Michael E. DeBakey Veterans Affairs Medical Center

VA Star

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Beaumont VA Outpatient Clinic • Charles Wilson VA Outpatient Clinic, Lufkin • Conroe VA Outpatient Clinic
Galveston Island VA Outpatient Clinic • Richmond VA Outpatient Clinic

Houston VA Docs Step In and Spare Veteran Grueling and Unnecessary, Medical Treatment

HOUSTON – Health care providers from the Oncology, Surgical, and Anesthesiology Departments at the Michael E. DeBakey VA Medical Center (MEDVAMC) used a multi-disciplinary approach to successfully treat a 62-year-old Army Veteran from Fulshear, Tx. suffering from colorectal cancer.

Cancer of the colon or rectum is also called colorectal cancer. In the United States, it is the third most common cancer in men and women. "Peanuts" creator Charles Schulz, movie star Audrey Hepburn, film critic Joel Siegel, and music soul legend Teddy Pendergrass all died of colorectal cancer.

When Veteran Michael Flynn visited the MEDVAMC, he had already endured an extensive evaluation at a non-VA medical institute in the United States. The doctors there recommended a month

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Memorial Day Service

May 31, 2010, 9:30 a.m.
Houston VA National Cemetery
281-447-8686, ext. 205

Michael E. DeBakey VA Medical Center strives to provide high quality health care for women Veterans.

Patriotism Knows No Gender

HOUSTON - The Women's Health Center at the Michael E. DeBakey VA Medical Center (MEDVAMC) opened more than 14 years ago, on April 8, 1996. This "one stop shop" for women includes routine primary care, gynecological services, patient and family education, and preventive medicine. In addition, the MEDVAMC Pharmacy maintains a full line of gender specific medications for women.

"I have been going to the Women's Health Center since 2001 and I'm very pleased with the service," said Air Force Veteran Alfreda Clay. "The staff is very pleasant, the waiting area is really relaxing, and the doctors I've seen have been very patient when I'm asking questions. I'm proud to be a Veteran and to have served my country."

Since the birth of this Nation, women have played key roles in serving our country during times of conflict and in times of peace. Women Veterans are one of the fastest growing segments of the Veteran population. They comprise 7.5 percent of the total Veteran population and nearly 5.5 percent of all Veterans who use VA health care services. VA estimates women Veterans will constitute 10 percent of the Veteran population by 2020 and 9.5 percent of VA patients.

Currently, more than 8,000 women Veterans receive health care services at the DeBakey VA Women's Health Center. "We anticipate enrolling, through outreach efforts, an additional 6,000 women Veterans," said Pamela Swope, FNP, CRNP-BC, Women Veterans Health Program manager.

(See Women Veterans on page 5)

Photo by Vera Burke, Public Affairs Specialist

Gynecology Clinic Coordinator Maria Lee, R.N. discusses several health care options with Army Veteran Rosemary Mark. Services at the Women's Health Center are tailor-made for the unique health care needs of women Veterans.

A Ribbon Cutting Ceremony will take place on Friday, May 14, 2010 at 10 a.m.

New Richmond VA Clinic Opens May 14

Photo by Vera Burke, Public Affairs Specialist

The new Richmond VA Outpatient Clinic, a nearly 10,000 square-foot facility, will provide primary health care, mental health care, laboratory, and X-ray services to Veterans in the Richmond/Rosenberg area.

HOUSTON - The Michael E. DeBakey VA Medical Center (MEDVAMC) will open a new VA outpatient clinic in Richmond on Friday, May 14, 2010. It will be located at 22001 Southwest Freeway, Suite 200, Richmond, Tx. 77469. This is on the second floor of the professional building near OakBend Medical Center, close to U.S. Route 59.

A Ribbon Cutting Ceremony will take place at 10 a.m. that day. The event is open to the public, tours will be available, and refreshments will be served. Seating will be limited so please be prepared to stand during the short ceremony.

The nearly 10,000 square-foot facility will provide primary health care, mental health care, laboratory, and X-ray services to Veterans in the Richmond/Rosenberg area. Emergency medication needs will be met on a local contract basis.

Veterans interested in transferring their care to the new Richmond VA Outpatient Clinic should speak with their

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Veterans with Traumatic Brain Injury Find Botox a Surprising Answer for Painful Muscle Spasms

HOUSTON - Botox is the brand name for therapeutic botulinum toxin, an ultra purified neurotoxin. Most people know Botox as a cosmetic treatment for facial wrinkles and aging of the skin; however, this special medication is also used by health care providers to treat increased muscle stiffness in adults with upper and lower limb spasticity.

Spasticity is a debilitating condition impacting many Veterans following a spinal cord or traumatic brain injury. An estimated 300,000 Veterans have sustained some type of traumatic brain injury from explosions and blasts in the wars in Iraq and Afghanistan.

Although not a life-threatening condition, limb spasticity can be severely debilitating and painful, producing disfiguring muscle contractions that can result in stiff, tight muscles. This stiffness hinders a patient's ability to perform simple tasks, such as dressing or bathing. It can also hinder a patient's ability to walk, and often leaves the patient bedridden and dependent on a caregiver to help with simple activities.

When injected into muscles that are in spasm (also known as involuntary contractions), botulinum toxin is a complex protein that binds to the nerves and prevents the release of a neurochemical, acetylcholine. This blocking action reduces the spasm of the muscles and produces a temporary paralysis of the nerve function. The medical term for the Botox injections is chemical denervation.

"The purpose of the procedure is to assist patients in facilitating their rehabilitation goals and to reduce the pain caused by intense spasms," said Stephanie Sneed, M.D., Polytrauma/Traumatic Brain Injury Program director.

