



Promoting equity in engagement, access, and quality of mental health care for Veterans facing barriers to care, especially rural Veterans

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# Communiqué

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## RESEARCH TO PRACTICE

### Effects of Prolonged Exposure Treatment by VA Clinicians

Summary by Patricia Dubbert, Ph.D.

Have you wondered how VA's recent efforts to train clinicians and provide evidence-based mental health therapy have helped Veterans with PTSD? National Center for PTSD researchers at VA Palo Alto Health Care System conducted a study that provides some answers to this question. The study explored the effects of prolonged exposure therapy on nearly 2000 Veterans treated by VA mental health clinicians. More than 800 clinicians completed a 4-day prolonged exposure workshop and then continued training through consultation with a national expert team as they treated patients in their parent facility over the next 6 to 9



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### SC MIRECC Awards Research Bridge Funds to Five Affiliate Investigators

In February, SC MIRECC awarded research bridge funds to five of its affiliate investigators. The purpose of this award is to facilitate recruitment and retention of SC MIRECC investigators and staff, and support educational and clinical research that supports the SC MIRECC's mission to promote equity in engagement, access, and quality of mental health care for Veterans facing barriers to care, especially rural Veterans. Awards expire at the end of the fiscal year, which will allow investigators to fill temporary funding gaps with new grants. Priority was given to applications seeking bridge funds for research staff and VA-funded investigators awaiting funding decisions or needing resources to prepare grant applications for 2015.

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## PRACTICE (continued from page 1)

months. Study results were published in the July 2013 issue of *JAMA Psychiatry*. The article describes the effects of the treatment on PTSD and depression symptoms for 1,931 Veterans with a primary diagnosis of PTSD who received prolonged exposure therapy from the newly trained VA clinicians.

Study highlights for clinicians:

- Most clinicians were psychologists (57%) or social workers (37%).
- Most Veterans in the study were Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (average age 34) and Vietnam era (average age 61) but participants also represented Persian Gulf and other eras; 12.9% were females; 75% had combat or war zone related trauma, and 10% had military sexual trauma.
- The majority of Veterans (72%) completed treatment (at least 8 sessions).
- Veterans showed significant improvements in PTSD and depression. The average change in PTSD Checklist scores was 15.2 points and the average reduction in Beck Depression Inventory II scores was 8.1 points.
- All Veterans improved, including the Vietnam-era Veterans who had suffered from chronic PTSD for many years.
- The most common reasons for stopping treatment before completing 8 sessions were relocation (41% of dropouts), and increased distress (36% of dropouts).

This is an unusual study in several respects that make it of special interest. The providers of the therapy were not experts, but a large number of newly trained VA clinicians providing routine care in their parent facilities. There was no control group; the study simply reported the results of measures of symptoms before and at the end of treatment for this very large cohort of Veterans who received a fairly standardized treatment. Prolonged exposure had previously been shown to be effective in smaller clinical trials, but this was its first large-scale test in treatment of combat trauma with Veterans.

The results of treatment in this “real world” study were very encouraging because of the clinical significance of the improvements observed and the similarity of results to those of the previous clinical trials. The results suggest that VA clinicians can feel confident that prolonged exposure therapy offered by VHA can benefit many Veterans with PTSD. To view the article, visit <http://www.ncbi.nlm.nih.gov/pubmed/24500633>.

### Citation

Eftekhari, A., Ruzek, J. I., Crowley, J. J., Rosen, C. S. Greenbaum, M. A., (2014). Effectiveness of national implementation of prolonged exposure therapy in Veterans Affairs care. *JAMA Psychiatry*, 70(9), 949-955. ♦

## ATTRIBUTION: ACKNOWLEDGEMENT OF MIRECC RESEARCH SUPPORT/EMPLOYMENT

SC MIRECC researchers and educators have a responsibility to ensure SC MIRECC receives proper credit for SC MIRECC-supported studies or projects in articles, presentations, interviews, and other professional activities in which the results of those projects are publicized or recognized. All investigators should credit SC MIRECC if they receive either direct or indirect SC MIRECC support. For example, "This work was supported in part by the VA South Central (VISN 16) Mental Illness Research, Education, and Clinical Center." If you receive salary support from SC MIRECC, you should list SC MIRECC as an affiliation.

