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The VA MidSouth Healthcare Network Wellness Journal

Watch

Spring 2009

Healthy vision is in sight

H1N1 flu: Get the facts

Keeping the promise to our patients





Veterans Health Watch is a wellness journal published quarterly by the VA MidSouth Healthcare Network (VISN 9). Veterans Health Watch is designed to promote healthy lifestyles and give Veterans and their personal caregivers insightful information about managing and accessing health care from VA Medical Centers within VISN 9.

This publication is not a substitute for professional medical advice, which should be obtained from your doctor.

Your feedback is welcomed. If you would like to comment on any of the articles or submit information for possible publication, please write to:

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Continuing our commitment to you

Dear Veteran:

R ecently, the U.S. Department of Veterans Affairs (VA) announced President Obama's 2010 budget for VA. The budget emphasizes a Veteran-centric commitment to expand services with an increase to the current budget of more than 15.5 percent—the largest percentage increase requested by a president in more than 30 years.

With the nation's economy in turmoil and more and more Veterans becoming unemployed, we expect more of you to enroll for care. Should this budget proposal be adopted, our ability to handle the influx of Veterans will be greatly enhanced. The proposed budget supports the administration's goal to gradually expand health care eligibility to more than 500,000 new enrollees by 2013, while maintaining excellent care quality and timeliness.

This budget will further transform VA into a 21st century organization. VA Secretary Eric Shinseki has said that the demand for more for our Veterans is based upon "... new times, new technologies, new demographic realities and new commitments to today's Veterans."

The centerpiece of the \$112.8 billion VA budget proposal is a dramatic increase in Veteran health care funding—an 11 percent increase over this year's funding (excluding one-time Recovery Act funds).

According to VA leadership in Washington, D.C., the 2010 budget request will provide treatment for approximately 122,000 more patients. Many of these patients will have multiple visits during the course of the year. VA expects to end fiscal year 2010 with approximately 6.1 million individual patients receiving care, including 419,000 Veterans of the Iraq and Afghanistan war zones who separated from service. For more information about the 2010 VA budget proposal, visit **www.va.gov.**

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John Dandridge, Jr. Network Director

- Veterans Health Watch - SPRING 2009

Keeping an eye on good vision

ccording to Jennifer Elam, O.D., staff optometrist at the Lexington VA Medical Center, "As we grow older, we may blame vision changes on aging, but only a comprehensive eye exam can separate serious

vision impairment from 'normal' aging changes." Often, these conditions are painless and gradual in onset and include:

■ **Blepharitis.** This condition is an inflammation of lash follicles along the edge of the eyelids. It's often caused by abnormal bacterial growth on the skin. Eyelids may itch and burn and appear swollen, red and crusty.

■ Dry eye. Tear production tends to decrease as we age. Dry eye affects both men and women but is more common among women, especially those who've completed menopause. Certain drugs, such as those used to treat high blood pressure, antihistamines and sleeping pills, can cause dry eye.

Age-related macular degeneration (AMD). This disease damages the part of the eye responsible for detail vision (the macula). While a person who has AMD retains side (peripheral) vision, the central blind spot caused by this disease can result in an inability to read, recognize faces or do close work.
Cataracts. When the clear lens inside the eye becomes cloudy or develops opacities, it's called a cataract. Cataracts can greatly impair vision, however they don't usually damage the eyes. Most can be successfully removed through surgery.

Diabetic retinopathy. If a person has long-term diabetes, damage can occur to the retina (the nerve layer inside the eye). Vision loss may occur in varying degrees, and total blindness may result.

■ Glaucoma. Often called the "sneak thief of sight," this condition can cause a gradual loss of side (peripheral) vision and may lead to total blindness. Early detection and treatment are the only ways to protect eyes from vision loss.

■ Keratoconus. This is a disease of the cornea (the surface of the eye). It can occur at any age, although it's most common in patients ages 15 to 30. Keratoconus is often associated with excessive rubbing of the eyes (see blepharitis and dry eye), wearing contact lenses, having atopic skin diseases such as eczema and Down syndrome. For some people, there's no known cause.

"If left undiagnosed and untreated, eye diseases can cause blindness or severe impairment," says Dr. Elam. "Having regular eye examinations can help save your eyesight."

Prevent vision problems

Regular eye exams can help determine the difference between age-related changes and eye diseases that could rob you of your independence, safety and quality of life. Contact the VA Medical Center nearest to you to schedule an eye exam today!