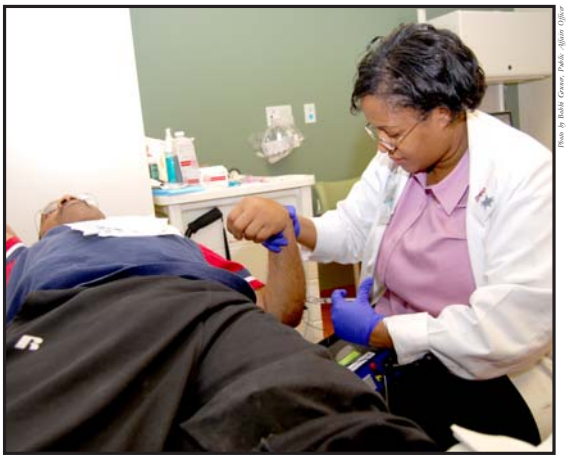


Photo by Bobbie Greene, Public Affairs Office

Stephanie Sneed, M.D., Polytrauma/Traumatic Brain Injury Program director injects Air Force Veteran James Cunningham, Jr. with Botox to treat muscle stiffness and spasticity in his arm muscles. "We find the use of Botox extremely helpful in improving a Veteran's quality of life," said Sneed.

"We find the use of Botox extremely helpful in improving a Veteran's quality of life."

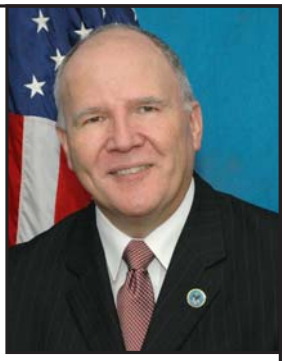
Sneed, together with fellow Physical Medicine and Rehabilitation Specialist Darlene Makulski, M.D., treat an average of 40 patients each month with the Botox medication. Patients may be injected in multiple sites depending on the location and intensity of their spasms and pain. Patients receive almost immediate relief from their painful spasms because the medication works within 48 to 72 hours and reaches its peak effect at one to four weeks.

In March, the U.S. Food and Drug Administration approved Botox to treat spasticity in the flexor muscles of the elbow, wrist, and fingers in adults.

"We strive to offer our Veterans the latest medical advances. Botox is just one tool of many that we use to treat our Veterans living with painful muscle spasms and other rehabilitation challenges," said Helene Henson, M.D., Rehabilitation Care Line director. ♦

A Word from the Director . . .

Veterans Courts Offer Heroes Second Chance



Adam C. Walmus, MA, MHA, FACHE
Medical Center Director

HOUSTON - The wars in Iraq and Afghanistan have inflicted many Veterans with injuries that are not as obvious as a missing limb. Multiple deployments have become a huge factor in the rise of post-traumatic stress disorder (PTSD) cases. Blasts from improvised explosive devices or rocket-propelled grenades can cause traumatic brain injuries (TBI) that might not surface for years.

Furthermore, technology has made it easier to stay in touch with home, so a soldier can suffer stress, anxiety, and depression caused by marital troubles, issues with children, or a parent's illness in real time; all while trying to remain vigilant in a war zone.

Returning to the civilian world, it is not surprising that 10 percent of all adults arrested in 2009, according to the Department of Justice, had served in the military.

In fact, 300 Veterans are booked into the Harris County jail every month. That includes the second-largest number of Operation Enduring Freedom and Operation Iraqi Freedom Veterans in the country, second only to Los Angeles County.

Confronted by this reality, Judge Marc Carter of the 228th Criminal District Court teamed up with Houston State Senator Rodney Ellis, the Michael E. DeBakey VA Medical Center (MEDVAMC), and a number of local Veterans to create one of the country's first Veterans Treatment Courts. This court searches for alternatives to jail time for Veterans who commit non-violent criminal offenses. Moreover, the Veterans Treatment Court also serves as a way for the criminal-justice system to do its part in helping our Nation's Veterans overcome issues and obstacles in their lives.

At the MEDVAMC, Psychiatrist Andrea Stolar, Social Worker Lori Coonan, and their colleagues developed a rehabilitation program offering not just drug and alcohol treatment but care for medical problems like PTSD and TBI. The program is also designed to provide help with military benefits and, if needed, assistance with finding a place to live.

Depending on the case and their plea, Veterans who successfully complete the two-year program can have all charges expunged from their records.

We at the MEDVAMC serve as Veterans' advocates, not adversaries, and are extremely proud of our role in the Veterans Treatment Court. We realize that the men and women who serve their country make incredible sacrifices and may not always come home in the same mental, emotional, or physical condition in which they left. Because of their selfless actions, we are privileged to live in a free country. Thus, we owe each Veteran every opportunity to stabilize his or her life and rejoin our community. ♦

New Clinic in Richmond

(continued from page 1)

current VA primary health care provider during their next appointment or call the VA Network Telecare Center at 713-794-8985 or toll-free 1-800-639-5137.

The MEDVAMC also plans to open a new VA outpatient clinic in Lake Jackson this fall. Physical location information cannot be released until lease negotiations are finalized. It will be similar in size to the Richmond clinic and offer similar health care services.

The MEDVAMC also plans to reopen a VA outpatient clinic in the Galveston County mainland area in 2010. Several properties are currently being considered for lease.

New VA outpatient clinics are also planned for Katy and Tomball. They will be much larger in size than the ones in Richmond and Lake Jackson; approximately 30,000 square feet each. Because this exceeds local contracting authority, the VA Real Property Office in Washington, D.C. is handling the contracting process. These clinics are expected to open in 36 to 48 months.

All of the planned VA outpatient clinics will be staffed by VA personnel.

The MEDVAMC currently operates outpatient clinics in Beaumont, Conroe, Galveston, and Lufkin. In fiscal year 2009, there were 815,695 outpatient visits at the Houston facility, 55,295 in Beaumont, 34,142 in Conroe, 18,860 in Galveston, and 45,054 in Lufkin.♦

Don't Be A No-Show.

A Veteran who does not arrive for his or her VA appointment is a "No Show." Please call the Appointment Center at 713-794-8985 or toll-free 1-800-639-5137 at least 24 hours before to cancel or reschedule your appointment so it may be used by another Veteran.

Houston VA Surgeons Step In and Spare Veteran Grueling and Unnecessary Medical Treatment

(continued from page 1)

and a half of pre-operative combination of chemo and radiation therapies, followed by possible surgical resection.

"That sounded like a tough road to go down so my family and I wanted a second opinion," said Flynn. "Because I'm a Veteran, I had an alternative most people don't — the VA Medical Center in Houston."

"Mr. Flynn was referred to me for a second opinion early this year," said Avo Artinyan, M.D., Operative Care Line staff surgeon. "I reviewed the results from the other medical facility and recommended laparoscopic surgery and possible post-operative therapy, if necessary. I believed this course of action might spare him unnecessary treatment."