# CBOC Mental Health Rounds

*Sponsored by the South Central MIRECC*

VA mental health providers are invited to attend the next CBOC Mental Health Rounds session titled “**Using Behavioral Activation in Integrated Medical and Mental Health Settings**” on Wednesday, April 9 at 8:00-9:00 a.m. CT and Thursday, April 10 at 11:00-12:00 p.m. CT. This Microsoft Lync session will be presented by Matthew Jakupcak, Ph.D. At the conclusion of this educational program, learners will be able to:

1. Describe the theory, rationale, and empirical support for applying behavioral activation strategies to treat mental and physical conditions common to primary care-mental health integration settings;
2. Discuss the key components of behavioral activation;
3. Apply behavioral activation strategies to their current practices; and
4. Discuss challenges and specific strategies to overcome barriers to activating Veterans toward their recovery and reintegration goals.

Call 1-800-767-1750 and use access code 26461# to participate. Email Ashley.McDaniel@va.gov or call (501) 257-1223 for registration and continuing education credit information.

**Upcoming CBOC Mental Health Rounds**  
**Second Wednesdays and Thursdays Monthly**  
**8:00-9:00 am CT; (800) 767-1750; 26461#**

May 13 & 14, 2014  
*Early Stage Dementia and Cognitive Loss Group*

June 11 & 12, 2014  
*The Challenge of Treating LGBT Veterans in Rural Settings*

July 9 & 10, 2014  
*Chronic Pain*

## **Recognizing the Reserve Component: Needs, Access and Treatment Issues Facing National Guard and Reserve Members Training**

This free training is available to VA mental health providers through the VA Talent Management System ([www.va.tms.gov](http://www.va.tms.gov)). Recorded during the November 2012 CBOC Mental Health Rounds, Dr. Harold Kudler teaches learners to identify three distinctions between the Reserve and Active Duty Components of the military; articulate two unique concerns of Reserve Component Members when they present for VA care; and describe three specific steps that VA providers can take to ensure there is “no wrong door” in their communities to recognize and respond to deployment-related health needs among Reserve Component Members and their families. Continuing education credit is available for physicians, psychologists, nurses and social workers. To access this training in TMS, visit [https://www.tms.va.gov/learning/user/deeplink\\_redirect.jsp?linkId=ITEM\\_DETAILS&componentID=17674&componentTypeID=VA&revisionDate=1372706760000](https://www.tms.va.gov/learning/user/deeplink_redirect.jsp?linkId=ITEM_DETAILS&componentID=17674&componentTypeID=VA&revisionDate=1372706760000). This training expires July 7, 2014. ♦

## **BRIDGE (continued from page 1)**

### **Late-Life Anxiety: Expanding Reach of Services**

Melinda Stanley, Ph.D.

Michael E. DeBakey VA Medical Center (Houston, TX)

Award: \$49,970

To expand the reach of services for anxiety in older adults, Calmer Life was developed and is being tested as a new model of care for worry and anxiety designed to meet the needs of low-income, minority older adults in underserved communities where need is high but availability and accessibility of care is inadequate. Bridge funds will support staff and resources to complete the Calmer Life pilot study and seek grant funding.

### **Psychophysiological Reactivity to Identify and Treat Veterans at Risk for PTSD**

Jeffrey Pyne, M.D.

Central Arkansas Veterans Healthcare System

Award: \$44,240

Dr. Pyne's psychophysiological reactivity stress studies seek to determine pre-deployment predictors of PTSD and test pre-deployment resiliency interventions. Bridge funds will support research staff that will collect and analyze psychophysiological lab pilot data. Data will be used to seek grant funding for research to improve mental health treatment initiation and engagement.

### **Refinement & Pilot Testing of a Patient-Centered Medication Adherence Intervention**

Richard R. Owen, M.D.

Central Arkansas Veterans Healthcare System

Award: \$54,448

Medication non-adherence approaches 50% among individuals with chronic diseases, contributing to poor outcomes and increased costs of care. The long-term goal of this pilot is to develop an effective, efficient, patient-centered intervention to improve psychotropic medication adherence that is applicable to a diagnostically diverse group of Veterans with serious mental health conditions, and that is feasible for widespread implementation in VHA. Bridge funds will support staff and resources to complete this pilot study.