Offering a new look at life

Comprehensive vision care is available

ccording to Gary Brough, M.D., chief of optometry at the Memphis VA Medical Center, Veterans of all ages may face challenges due to visual impairments. "Early intervention is essential to improving a Veteran's quality of life and restoring personal independence—and rehabilitation is key to preventing a visual impairment from becoming an unnecessarily disabling condition," says Dr. Brough.

"To provide the best care for Veterans dealing with visual impairments, we offer different levels of care known as the Outpatient Visual Impairment Services Continuum of Care," Dr. Brough explains. "This model of care ranges from services that are available at VA MidSouth Healthcare Network [VISN 9] medical centers to specialized services that are available regionally. The goal is to address the needs of Veterans regardless of their degree of visual impairment."

Our comprehensive services for Veterans who have low vision or blindness include:

■ Low-vision training. Low-vision training teaches patients how to use their remaining vision effectively. Emphasis is on enabling Veterans to read normal size print again. Watching TV, seeing street signs and reading playing cards, menus and price tags are other activities most patients find easier to do after they've received low-vision training. Magnifiers and other low-vision aids are also provided.

■ Adjustment. Adjustment to vision loss can be overwhelming. Social, emotional and family issues can also affect a person's ability to cope with life changes caused by visual impairment. Individual and group sessions are available and provide coping skills and strategies to help Veterans adapt.

■ Orientation and mobility training. Veterans receive instruction on walking safely, crossing streets and using mobility canes to increase self-confidence, enhance personal security and improve independence.

\rightarrow You'renot alone

If you're experiencing vision impairment problems, Visual Impairment Services is here to help. All of the VISN 9 VA medical centers offer basic low-vision services to eligible Veterans who are enrolled and receiving care at any VISN 9 medical center or community-based outpatient clinic.

If you need extensive care, an interdisciplinary team will evaluate you to determine what treatment may help and where your treatment will be provided. For more information, visit **www.va.gov/blindrehab**.

Training is also available for those who use walkers or wheelchairs.

■ **Communication.** Communication instruction helps improve and restore a person's speaking and writing abilities. Opportunities to learn and use new strategies and tools such as typing, handwriting, managing finances and recording devices are offered. Veterans also learn about available community resources and how to use them effectively.

■ Daily living skill instruction. The goal of daily living skill instruction is greater or complete independence for Veterans. It focuses on personal and home manage-ment including telling time, using the telephone, identifying money, personal grooming, laundering and organizing clothing and cooking and kitchen safety. Instruction in preparing meals is also provided, with emphasis on learning by doing.

■ Individual treatment. The needs of each Veteran are unique. Individual treatments and training are offered to help Veterans adapt to vision loss. This may include specialty services, such as hearing exams, at a local VA medical center. Veterans may also be referred to a regional VA clinic for more intensive training and care. Computer training with special software may also be provided.

Help is available

The impact of low vision or blindness varies from person to person. A person may feel frustrated in performing daily activities such as dressing, eating, writing, reading and traveling. Keeping up with the daily news or communicating with others may be hampered. Recreation and leisure activities may also suffer.

"Veterans who have difficulty seeing should schedule an appointment through their local VISN 9 VA medical center to have an eye exam," says Dr. Brough. "In many cases, vision can be improved with a new pair of glasses, through cataract surgery, if needed, or by improved blood sugar control for patients who have diabetes. If none of these options improve vision enough, the health care provider can refer a Veteran to rehabilitative services."

Visual Impairment Services

The VIST (Visually Impaired Services Team) Coordinator supervises treatment for patients who are visually impaired or blind. The BROS (Blind Rehabilitation Outpatient Specialist) is a therapist who provides services at the community-based clinic or in the home for those who are unable to come to the main VA facility for care.

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Mountain Home VA Medical Center VIST Coordinator: Linda Coeburn, LCSW (423) 926-1171, ext. 2979 BROS: Mary Ann Zelinsky, COMS, CVRT (423) 926-1171, ext. 2298

Tennessee Valley Healthcare System VIST Coordinator and BROS: Harry R. Kellam, LMSW (615) 873-6677

H1N1 flu

What you need to know

o doubt, you've been following the disease outbreak caused by a new influenza virus of swine origin (H1N1), which has been declared

a pandemic by the World Health Organization. "Influenza pandemics must be taken seriously precisely because of their capacity to spread rapidly throughout the world," says Helen Rice, RN, BSN, CIC, infection preventionist at Lexington VA Medical Center.

