What is Traumatic Brain Injury?

Traumatic brain injury (TBI) is a blow or jolt to the head that disrupts the function of the brain. It is important to know that not all blows or jolts to the head result in a TBI. The severity of the TBI is determined at the time of injury and may be classified as mild, moderate, severe or penetrating.

Common causes of TBI in the military include blast exposures, bullets or fragments, falls, motor vehicle accidents, or other (blunt objects). Common physical symptoms in mild TBI (mTBI) are headache, dizziness, balance problems, nausea/vomiting, fatigue, visual disturbances, light sensitivity, and/or ringing in the ears. Cognitive deficits include slowed thinking, poor concentration, memory problems and/or difficulty finding words. Emotional symptoms include anxiety, depression, irritability or mood swings. Concussion is another word for a mild TBI. mTBI is not always obvious, and sometimes has a delayed presentation. It is the most common form of TBI in the military population. Moderate TBI often requires hospitalization with a transition to rehabilitation focused on return to duty or community reentry. Severe or penetrating TBI is an obvious injury that requires hospitalization and intensive rehabilitation and has potential for long-term care needs for the Service member.

How does this issue affect wounded warriors and their families?

The effect of moderate to severe TBI can include changes in motor skills and balance, hearing, vision, speech, taste and smell, tremors and spasticity, fatigue and weakness, and seizures. Cognitive effects can include changes in memory, attention, concentration, processing, receptive and expressive language, executive functioning skills and self-perception. Personality and behavioral changes can include depression, difficulty with social skills, mood swings, emotional dyscontrol, inappropriate behavior, inability to inhibit remarks, inability to recognize social cues, problems with initiation, reduced self-esteem, and difficulty maintaining relationships or forming new relationships. All of these possible symptoms and changes can cause disruptions in school, work, and home environments often leading to marital and family separations, substance abuse, and engagement in risky behaviors resulting in judicial involvement.

Families often become care-givers for their loved one with TBI and struggle with resources to address their needs. These physical, cognitive and personality/behavioral changes are of particular concern during periods of transition, such as moving from in-patient to out-patient status, returning to duty, etc.

How can knowledge of this issue help Recovery Care Coordinators?

Wounded warriors with TBI require identification, evaluation and support throughout the recovery process from injury to return to duty and/or reintegration into the community. Because of their access to the multi-disciplinary Recovery Team, Recovery Care Coordinators (RCCs) are well-positioned to support and connect the Service member to necessary care and resources. RCCs with knowledge of the effects of TBI can serve to identify Service members who may have sustained mTBI and connect them with the appropriate clinical care for TBI specific services. They can also support recovering Service members by providing increased contact during transitions from one level of care to the next, as this is when the Service member and families are most vulnerable. They can monitor missed medical, case management and/or support appointments; early discharge from medical care or case management due to behavioral problems; psychological or judicial involvement; anxiety; depression; irritability; mood swings; poor impulse control; substance abuse; marital and relationship problems; and trouble at work and provide early intervention and support services.

Where can I find more information?

DVBIC has a national network of programs providing subject matter experts on the continuum of care and recovery trajectory for TBI, educational resources and clinical care for recovering Service members, veterans and families dealing with TBI. As the Office of Responsibility for the surveillance of the incidence and prevalence of TBI in the DoD, DVBIC follows up with all symptomatic Service members and veterans with a diagnosis of TBI. More information can be accessed through the Web site at www.dvbic.org. TBI: A Guide for Family Caregivers of Service Members and Veterans is now available for caregivers of Service members with moderate to severe TBI.