### **Understanding Provider Decision Making**

Dinesh Mittal, M.D.

Central Arkansas Veterans Healthcare System

Award: \$10,510

This study provides insight into provider perceptions and attitudes that may have a direct bearing upon the quality of treatment that Veterans receive. A better understanding of these factors will aid in designing interventions intended to reduce mental illness stigma. Bridge funds will support statisticians to assist with analysis of study data and manuscript preparation.

### **Transcranial Magnetic Stimulation for Apathy in Mild Cognitive Impairment**

Prasad R. Padala, M.D., M.S., FACHE

Central Arkansas Veterans Healthcare System

Award: \$4,800

Mild cognitive impairment is a precursor of dementia. Apathy, a profound loss of motivation, is a common behavioral problem in mild cognitive impairment. Presence of apathy increases the chance of these patients converting to Alzheimer's Dementia. The primary objective of this study is to determine the efficacy of Repetitive Transcranial Magnetic Stimulation on the dorsolateral prefrontal cortex in treating apathy in mild cognitive impairment in comparison to sham treatment. Bridge funds will support resources for the study intervention. ♦



The *Guide to VA Mental Health Services for Veterans & Families* was created in 2011 by the SC MIRECC as an accessible translation of the *VA Uniform Mental Health Services Handbook*. The *Guide* has been extremely popular. This version was updated in 2012 by VA Central Office as an expansion of the original. The *Guide* is available in English and Spanish (online only).

A hardcopy of the English *Guide* can be ordered through your nearest medical center facility's Forms and Publication Officer by providing the following information: IB 10-492, P965548- Guide to VA Mental Health Services for Veterans and Families, dated July 30, 2012. If you need help ordering the *Guide*, email [Brian.Radford@va.gov](mailto:Brian.Radford@va.gov) in VA Central Office Mental Health Services.

Electronic versions of the *Guide* can be downloaded in English at [http://www.mentalhealth.va.gov/docs/MHG\\_English.pdf](http://www.mentalhealth.va.gov/docs/MHG_English.pdf) and Spanish at [http://www.mentalhealth.va.gov/docs/MHG\\_Spanish.pdf](http://www.mentalhealth.va.gov/docs/MHG_Spanish.pdf).

# Guide TO VA MENTAL HEALTH SERVICES FOR *Veterans & Families*



### **Attention VA mental health providers!**

Visit the VISN 16 Mental Health Practice, Research and Education Portal (MH PREP) to interact with other mental health providers about clinical care issues, access educational products and services, and discover the latest continuing education opportunities. The MH PREP is accessible from a VA computer at <https://vaww.visn16.portal.va.gov/SiteDirectory/mhp/default.aspx>. ♦

# ANNOUNCEMENTS



## From the War Zone to the Home Front: Supporting the Mental Health of Veterans and Families

This free, online training series helps health care professionals in the community recognize and address the challenges faced by Iraq and Afghanistan Veterans and their families. These free sessions are available live or on-demand, and are led by renowned clinician-researchers from Massachusetts General Hospital, Harvard Medical School and VHA. The series includes:

- 9 Live Online Broadcasts with real-time question and answer (on-demand post airing)
- 3 Clinical Case Conferences included in the live sessions
- Pre-recorded trainings on Military Culture, Understanding Trauma and Treatment, and Military Family Challenges
- Free continuing education credits for physicians, nurses, social workers, psychologists, and licensed mental health counselors.

The series is presented as a community service by the Red Sox Foundation and Massachusetts General Hospital Home Base Program and the VA National Center for PTSD. For more information, visit [http://mghcme.org/page/from\\_the\\_war\\_zone\\_to\\_the\\_home\\_front](http://mghcme.org/page/from_the_war_zone_to_the_home_front).



## LifeGuard, Operation: Coming Home Website

Just as you receive training before you engage in any mission-oriented task, this website prepares you for the most important mission of all – Coming Home. This website is dedicated to helping returning Veterans reintegrate into their communities and families by giving them the opportunity to experience five skills that can help them respond to their thoughts, feelings, and memories that occur on a daily basis. Visit the LifeGuard, Operation: Coming Home Website. If you want to learn more about the LifeGuard workshop, visit <http://psycnet.apa.org/journals/pro/42/1/32/>. ♦

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