"In the United States, most people who have become ill with the H1N1 flu virus have recovered without requiring medical treatment," says Rice. "However, this virus could cause significant illness with associated hospitalizations and deaths in the upcoming fall and winter flu season," Rice warns.

What you can do

Getting vaccinated every year is one of the most important ways to avoid influenza. "A different flu vaccine is made each year," Rice explains. "Scientists use three strains of viruses, which may circulate that flu season, to make the vaccine.

While getting vaccinated won't prevent you from catching the flu, it may help reduce the flu's severity should you become infected." The Centers for Disease Control and Prevention (CDC) says government scientists are working to test and create a possible H1N1 flu vaccine.

Stopping the spread of germs is another important step you can take to protect yourself and your loved ones, says Rice. "You'll be less likely to give or get the flu by following these simple rules:

■ Cover your cough or sneeze with a tissue.

■ Wash your hands often with soap and water or alcohol-based sanitizer.

■ If you're sick, stay home, and remember to avoid touching your eyes, nose or mouth, since germs can spread this way, unless you've washed your hands."

If you do get the flu, antiviral medications can help. These prescription drugs should be started within 48 hours of getting sick. Symptoms include a fever (usually high), headache, extreme tiredness, dry cough, sore throat, runny or stuffy nose and muscle aches. If you get any of these symptoms, call your VA health care provider right away.

A seasonal flu vaccine is usually available between September and October. For more information, contact your local VA Medical Center.

Did you know?

According to the CDC, an average of 36,000 people die and more than 200,000 are hospitalized from seri-ous flu complications each year in the United States. If you're age 65 or older, you're at high risk for seri-ous flu complications The most important step you can take to protect yourself and others is to get a yearly flu vaccination.

A promise fulfilled

We're committed to caring for our nation's Veterans

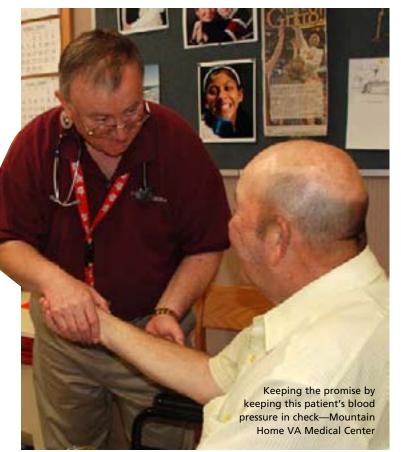
s a network and as providers of health care, VA is extremely grateful for the courage, dedication and sacrifice of those who have served in our armed forces. Together, we work shoulder to shoulder to fulfill a very special promise—one that was made long ago.

Abraham Lincoln first articulated this pledge during his second inaugural address as the American Civil War was winding down. When he spoke the words "... to care for him who shall have borne the battle and for his widow and his orphan," he committed this country to the care and keeping of those who serve in military uniform. This promise was later adopted by the Department of Veterans Affairs as its official mission statement.

To fully appreciate the value of that promise, one must understand the expectation associated with the word. A promise is a pledge or an assurance given by one person to another that they will act exactly as they say. The other person can rest assured that the promise will not be broken under any circumstances.

Each employee in the VA MidSouth Health Network [VISN 9] is dedicated to carrying out this promise, according to his or her role in the organization. Some of the ways in which we keep this promise include:

■ providing compassionate, dignified care



■ training the next generation of health care providers

■ conducting leading-edge medical research

- responding to disasters that strike anywhere in the country
- ensuring access to health care providers
- keeping confidential matters private
- taking time to comfort an anxious patient or family member

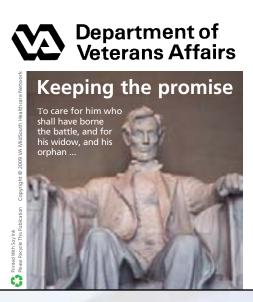
■ meeting patients' nutritional needs

■ making our Community Living Centers as homelike as possible

- updating our facilities and keeping them clean
- recruiting the best staff
- supporting our community

looking for ways to do our jobs better and more safely

While we can never fully repay Veterans for the unselfish commitment they have made to our nation, we can and do keep the promise each and every day by providing them with the very best health care.



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Keeping the promise

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