

SPLH 660

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Is there an increase of communication impairments from blasts/explosions to veterans of war in Afghanistan and Iraq compared to previous wars?

Studies have reported over 300,000 United States veterans coming home from Iraq and Afghanistan have returned with mild to severe Traumatic Brain Injury (TBI); and many of these service members are going unreported. (Hoge, 2009) The men and women are showing signs and symptoms of communication impairments from the blasts. Little research has been completed in this area. Experiments are slowly coming around that address the issues that veterans with TBI have to face. (Cherny, Gardner, Logemann, Newman, O'Neil-Pirozzi, Roth & Pearl Solomon, 2010) The way wars are fought has advanced immensely. Different methods and tactics show advancement in the technology and how they are won. Because of the advancements of war, researchers have begun to look at the outcomes of current and past service members and the effects of TBI due to blasts from war. The blast induced injuries are not a common occurrence and because of this the rehabilitation process it is more difficult. New equipment and techniques are saving lives of service men and women that may have died without it, but advances in weapons like IEDs (Improvised Explosive Device) make it easier for the enemy to harm our service men and women. (Cherny, Gardner, Logemann, Newman, O'Neil-Pirozzi, Roth & Pearl Solomon, 2010)

A range of testing has been done with service members from current and past wars. Some studies expressed the difficulty in distinguishing the different characteristics of TBI compared to Post Traumatic Stress Disorder (PTSD) symptoms. Both of these show similarities

and clinicians want to ensure they are treating the correct problem or treating both. (Bogdanova & Verfaellie, 2012)

About forty years ago Black used the “WAIS Verbal IQ, Performance IQ, Full Scale IQ, Vocabulary, similarities, Block Design, and Object Assembly.” (Black, 1974) The study looked at the veterans from the Vietnam war and how the left and right lobes were effected with blast induced wounds by missiles or shrapnel. Results showed the left hemisphere had lower scores in verbal testing, and the right hemisphere had lower scores in nonverbal testing. (Black, 1974)

Again veterans from the Vietnam War were tested for acquired stuttering (AS) that had no speech disorder prior to their head injury. Many tests were conducted for this experiment. One test “determined language comprehension ability.” (Ludlow, Rosenberg, Salazar, Grafman & Smutok, 1987) They used parts of the Token Test to determine speech comprehension and “for the receptive syntax test,” the patients would choose from a group of pictures to give to the examiner, the picture that best explained a statement. (Ludlow, Rosenberg, Salazar, Grafman & Smutok, 1987)

One author overviews a number of outcomes due to the lack of research and states the importance of using a practice guideline. These self-monitoring techniques that can be used for patients with a less severe head injury known as mild traumatic brain injury (mTBI). There was “improved performance at all levels of severity on memory tasks that simulated the service members communication, organization, and writing. (Bogdanova & Verfaellie, 2012)

The results of the studies point out a need for more research, but show us that with the advances of the war similar injuries did occur back in the 50s. Unfortunately the soldiers then

were not surviving the blasts in the numbers that have today. Therefore there is an increase of communication impairments with our soldiers due to TBI because of our survival rates.

## References

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