Weighing his options, Flynn decided to have his medical treatment at the MEDVAMC. He underwent laparoscopic surgery to remove the cancerous section of his bowel.

Laparoscopic or "minimally invasive" surgery is a specialized technique for performing surgery. In the past, this technique was commonly used for gynecologic surgery and for gall bladder surgery. Over the last 10 years the use of this technique has expanded into intestinal surgery.

In traditional "open" surgery the surgeon uses a single incision to enter into the abdomen. Laparoscopic surgery uses several 0.5-1 centimeter incisions. Each incision is called a "port."

At each port, a tubular instrument known as a trochar is inserted. Specialized instruments and a special camera known as a laparoscope are passed through the trochars during the procedure.

At the beginning of the procedure, the abdomen is inflated with carbon dioxide gas to provide a working and viewing space for the surgeon. The laparoscope transmits images from the abdominal cavity to high-resolution video monitors in the operating room.

During the operation the surgeon watches detailed images of the abdomen on the monitor. This system allows the surgeon to perform the same operations as traditional surgery but with smaller incisions.

Being a minimally invasive procedure with faster recovery period and less risk of infection, Flynn left the hospital after only a few days. Today, post-operative tests confirm he is cancer-free.

"By closely looking at his staging studies and the existing evidence for rectal cancer, we made an individualized treatment plan for Mr. Flynn that spared him a lot of grief," said Daniel Albo, M.D., Ph.D., Operating Room Affairs associate care line executive and Colorectal Cancer Center director.

"I am glad I chose the Michael E. DeBakey VA Medical Center for my health care. I trusted my doctors and nurses; it made the decision to go ahead with the operation much easier," said Flynn. "Today I'm feeling great and getting back to doing the things I enjoy."♦

Photo by Bobbi Gomez, Public Affairs Office

When Army Veteran Michael Flynn visited the Michael E. DeBakey VA Medical Center, he had already endured an extensive evaluation at a non-VA medical institute in the United States. "Because I'm a Veteran, I had an alternative [for a second opinion] most people don't — the VA Medical Center in Houston," said Flynn (left) with Avo Artinyan, M.D., Operative Care Line staff surgeon.

VA Focuses on New Agent Orange Presumptive Illnesses

WASHINGTON, D.C. - Recently, the VA announced an aggressive new initiative to solicit private-sector input on a proposed "fast track" Veterans' claims process for service-connected presumptive illnesses due to Agent Orange exposure during the Vietnam War.

Over the next two years, about 200,000 Veterans are expected to file disability compensation claims under an historic expansion of three new presumptive illnesses announced last year. They affect Veterans who have Parkinson's disease, ischemic heart disease, and B-cell leukemias.

In practical terms, Veterans who served in Vietnam during the war and who have one of the illnesses covered by the "presumption of service connection" do not have to prove an association between their medical problems and military service. This "presumption" makes it easier for Vietnam Veterans to access disability compensation benefits.

Vietnam Veterans are encouraged to submit their claims as soon as possible to begin the important process of compensation.

Along with the publication of proposed regulations for the three new presumptives this spring, VA intends to publish a formal request in *Federal Business Opportunities* for private-sector corporations to propose automated solutions for the parts of the claims process that take the longest amount of time. VA believes these can be collected in a more streamlined and accurate way.

Development involves determining what additional information is needed to adjudicate the claim, such as military and private medical records and the scheduling of medical examinations.

With this new approach, VA expects to shorten the time it takes to gather evidence, which now takes on average over 90 days. Once the claim is fully developed and all pertinent information is gathered, VA will be able to more quickly decide the claim and process the award, if granted.

Last year, VA received more than one million claims for disability compensation and pension. VA provides compensation and pension benefits to over 3.8 million Veterans and beneficiaries. Presently, the basic monthly rate of compensation ranges from $123 to $2,673 to Veterans without any dependents.

Disability compensation is a non-taxable, monthly monetary benefit paid to Veterans who are disabled as a result of an injury or illness that was incurred or aggravated during active military service.

For more information about disability compensation, call the Houston VA Regional Office at 713-383-1999 or toll-free 1-800-827-1000, or visit *www.va.gov*. ♦

Avoid the Parking Hassle at the Houston VA.

Use the Free Valet Parking at the Hospital's Main Entrance!

Just show your VA I.D. card or appointment letter. This free service is provided by the VA to make your visit more pleasant. *No tipping allowed.*

Increased Energy
Euphoric Feelings
Extreme Irritability
Racing Thoughts
Lack of Concentration
Inability to Sleep
Poor Judgment
Constant Stimulation
Aggressive Behavior

Bipolar Disorder Research Study

BCM Baylor College of Medicine

MICHAEL E. DEBAKEY VETERANS AFFAIRS MEDICAL CENTER

If you are 60 or older and regularly have some of these feelings, you may qualify to participate in a research study on **Bipolar Disorder with Mania,** which is sometimes called **Manic-Depression**.

The Michael E. DeBakey VA Medical Center and Baylor College of Medicine are enrolling a nine-week research study for the treatment of late-life Bipolar Disorder or Manic-Depression.

You will be compensated for your time.

Please call to see if you qualify:
▸▸▸ 713-791-1414, ext. 6750

Colorectal Cancer: Screening is Critical to Saving Lives

HOUSTON – Cancer of the colon or rectum is also called colorectal cancer. In the United States, it is the fourth most common cancer in men and women.

You may be surprised to learn Green Bay Packers coach Vince Lombardi, movie star Jack Lemmon, actress and singer Eartha Kitt, and comedian Milton Berle all died of colorectal cancer. However, caught early, colorectal cancer is often curable.

Colorectal cancer is more common in people over 50, and the risk increases with age. You are also more likely to get it if you have:

√ Polyps - growths inside the colon and rectum that may become cancerous

√ A diet high in fat

√ A family history or personal history of colorectal cancer

√ Ulcerative colitis or Crohn's disease

√ Smoke or are overweight

A doctor should be consulted if you experience a change in bowel habits, blood (either bright red or very dark) in the stool, and/or weight loss for no known reason, or unusual, exceptional fatigue.

However, you may not have symptoms at first, so screening is important.

