic Brain Injury (TBI), many people experience symptoms including low mood, poor energy, loss of interest in usual activities, and changes in appetite and sleep.

LIFT uses a particular approach to education and counseling, called Cognitive Behavioral Therapy (CBT). This type of counseling has been used to effectively treat these symptoms with people who have not had a brain injury.

LIFT is investigating whether these same strategies can also help people who have had a TBI. Researchers hope to find out if counseling can help people with a TBI get back to activities they enjoy, develop positive mental habits, and improve overall quality of life.

Eligible participants will be enrolled in the study for 16 weeks, with a follow-up phone call 8 weeks later. Participants may receive 12 sessions of in-person CBT at Harborview or UW Medical Center or 12 sessions of telephone CBT. A third group of participants will not receive counseling from the study. Participants will be paid up to \$100 for their time and participation.

For questions about LIFT, or to be considered for this study, please contact Kenneth Marshall at (206) 744-3609 or 1-866-577-1925.

## Ideas to Reduce Irritability

### **Clear Communication**

- Take time to listen and understand.
- Explain yourself clearly.
- Hold conversations in a quiet environment.
- Make notes.

### **Talk to Your Doctor**

- Discuss medication side effects and medical problems that can cause irritability and aggression, such as depression, sleep disturbance, fatigue, cognitive impairment, or neuroendocrine dysfunction.
- Request advice on medications that might help with irritability and aggression such as: Amantadine, beta-blockers, anticonvulsants, anticholinesterase inhibitors, and methylphenidate.

### **Limit Stressful and Irritating Situations**

- Recognize and avoid situations that trigger your irritability or aggression.
- Address financial concerns.
- Use strategies to minimize memory and cognitive difficulties.
- Develop daily routines to provide structure.
- Avoid over scheduling.
- Prioritize activities.
- Take breaks when you are tired.

### **Use Behavior Management Strategies**

- Find alternative ways to express and manage frustrations and stress. For example, talk it out, exercise, breathing strategies.
- Step away from the situation.
- Recognize your abilities and limitations.
- Put irritating events into perspective.
- Do not dwell on the negative. Focus on the positive.

### **Decrease Boredom and Increase Independence**

- Resume activities such as: driving, exercise, working and hobbies when safe to do so.
- Participate in volunteer work.
- Involve yourself in personal and family decisions.
- Reduce supervision as appropriate.

### **Use Available Supports**

- Consider professional counseling to help in adjusting to life changes and stresses.
- Contact the UW TBI Model System 206-616-0334.

Information provided by Carolinas Rehabilitation.

## TBI Art Show

Last July was the 1st TBI Art Show, *Recreating Me: Exploring & Healing through Artistic Expression*. We are pleased that it was such a great success and a beautiful event where art and stories were shared and connections and friendships were made.

We are excited to say that UW TBIMS has partnered with the Brain Injury Association of Washington to bring you the the 2nd annual TBI Art Show, July 6th-11th, 2010 at the Burke Museum.

To see the art and learn about the artists from the 2009 show visit our website <http://depts.washington.edu/uwtbi/Education/artshow.htm> where you will find links to a slideshow of the art, a show program with artists' bios, and a KPLU interview with one of our featured artists.



*Composition #3 by Hillary Bassett-Ross*

You can follow the TBI Art Show on Facebook. Search for our page "TBI Art Show."

## TBI Forum Series

The UW Traumatic Brain Injury Model System invites you to join its quarterly information and discussion group.

At the most recent forum, "Finding Fun In Your Free Time" a panel including Michael Figueroa Program Coordinator for Seattle Parks Specialized Programs, John Stevenson from Outdoors For All, and Patricia Gohl a Recreational Therapist at Harborview Medical Center discussed recreational activities after Traumatic Brain Injury.

Have you wondered what activities you could get involved in? Are you interested in sports such as hiking, kayaking, soccer, skiing, or cooking classes or exploring your creative side. There are a number of opportunities for fun open to you! Do not hesitate to explore these websites for more information.

-[www.seattleadaptivesports.org](http://www.seattleadaptivesports.org)  
-[www.outdoorsforall.org](http://www.outdoorsforall.org)  
-<http://www.seattle.gov/Parks/SpecialPops/index.htm>

Tami English Executive Director of Seattle Adaptive Sports presented on the Paralympics. For more information please visit [www.seattleadaptivesports.org](http://www.seattleadaptivesports.org).

The next TBI Forum

"Getting Around Town: Transportation Solutions"

Will be **Wednesday, January 20th, 2010, 7:00pm** at the South Campus Center. Please join us.

For more information, including driving and parking directions, call Aaron Scrol 206-616-0334 ([ascrol@u.washington.edu](mailto:ascrol@u.washington.edu)) or visit our website at [www.tbi.washington.edu](http://www.tbi.washington.edu).

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