NEWS AND INFORMATION FROM THE MOSSREHAB TRAUMATIC BRAIN INJURY MODEL SYSTEM

Brain-e-News

RESOURCES

MOSS REHABILTATION RESEARCH INSTITUTE www.mrrl.org

MOSSREHAB RESOURCE NET www.mossresourcenet.org

THE CENTER FOR OUTCOME MEASUREMENT IN BRAIN INJURY www.tblms.org/combl

BRAIN INJURY ASSOCIATION OF AMERICA WWW.BIAUSA.ORG

BRAIN INJURY RESOURCE LINE 1-800-444-6443

BRAIN INJURY ASSOCIATION OF PENNSYLVANIA www.blapa.org 1-866-635-7097

BRAIN INJURY ALLIANCE OF NEW JERSEY www.blanj.org 1-732-745-0200 FAMILY HELPLINE 1-800-669-4323

BRAIN INJURY ASSOCIATION OF DELAWARE www.blausa.org/Delaware/bla.htm 1-800-411-0505

PENNSYLVANIA DEPARTMENT OF HEALTH BRAIN INJURY HELPLINE 1-866-412-4755 TTY 1-877-232-7640

MODEL SYSTEM KNOWLEDGE TRANSLATION CENTER (MSKTC) www.msktc.org

www.Brainline.org

Living Well with Brain Injury Conference

On October 19th, 2019, the Moss TBI Model Systems and MossRehab co-hosted the *Living Well with Brain Injury* Conference, which marks the 5th TBI Model Systems Philadelphia area consumer conference. Over 250 conference goers enjoyed a day of lectures, workshops, networking and resourcesharing at the Pennsylvania Convention Center.

The program focused on all aspects of living well, with topics addressing the mind, body, and spirit. Sessions featured panel discussions, research findings, and practical advice from experts on these topics—individuals with personal experiences living with or caring for someone with brain injury, and experts on brain injury research and clinical care.

Kevin Pearce, champion snowboarder and subject of the 2013 documentary, *Crash Reel*, inspired the audience with a keynote address infused with humor, positivity, and his personal story of resilience after brain injury. (pictured here with Dr. Amanda Rabinowitz).





FALL 2019

In addition to learning about living well, conference goers participated in hands-on sessions in which they practiced yoga, tai chi, and mindfulness. Attendees also took advantage of the opportunity to express themselves creatively by creating masks that convey their experience living with brain injury. Mask making was facilitated by the Unmasking Brain Injury project, a brain injury awareness campaign cosponsored by Bryn Mawr Rehab Hospital and the Dana Jones Art Therapy Fund. The conference closed with an enjoyable performance by the Jazz Sanctuary.

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Consumer Conference (con't)

We would like to thank all involved in planning this inspiring event! The Advisory Committee was led by Moss TBIMS project director, Dr. Rabinowitz, and included Kevin Gallagher, Bridget Kaiser, Rock Allen, Melody Mendez and, representatives from MossRehab, Bancroft, Beechwood NeuroRehab, Bryn Mawr Rehab Hospital, Community Skills Program, Council on Brain Injury, Good Shepherd Penn Partners, Magee Rehabilitation Hospital, Mind Your Brain, ReMed, Success Rehabilitation and the Brain Injury Association of

Rehabilitation, and the Brain Injury Association of Pennsylvania.





Sleep Apnea

Sleep apnea is a disorder that involves brief periods of not breathing when the individual enters deeper sleep stages. When breathing stops, the individual becomes short of oxygen and partially wakes up again which causes them to resume breathing. However, these respiratory events disrupt deep sleep throughout the night, and this can cause daytime drowsiness, cognitive impairment, auto and work-related accidents, and increased blood pressure and risk of stroke and heart attack. In the general population, sleep apnea is most common in middle-aged men, particularly those who are overweight. We recently completed a multi-center study on sleep apnea after TBI, led by Risa Nakase-Richardson at the Tampa Veterans Administration Hospital, and funded by the Patient Centered Outcomes Research Institute (PCORI). In this study, patients in acute rehab following a moderate or severe TBI completed several sleep apnea risk questionnaires, and then participated in an overnight sleep study ("polysomnography") where their breathing and their sleep stages were measured by special equipment. Whereas less than a quarter of healthy individuals are thought to have sleep apnea, about 1/3 of TBI patients had moderate or severe sleep apnea and over 2/3 had at least mild sleep apnea. Many of the people with sleep apnea didn't fit the profile of middle-aged overweight men.