Everyone who is 50 or older should be screened for colorectal cancer once every ten years. However, the American College of Gastroenterology recommends African Americans begin at age 45. Colonoscopy is one method your doctor can use to screen for colorectal cancer.

Photo by Bobbi Grover, Public Affairs Officer

Neena S. Abraham, M.D., a gastroenterologist at the Michael E. DeBakey V.A. Medical Center and associate professor of medicine at Baylor College of Medicine, is assisted by Janice Walker, R.N., B.S.N., Gastroenterology staff nurse, to perform a colonoscopy. The colonoscope is gently eased inside the colon and sends pictures to a TV screen. The exam itself takes about 30 minutes. Patients are usually given medicine to help them relax and sleep during the procedure.

The colonoscope is gently eased inside the colon and sends pictures to a TV screen. Small amounts of air are puffed into the colon to keep it open and allow the doctor to see clearly. The exam itself takes about 30 minutes. Patients are usually given medicine to help them relax and sleep during the procedure.

Colorectal cancer is caused by malignant cells that form on the inner lining of the large intestine from small growths, known as polyps. Not all polyps are cancerous.

A polyp can be removed easily during a colonoscopy and sent to a pathologist for review to determine if it is cancerous. A cancerous polyp is called an adenoma and will develop into cancer within 10 years. Research indicates that by age 50, one in four people has polyps.

Many people needlessly fear getting a colonoscopy, a procedure where a flexible, lighted tube with a camera is inserted into the rectum and up through the colon. Others fear colorectal cancer because of vanity, possible pain or discomfort, or the preparation liquid does not taste good.

Colorectal cancer is a preventable cancer through screenings. Together, let's help spread the awareness and understanding to prevent colorectal cancer. Talk to your VA primary health care provider during your next appointment. ♦

Peer Group Offers Many Veterans Hope

Photo by Bobbi Grover, Public Affairs Officer

"Each Veteran who attends has both something to teach and share with others as well as something to learn from other Veterans as a means of recovery," said Marine Corps Veteran Ray Wodynski with Local Recovery Coordinator/Recovery Services Consultant Cristy Gamez-Galka, Ph.D.

HOUSTON — Veterans talking to Veterans about their emotional and mental problems is good medicine.

That is the idea behind the Vet to Vet education and support group, a mental health recovery-oriented program with the goal of Veterans helping other Veterans. The Michael E. DeBakey VA Medical Center (MEDVAMC) began offering these extraordinary meetings about three years ago.

"The program is open to any Veteran, of any age, of any era," said Marine Corps Veteran Ray Wodynksi, one of the founders of the Houston peer-support group. "You don't have to be enrolled with the VA and you don't need an appointment. Show up when you can; leave when you are ready to move on."

There are three meetings at the MEDVAMC each week: Wednesday, 6-7 p.m. in Room 6B-117; Thursday, 9-10 a.m. in Room 6B-117; and Thursday, 11 a.m. – noon in Room 6C-167.

The meetings consist of Veterans teaching and learning from one another. The Veteran-led meetings are based on a partnership with the mental health system. The main focus is on the unique experience of Veterans, and how they can learn to live with problems posed by mental illness and/or addiction. However, participants in Vet to Vet do not just vent; instead, there is an educational component, with Veterans reading and discussing materials recognized in the field of psychosocial rehabilitation.

"Each Veteran who attends has both something to teach and share with others as well as something to learn from other Veterans as a means of recovery," said Wodynski. "We learn from each other. That's where our motto, '*Each One! Reach One! Teach One*!' comes from."

Veterans who have participated in the program praise its distinctive features such as sharing similar life experiences, providing safe and non-judgmental social interactions, and enjoying camaraderie with other Veterans.

For more information, contact Wodynski at 832-289-3810 or Cristy Gamez-Galka, Ph.D. at 713-791-1414, ext. 4378. Veterans are also invited to stop by the Vet to Vet Office located in Room 6C-167 any Thursday, 8 a.m. to noon and have a cup of coffee. ♦

SUICIDE
PREVENTION
LIFELINE™
1-800-273-TALK
(1-800-273-8255)
WEB SITE:
www.suicidepreventionlifeline.org

Introducing "Know (No) Stroke Campaign"

HOUSTON - Stroke is the number one cause of adult disability in the United States and the third leading cause of death. More than 700,000 people experience a new or recurrent stroke each year. Every 45 seconds an American has a stroke, every three minutes someone dies of a stroke in this country, and 15-30 percent of stroke survivors have serious long-term disability. The Department of Veterans Affairs estimates it hospitalizes more than 15,000 Veterans with a stroke each year.

A stroke occurs when the blood supply to part of the brain is suddenly interrupted or when a blood vessel in the brain bursts, spilling blood into the spaces surrounding brain cells. Brain cells die when they no longer receive oxygen and nutrients from the blood or there is sudden bleeding into or around the brain.

Patient and Family Forum
May 19, 2010, 12:30 - 2 p.m.
Spinal Cord Injury Day Room, 2B-119

Don't miss this chance to find out your risk for stroke with a free, on-the-spot carotid doppler screening.

The symptoms of a stroke include sudden numbness or weakness, especially on one side of the body; sudden confusion or trouble speaking or understanding speech; sudden trouble seeing in one or both eyes; sudden trouble with walking, dizziness, or loss of balance or coordination; or sudden severe headache with no known cause.

However, approximately 80 percent of strokes are preventable through the management of such risk factors as high blood pressure, weight control, alcohol consumption, smoking, diabetes, atrial fibrillation, and transient ischemic attack.

In 2005, the Michael E. DeBakey VA Medical Center (MEDVAMC) established an Acute Stroke Team to ensure veterans receive timely evaluation with diagnostic procedures and appropriate therapies based on guidelines established by the Stroke Council of the American Heart Association.

The Acute Stroke Team is comprised of neurology staff, a neurology nurse practitioner, emergency room physicians and nurses, radiologist and technicians, laboratory technicians, and medical consultants from neuro-radiology, vascular surgery, cardiology and internal medicine. Team members are available 24 hours a day, seven days a week to provide immediate diagnosis and emergent treatment of veterans who are rushed to the Emergency Room with symptoms of a stroke.

One treatment option available at the MEDVAMC for veterans having an acute stroke is a medication called tissue plasminogen activator (tPA). This is a "clot-busting" drug shown to be helpful in treating ischemic strokes caused by blood clots, but it must be given within the first three hours after the start of symptoms. This is why it is very important for people who think they're having a stroke to seek help immediately.

While tPA can significantly reduce the effects of stroke and reduce permanent disability, there is a significant risk of bleeding. Before tPA is given to a patient, the Acute Stroke Team completes a thorough evaluation and diagnostic workup to make sure a patient meets all the criteria for tPA. This process takes time, but it is vital to avoid serious complications.

For patients who cannot receive tPA, the Acute Stroke Team examines the appropriateness of several alternative stroke therapies. The important thing for Veterans to remember is the earlier they arrive at the Emergency Room the better.

To raise public awareness about important stroke facts and to reduce the incidence and impact of stroke, the MEDVAMC will host Patient and Family Forum on May 19, 2010, 12:30 - 2 p.m. in the Spinal Cord Injury Day Room, Room 2B-119.

The guest speaker will be Jane A. Anderson, Ph.D., R.N., F.N.P.-B.C. She will discuss what stroke is, stroke risk-factors, warning signs of stroke, how to seek medical attention, acute stroke care, and resources available to a person who has experienced stroke. Participants will also have the opportunity to determine their risk for stroke through a risk assessment that includes a free carotid doppler screening.

All Veterans and their family members should know the warning signs of stroke. If you experience stroke symptoms, immediately call 911. ♦ *Colleen Stewart, CPAC Data Manager*

Stroke Warning Signs

Time lost is brain lost so every second counts...

Know these warning signs of stroke and teach them to friends, family, and co-workers.

- Sudden numbness or weakness of the face, arm, or leg, especially on one side of the body.
- Sudden confusion, trouble speaking, or understanding.
- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance, or coordination.
- Sudden, severe headache with no known cause.

If you think someone may be having a stroke, time is critical so ACT F.A.S.T.

F = FACE Ask the person to smile. Does one side of the face droop?

A = ARM Ask the person to raise both arms. Does one arm drift downward?

S = SPEECH Ask the person to repeat a simple phrase. Does the speech sound slurred or strange?

T = TIME If you observe any of these signs, call 9-1-1 now.

Travel Fraud Costs Everyone

Beneficiary travel fraud can take money out of the pockets of deserving Veterans. Veterans making false statements for beneficiary travel reimbursement may be prosecuted under applicable laws.

38 Code of Federal Regulations, Part 70.41, "Recovery of Payments"
38 Code of Federal Regulations, Part 70.42, "False Statements"
Authority: 38 U.S.C. 101, 111, 501, 1701, 1714, 1720, 1728, 1782, 1783, E.O. 11302

Women Veterans

(continued from page 1)

MEDVAMC is already planning for this growth by relocating and expanding the current Women's Health Center, and adding additional health care providers and ancillary staff. The new center will provide more exam rooms as well as extra space with a larger waiting room to accommodate women in a comfortable, friendly atmosphere.

"Our goal has been to ensure the architectural layout and design are conducive to health and healing. Additionally, we have upgraded our hospital and our VA outpatient clinics by adding baby changing tables in both the women and men's restrooms," said Swope. "Our women Veterans are able to choose their primary care provider and soon will be able to receive gender specific care on a primary care team or in the new Women's Health Center. We believe patients are the driving force behind the desire to provide health care by offering choices as well as empowering them through information and education."

Services at the Women's Health Center are tailor-made for women's unique health care needs. They are provided a variety of preventive, acute, and chronic care in an appropriate, timely, and compassionate manner. All Veterans are screened for military sexual trauma and post traumatic stress disorder.

"We have comprehensive and state-of-the-art medical, surgical, and mental health services available for all female Veterans," said Swope. "The ultimate goal of the Women's Health Center is to enable women Veterans to achieve an optimal level of health, function, and independence."

MEDVAMC recently initiated clinical use of a surgical robotic system to perform minimally invasive gynecological operations, including minimally invasive hysterectomies. Last year, the MEDVAMC added a mental health inpatient unit with 10 beds especially for women Veterans. This new inpatient unit responds to the distinctive mental health needs of this group and accommodates female Veterans who do not feel comfortable in mixed-gender treatment settings.

Counseling and treatment is also available for survivors of military sexual trauma. Group counseling sessions and support groups are available at the Women's Health Center and at the three Vet Centers in Houston.

Women Veterans who obtain their care at one of the VA outpatient clinics receive the same services, including well-woman exams and mental health services, as those who seek care at the MEDVAMC.

"We strive to keep the promise of excellent, dynamic, equitable, accessible health care. Our motto is 'You Served, You Deserve the Best Care Anywhere'," said Swope.

For more information, contact Swope at 713-791-1414, ext. 5783 or e-mail *pamela.swope2@va.gov*. ♦ *Fran Burke, Public Affairs Specialist*

More Help Now Available for Homeless Veterans in Beaumont and Galveston

Photo courtesy VHA Communications

A new VA initiative toward ending homelessness in the Veteran population is the HUD-VASH Program; a collaborative partnership with the VA, the Department of Housing and Urban Development (HUD), and local community agencies.

HOUSTON - The Department of Veterans Affairs estimates about 107,000 Veterans (male and female) nationwide are homeless on any given night and perhaps twice as many experience homelessness at some point during the course of a year. Many other Veterans are considered near homeless or at risk because of their poverty, lack of support from family and friends, and dismal living conditions in cheap hotels or in overcrowded or substandard housing.

The Michael E. DeBakey VA Medical Center is committed to ending the cycle of homelessness among Veterans. A new initiative toward this goal is the HUD-VASH Program; a collaborative partnership with the VA, the Department of Housing and Urban Development (HUD), and local community agencies.

In this program, now expanded from the Houston-area to the communities surrounding Beaumont and Galveston, HUD provides Housing Choice Section 8 vouchers while the VA provides supportive housing through case management and supportive services for eligible homeless Veterans.

In the Beaumont area, the Deep East Texas Council of Governments and Economic Development district distributes the vouchers to Veterans in need.

In the Galveston area, it is the Galveston Housing Authority which covers Galveston, Hitchcock, Dickinson, Bay Cliff, San Leon, League City, and some parts of Houston.