Sleep apnea is usually treated by wearing a pressurized breathing mask ("C-PAP") overnight while sleeping. Many healthy people have trouble sleeping with the mask, and it may be that individuals early after TBI may be even less tolerant of the mask. Therefore, the next steps in this research are to try to assess the benefits of early treatment of sleep apnea on cognitive recovery, and to find ways of treating sleep apnea that patients can tolerate.

Promoting Mental Health after TBI

Coping with mental health issues, like depression and anxiety, is among the most important concerns identified by people living with TBI and their families. A recent study completed here at the Moss TBIMS, led by Dr. Tessa Hart, evaluated a treatment for depression and/or anxiety in individuals with moderate to severe TBI using the "gold standard" method for evaluating treatments—a randomized controlled trial. The treatment in this study is based on Behavioral Activation (BA)—an intervention that focuses on increasing involvement in rewarding and pleasurable activities. Participants in the program were randomly assigned to receive either 1) a single session of BA, followed by 8 weeks of daily text messages to remind them of their individualized goals for taking part in more rewarding activities, or 2) a single session focused on the importance of motivation followed by 8 weeks of motivational text messages. Participants in both groups showed mild improvement in their mood at the end of the program. Those in the BA condition reported more exposure to environmental reward and greater productivity. Although the benefits of both treatments were modest, the results of this study suggest that BA was effective at increasing participation in rewarding activities, and the delivery of frequent text messages was a feasible and acceptable way of supporting treatment. The findings from this study have been published in the journal *Neuropsychological Rehabilitation*.

The Faces of the TBI Model System: Umi Venkatesan

The Moss TBIMS is delighted to welcome Dr. Umesh (Umi) Venkatesan, who recently accepted a position as Institute Scientist at MRRI. He comes to us from a post-doctoral fellowship in polytrauma/TBI rehabilitation at the Boston VA. He received his Ph.D. in clinical psychology from Penn State and completed his neuropsychology residency at Brown University's Alpert Medical School.

With over 10 years of experience studying TBI, his interests include using neuroimaging to understand how injury-related brain changes influence cognition. Since joining MRRI, he has begun contributing to a treatment study for depression and anxiety after TBI and a study examining how aging with TBI impacts health and brain function. In his spare time, Umi enjoys performing Indian classical dance and lighting up the stage at open mics and karaoke parties across the eastern seaboard.





EMPOWERMENT and SUPPORT GROUP INFORMATION

PENNSYLVANIA EMPOWERMENT GROUP

The Elkins Park Empowerment Group meets on the second Monday of each month from 5-6:30 at 60 Township Line Road, Elkins Park, PA 19027.

For more info, contact Debbi Eisen at 215-663 -6857 or Jessica Dzurinko 215-663-6785.

NEW JERSEY SUPPORT GROUP

The New Jersey Support Group meets *most* months on the fourth Tuesday from 3:00-4:00 at 135 S. Broad Street, Woodbury NJ 08096.

For more info, contact Jazmine Tooles at 856-853-9900. MossRehab at Elkins Park Hospital 50 E. Township Line Road Elkins Park, PA 19027 ATTN: Lauren McLaughlin



The Moss TBI Model System

The National Institute on Disability, Independent Living and Rehabilitation Research has designated MossRehab as a Model System for traumatic brain injury since 1997. The TBI Model System program seeks to improve lives by creating and disseminating new knowledge about the course, treatment and outcomes of TBI.