This therapeutic program provides permanent independent housing for eligible homeless Veterans.

In order to qualify for the HUD-VASH Program, a Veteran must be homeless, living on the street, in their car, an abandoned building, an emergency shelter, or in a transitional housing program. Additionally, the Veteran must need and be willing to participate in case management due to mental illness, substance abuse, medical problems, or other significant problem that requires case management support. He or she must be interested in participating in a recovery program while in the HUD-VASH program. The Veteran will be expected to actively participate in a treatment program to include keeping scheduled appointments and following recommendations from his or her treatment team.

Veterans with spouses and children are also eligible to participate as long as the Veteran is actively participating in the HUD-VASH program.

Although many homeless Veterans served in combat in Vietnam and suffer from Post-traumatic Stress Disorder, at this time, studies do not suggest there is a causal connection between military service, service in Vietnam, or exposure to combat and homelessness among Veterans. Family background, access to support from family and friends, and various personal characteristics (rather than military service) seem to be the stronger indicators of risk of homelessness.

Almost all homeless Veterans are male (about three percent are women). The vast majority are single, and most come from poor, disadvantaged backgrounds. Homeless Veterans tend to be older and more educated than homeless non-Veterans. But similar to the general population of homeless adult males, about 45 percent of homeless Veterans suffer from mental illness and (with considerable overlap) slightly more than 70 percent suffer from alcohol or drug abuse problems. Roughly 56 percent are African American or Hispanic.

If you know a Veteran who needs assistance, contact E. Elaine Robinson, L.C.S.W., 281-513-3128; Alicia McCarthy, L.C.S.W., 281-808-1004; or Luis Paulino, L.C.S.W., 713-794-7848 with the VA's Healthcare for Homeless Veterans Program. ♦

SUPPORT GROUP LISTING

Talk with a social worker on your nursing unit or in your Primary Care Clinic about available support groups, meeting times, and locations.

Alcoholics Anonymous (AA) "Starting from Scratch"
Meets every Tuesday and Thursday, 7 p.m., Room 6C-117; and every Wednesday, 7 p.m., Room 6C-105. Facilitator: Bo Cook, 713-791-1414, ext. 6987

Amputee Support Group
Meets 4th Wednesday every month, 3 p.m., Nursing Unit (NU) 2A Dining Room. Facilitators: Betty Baer, 713-794-7793 & Stacy Flynn, 713-791-1414, ext. 4441

Better Breather's Club
Meets last Wednesday every month, 1:30 p.m., Room 3C-371, Home Oxygen Clinic. Facilitator: Paula Denman, 713-794-8979

Breast Cancer Support Group
Meets last Tuesday every month, noon, Education Conference Room 4A-380H. Facilitator: Maria Lozano-Vasquez, 713-791-1414, ext. 5273

Cancer Support Group
Meets 3rd Tuesday every month, 1-2 p.m., Cancer Center Conference Room 4C-345. Facilitator: Maria Lozano-Vasquez, 713-791-1414, ext. 5273

Fibromylgia Support Group
Contact facilitator for information: Gabriel Tan, 713-794-8794

Hepatitis C Support Group
Meets 1st Friday every month, 1:30 p.m., Primecare Clinic 5. Facilitators: Garfield Norris, 713-791-1414, ext. 6189 & Jodi M. Francis, ext. 3394

HIV Support/Educational Group
Meets every Tuesday, 2 p.m., Clinic 4, Room 1A-442. Facilitator: Patricia Suarez, 713-791-1414, ext. 6177

Liver Transplant Support Group
Meets every Tuesday 3 p.m., Room 5B-166, Facilitator: Juleena Masters, 713-791-1414, ext. 6286

Lung Cancer Support Group
Meets 1st Tuesday every month, 1:30 p.m., Cancer Center Family Room 4C-365. Facilitator: Maria Lozano-Vasquez, 713-791-1414, ext. 5273

Heart Disease Support Group
Meets 3rd Thursday every month, 11 a.m., Nursing Unit 2A Dining Room. Facilitator: Rosa Lane-Smith, 713-791-1414, ext. 4034

Pain Coping Skills Training Group
Meets every Tuesday, 1 p.m., Room 5C-215. Facilitator: Gabriel Tan, 713-794-8794

Pain Education Group
Meets every Wednesday, 2 p.m., Room 5C-215. Facilitator: Gabriel Tan, 713-794-8794

Pain Support Group
Meets every Wednesday, 1 p.m., Room 5C-215. Group facilitator: Gabriel Tan, 713-794-8794

Parkinson's Disease Education & Support Group
Contact facilitators for information: Naomi Nelson, 713-794-8938 & Lisa Whipple, 713-794-7951

Prostate Cancer Support Group
Meets 3rd Thursday every month, 1-2 p.m., Cancer Center Conference Room 4C-345. Facilitator: Maria Lozano-Vasquez, 713-791-1414, ext. 5273

Stroke Support Group
Meets 3rd Tuesday every month, 3 p.m., Nursing Unit (NU) 2A Day Room. Facilitators: Kathryn Kertz, 713-791-1414, ext. 4192, Laura Lawhon, 713-794-7816 & Lisa Whipple, 713-794-7951

Vet-to-Vet Support & Education Group
Meets every Wednesday, 6 p.m., Room 6B-117; every Thursday, 9 a.m., 6B-117; and every Thursday, 11 a.m., Room 6C-167. Veteran facilitator. info: Cristy Gamez-Galka, 713-791-1414, ext. 4378

Michael E. DeBakey Veterans Affairs Medical Center
2002 Holcombe Blvd.
Houston, Texas 77030
713-791-1414
www.houston.va.gov

Adam C. Walmus, MHA, MA, FACHE, Director
Carlos R. Escobar, BED-Arch, MHA, Associate Director
J. Kalavar, MD, Chief of Staff
Thelma Gray-Becknell, RN, MSN, Associate Director for Patient Care Services
James W. Scheurich, MD, Deputy Chief of Staff
Francisco Vazquez, BSCS, MBA, Assistant Director
Bobbi D. Gruner, BS, MSBA, Public Affairs Officer/Editor
Frances M. Burke, Public Affairs Specialist/Writer

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DeBakey VA Again Earns ENERGY STAR for Superior Energy Efficiency

HOUSTON - The Michael E. DeBakey Veterans Affairs Medical Center (MEDVAMC) has earned the U.S. Environmental Protection Agency's (EPA's) prestigious ENERGY STAR label for 2009, the national symbol for superior energy efficiency and environmental protection.

Commercial buildings, hospitals, and industrial plants that rate in the top 25 percent of facilities in the nation for energy efficiency may qualify for the ENERGY STAR.

"The Michael E. DeBakey Veterans Affairs Medical Center is pleased to accept EPA's ENERGY STAR in recognition of our energy efficiency efforts," said Adam C. Walmus, director, MEDVAMC. "Through this achievement, we have demonstrated our commitment to environmental stewardship while also lowering our energy costs and saving taxpayer dollars."

Buildings that earn the ENERGY STAR label use an average of 40 percent less energy than typical buildings and also release 35 percent less carbon dioxide into the atmosphere.

MEDVAMC improved its energy performance by managing energy strategically across its entire organization and by making cost-effective improvements to its buildings.

Based on EPA's Energy Star data, MEDVAMC has a cost avoidance of approximately $5 million in annual energy bills compared to typical buildings of the same size.

To earn the ENERGY STAR, MEDVAMC took the following actions:

- Completed various construction and repair projects improving energy use.
- Provided energy awareness to all employees.
- Purchased, operated, and maintained equipment to obtain maximize energy efficiency.
- Provided sustainability through continuous improvement programs in energy and environmental management.

EPA's national energy performance rating system provides a 1-100 scale that helps organizations assess how efficiently their buildings use energy relative to similar buildings nationwide. A building that scores a rating of 75 or higher is eligible for the ENERGY STAR.

Buildings that can earn the ENERGY STAR include offices, bank branches, financial centers, retailers, courthouses, hospitals, hotels, K-12 schools, medical offices, supermarkets, dormitories, and warehouses.

ENERGY STAR was introduced by EPA in 1992 as a voluntary, market-based partnership to reduce greenhouse gas emissions through energy efficiency. Today, the ENERGY STAR label can be found on more than 50 different kinds of products, new homes, and commercial and industrial buildings.

Products and buildings that have earned the ENERGY STAR designation prevent greenhouse gas emissions by meeting strict energy-efficiency specifications set by the government. In 2006, Americans, with the help of ENERGY STAR, saved about $16 billion on their energy bills while reducing the greenhouse gas emissions equivalent to those of 27 million vehicles.♦

Infection:

Don't Pass It On!

Wash your hands before eating, after using the restroom, after coughing or sneezing, after blowing your nose, before and after handling food, after being near somone sick, or after touching trash.

Did You Know?

Did you know there is a specific federal statute outlining the proper manner in which to wear an American Flag Lapel Pin?

According to U.S. Code, Title 4, Chapter 1, Section 8, Paragraph (j), "No part of the flag should ever be used as a costume or athletic uniform. However, a flag patch may be affixed to the uniform of military personnel, firemen, policemen, and members of patriotic organizations.

The law goes on to state, "The flag represents a living country and is itself considered a living thing. Therefore, the Lapel Flag Pin being a replica, should be worn on the left lapel near the heart."

For more information about the Flag Code, visit *www.usflag.org*.

Expert's Corner

Pamela Swope, F.N.P., C.R.N.P.-B.C., Women Veterans Health Program manager, (713-791.1414, ext. 5783), offers ten reasons for women Veterans to consider the Michael E. DeBakey VA Medical Center and its outpatient clinics for their health care. Women are one of the fastest growing segments of the Veteran population. They comprise 7.5 percent of the total Veteran population and nearly 5.5 percent of all Veterans who use VA health care services. The Michael E. DeBakey VA Medical Center is already planning for future growth by relocating and expanding the current Women's Health Center, and adding additional health care providers and staff.

1 The Michael E. DeBakey VA Medical Center and its outpatient clinics provide state of the art, compassionate care of the highest quality.

2 Health care services are free or at reasonable cost depending on your enrollment priority group. Prescriptions have a low co-pay or no cost depending on your enrollment priority group.

3 The VA serves all eligible women Veterans, from WWII to returning Veterans from current wars in Afghanistan and Iraq. Our health care providers have the expertise to address your individual health concerns no matter your age.

4 VA medical care is available for any eligible woman. The VA is not just for combat Veterans. Please check with the Eligibility Office at 713-794-7288/7830 to determine if you qualify.

5 If you lost your job or medical insurance recently, you may be eligible for VA health care even if you were not eligible before.

6 The VA is a full service inpatient and outpatient medical facility. All specialties are available including gynecology, infertility, laboratory, radiology, physical therapy, orthopedics, surgery, mental health, and more.

7 The VA's unique mission is to care for Veterans and service members. We believe it is a honor to serve those who have sacrificed for and served our Nation.

8 Gender specific prosthetics are available such as breast milk pumps and breast prosthesis.

9 Female Veterans may see an obstetric provider in the community through the VA Fee Basis Office. The VA pays for most maternity care expenses.

10 For women who experienced sexual trauma while serving in the military, specialty inpatient as well as outpatient care is offered by health care providers who have in-depth knowledge, extensive treatment experience, and the ability to understand your unique situation.

Veterans' Questions

Answers provided by Patient Advocates in Consumer Affairs Room BA-200 (Basement) (713) 794-7884 or e-mail vhahougeneralquestions@va.gov

Question: Is anything being done to improve parking at the VA hospital in Houston?
Answer: Yes, five new parking lots are being constructed. In total, parking capacity on the VA complex will increase by more than 500 parking spaces before summer begins.

Looking into the future, the Michael E. DeBakey VA Medical Center has requested funding to build a parking structure over the top of parking lot N. It will be constructed in three phases with a final capacity of approximately 1,200 additional parking spaces. Projected date for completion is 2016.

While these projects are being worked, the MEDVAMC Parking Committee is evaluating a recommendation to place gates on all parking lots on the VA complex. This requires further detailed study to review the impact and implementation of a token/validation system while ensuring Veterans, employees, volunteers, visitors, and medical residents are not charged for parking. Vendors and other external parties choosing to use the VA complex for parking will be charged just like the other health care facilities in the Texas Medical Center.

Question: My father is not able to walk very far and finds the Valet Parking service at the Houston VA very convenient. Lately, it seems to be closed a lot. What is going on?
Answer: Valet parking at the main entrance of the DeBakey VA Medical Center is free for any Veteran with a VA I.D. card or appointment letter. In February, we expanded the valet parking lot and believe we have resolved the need to temporarily close at peak hours.

Question: Can I trust the people who work the Valet Parking in Houston?
Answer: The contract company that runs the Valet Parking is licensed and insured. In addition to the company's background check on each individual parking cars, the VA does its own background checks on these workers.

Question: How do I participate in the 2010 National Veterans Summer Sports Clinic?
Answer: The 3rd National Veterans Summer Sports Clinic will be held in San Diego from September 18 – 25, 2010. It promotes rehabilitation by teaching summer sporting activities to Veterans with significant physical or psychological impairments. Events such as sailing, surfing, kayaking, cycling, and track and field will be offered. The VA is seeking recently injured Veterans to participate in this rehabilitative event. For more information, e-mail *Tristan.beaton2@va.gov* or call 858-642-6426.

Question: Where can I find the Federal Benefits for Veterans, Dependents, and Survivors booklet on the Web?
Answer: The booklet may be found at *http://www1.va.gov/opa/publications/benefits_book.asp.*

Question: Is there one Web site that contains all kinds of benefit information for Veterans?
Answer: Yes, the National Resource Directory is a comprehensive, free, online tool for wounded, ill, and injured service members, Veterans, and their families. Visitors to the site can find an extensive range of information about Veterans' benefits, including disability and pension benefits, VA health care, and educational opportunities. The site also provides information for those who care for Veterans, such as access to emotional, financial, and community assistance.

A recent addition to the Web site is a specialized section where users can find help for homeless Veterans. These resources will help end Veteran homelessness over the next five years.

The new design will help visitors find needed resources easily. Other enhancements include a fast, accurate search engine; a "bookmark and share" capability that allows users to share valuable resources on Facebook, Twitter and other social media sites; and a news feature with updates on relevant information and events. Resources are added daily: *www.nationalresourcedirectory.gov.*

Question: I heard a rumor VA's Servicemembers' Group Life Insurance (SGLI) or Veterans' Group Life Insurance (VGLI) will not pay if a policy holder dies in a car accident and was not wearing a seat belt? Or if the covered Veteran was in a motorcycle accident and was not wearing a helmet? Is this true?
Answer: No. SGLI and VGLI coverage will pay insurance benefits to a covered Veteran's beneficiaries regardless of whether he or she was wearing a seat belt or a helmet. While wearing a seat belt and a helmet are important precautions to prevent serious injuries in car and motorcycle accidents, they will not affect payment of SGLI or VGLI benefits. Check it out for yourself and learn about other SGLI and VGLI rumors and myths at *www.insurance.va.gov/sgliSite/SGLI/mythsRumors.htm.*

Question: How do I get more news about the Michael E. DeBakey VA Medical Center and Veterans' health care?
Answer: Send an e-mail to *bobbi.gruner@va.gov* to sign up to receive news releases and information. You can also visit *www.houston.va.gov* and click on the "News Center" symbol.

Important VA Telephone Numbers

Michael E. DeBakey VA Medical Center 713-791-1414
toll-free 1-800-553-2278
VA Network Telecare Center 713-794-8985
toll-free 1-800-639-5137
Beaumont VA Outpatient Clinic 409-981-8550
toll-free 1-800-833-7734
Conroe VA Outpatient Clinic 936-522-4000
toll-free 1-800-553-2278, ext. 1949
Galveston VA Outpatient Clinic 409-761-3200
toll-free 1-800-553-2278, ext. 12600
Lufkin - Charles Wilson VA Outpatient Clinic 936-671-4300
toll-free 1-800-209-3120
Pharmacy Refills 713-794-7648
toll-free 1-800-454-1062 or www.myhealth.va.gov
Pharmacy Helpline 713-794-7653
Suicide Prevention Hotline ..... toll-free 1-800-273-TALK (8255)
Appointment Center ..... toll-free 1-800-639-5137
Automated Appointment Information 713-794-7648
toll-free 1-800-454-1062
VA Eligibility & Enrollment 713-794-7288
Health Care for Homeless Veterans Program 713-794-7848
Homeless Veterans Drop-In Center (1418 Preston St.) 713-794-7533

Operations Enduring Freedom & Iraqi Freedom Support Team
Team Members 713-794-7034/8825/7928

Vet Center (701 N. Post Oak Road) 713-682-2288
Vet Center (2990 Richmond Ave.) 713-523-0884
Vet Center (14300 Cornerstone Village Dr.) 713-578-4002

Patient Advocates
Houston 713-794-7884
Beaumont ..... 1-800-833-7734, ext. 113
Conroe ..... 936-522-4010, ext. 1952
Galveston ..... 713-791-1414, ext. 6586
Lufkin 936-671-4362

Houston VA National Cemetery 281-447-8686
Houston VA Regional Office 713-383-1999
toll-free 1-800-827-1000

OEF/OIF Veterans Suffering from Combat-Related Stress

Are you a Veteran who has been deployed to Iraq, Kuwait, or Afghanistan and:

- Witnessed or been involved in a traumatic event during combat?
- Have recurrent and distressing memories, nightmares, or flashbacks following a life-threatening/altering incident?

Do You: Experience trouble sleeping? Feel angry or irritable most of the time without a reason? Have difficulty dealing with personal or social relationships? Have less or no interest in activities you once enjoyed? Have problems concentrating?

If you answered yes to any of these questions, you may be eligible to participate in a clinical research study of an investigational medication for Post-traumatic Stress Disorder.

To be eligibile, you must be an OEF/OIF Veteran of any branch of service and at least 19 years old. Qualified participants may receive free study-related medical care, research medication, laboratory work, and evaluations.

To learn more about this clinical study, please call toll-free today:

1-877-807-3072

All calls are completely confidential.

BCM Baylor College of Medicine

This research study has been approved by Michael E. DeBakey VA Medical Center Research and Development Committee and the Baylor College of Medicine Institutional Review Board.

MICHAEL E. DEBAKEY VETERANS AFFAIRS MEDICAL CENTER