



the

HEADLINER

Fall 2006
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The Newsletter of the Brain Injury Association of Oregon

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The Lawyer's Desk: A Look at TBI Legal Representation

Looking at the 2006 Conference

By David Kracke, Attorney at Law
Nichols & Associates, Portland, Oregon

I have a personal belief that when I represent a brain injured individual I am part of a team of people who are all focused on the goal of making that injured person's life better. Other members of this team include the survivor's family members, the treating physicians, the therapists, the concerned friends and the social service providers. While the team members don't necessarily interact with each other on a regular basis, I realize that without any of us, the situation for the injured person would be worse. I take this responsibility seriously, as I know the other team members do as well.

On October sixth and seventh the Brain Injury Association of Oregon held its Fourth Annual Pacific Northwest Brain Injury Conference. The event was well attended by medical providers, therapists, researchers, survivors, friends and members of the legal profession. In other words, it was a chance for the team members to get together for two days of learning, interacting and socializing with the main goal to improve the lives of TBI survivors.

From all accounts, this was one of the best, if not the best, BIAOR Conference ever. Attendees were given the opportunity to learn from some of the most accomplished speakers and panelists ever assembled in one place in the Northwest. In fact, if I have any criticism of the conference, it is that I couldn't be at more than one place at a time.

The Conference was organized into four distinct "tracks", or areas of interest, each with their own set of speakers and panelists. Personally, I was conflicted between attending the tracks that focused on the medical issues versus those that focused specifically on the legal issues. In considering this conflict, I realized just how excellent the conference was for someone like me.

Where else could I attend a Round Table discussion with BIAOR's own eminent Dr. Danielle Erb, the skilled Dr. Andrew Ellis from Progressive Rehabilitation Associates and the exceptional VA

neuropsychologist Dr. Jay Uomoto, followed by a presentation by renowned attorney Ian Mattoch from Hawaii? Where else would I get to hear from Dr. Robert Knight, the director of the University of California Berkeley's Neurosciences department, the leading neuropsychologist Dr. Frederick Parente, Ph.D. and vocational rehabilitation specialist Dr. Robert Fraser? I could go on and on about the incredible programs offered at the conference, and one only needs to look at the speakers list to agree that this was a rare opportunity to interact with some of the most brilliant people in the Northwest. I saw it as a special confluence of some of the most dedicated and intelligent individuals committed to the treatment and representation of brain injury survivors, and I was honored to be a part of it.

Another aspect of the conference that was less visible to the attendees was the commitment made by so many of the BIAOR members, board members and especially our Executive Director, Sherry Stock. In a nut shell, Sherry made this conference the tremendous success that it was because of the months of planning and organization that she put into it, and the BIAOR members, including survivors and their family members, helped tie it all together with their behind the scenes work that was so necessary for the



(The Lawyer's Desk Continued on page 4)

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Headliner DEADLINES

<u>Issue</u>	<u>Deadline</u>	<u>Publication</u>
Spring	April 15	May 1
Summer	July 15	August 1
Fall	October 15	November 1
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D: Full Page	\$500	\$1,500

Policy

The material in this newsletter is provided for education and information purposes only. The Brain Injury Association of Oregon does not support, endorse or recommend any method, treatment, facility, product or firm mentioned in this newsletter. Always seek medical, legal or other professional advice as appropriate.

We invite contributions and comments regarding brain injury matters and articles included in *The Headliner*.

When looking for a professional, look for someone who knows and understands brain injuries. The following are supporting professional members of BIAOR.

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The Brain Injury Association of Oregon has been fortunate to have a jewelry designer create a pin using our three heads logo. This beautiful pin is a pure sterling silver lapel stick pin for both men and women.

It is available through the office for \$15 plus \$2 shipping. It is available online on the BIAOR website or by calling the office or sending a check for \$17 with your mailing address.

If you would like more information about the pin or to order your pin now, call the BIAOR office (503-413-7707 or 800-544-5243) or email (biaor@biaoregon.org).

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± Bronze Member

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(The Lawyer's Desk Continued from page 1)

conference to run effectively. Just ask any of the member volunteers, or Board members, who worked past midnight on Thursday night to ensure that the information packets were put together. They will all tell you that it was worth it, and that they couldn't imagine working late for a better cause.

Nothing goes smoothly, however, and two speakers were unable to attend at the last minute. The attendees were not aware that Beverly Francisco-James, presenting on *Domestic Violence Among the Native Americans*, and Geoff Lauer, presenting on *Methamphetamine Among the Native Americans*, stepped up at the last moment and did great presentations, covering for those who could not attend.

A nod of appreciation also needs to go to the staff of the Airport Holiday Inn for again providing us with their facility. The staff was courteous and helped with the set up of the exhibitor's tables and with the food and snacks provided throughout the conference. I especially liked the set up for the lunches as it provided for a communal environment where survivors and those dedicated to helping them could interact with ease. I enjoyed the many conversations that I had with colleagues who I had not seen for a while, as well as my conversations with survivors who had their own stories to share and questions to ask. I sensed that we were all part of a community and the experience energized me continue on my path of TBI representation. Putting faces with the names and seeing the real life efforts of survivors made me appreciate even more my role as legal representative of those in the TBI community, and I know that this sentiment is shared by my professional colleagues who attended the conference.

After attending some of the medical tracks I have a greater appreciation of the speed at which technology and those who develop the technology are moving. Dr. Knight, from Berkley, was especially encouraging with his discussion of the new MRI technologies being developed. The new high field



Gene Van den Bosch, Executive Director, Richard Adler, BIAWA Board President, Janet Mott, BIAWA Board member

three Tesla MRIs and the developing four and seven Tesla MRIs hold tremendous promise for bringing objective evidence of a TBI where the current one point five Tesla MRIs fall short. The new MRI technology sees farther into the brain, and can detect lesions at the axonal level that could not be detected before. To me, this technology holds the possibility that at least some aspects of the TBI will no longer be invisible. I can see how this technology will improve my ability to represent TBI clients, and more importantly, how it can better direct the treating physicians to consider therapies and treatments that hopefully will lessen the effects of the brain injury. We have come so far from the days of the simple x-ray, and the possibilities for future advances should bring hope to survivors and their families.

This year's conference was entitled "living with Brain Injury: Creating a Future" with an emphasis on the future. One of the goals of the Brain Injury Association of Oregon is to educate survivors and the community to the condition of the injured and to the hope for the future. In organizing and hosting this year's conference, the BIAOR went a long way toward realizing that goal. To those who participated in this year's conference, thank you for helping make the conference one of the finest put on by any brain injury association in the nation. To our other supporters throughout the Northwest, we thank you for your continuing support, and hope to see you at next year's conference.



David Kracke is an attorney with the law firm of Nichols and Associates in Portland. Nichols & Associates has been representing brain injured individuals for over twenty two years. Mr. Kracke is available for consultation at (503) 224-3018.

Brain Injury Funds Restored

Stung by criticism from veterans' service organizations and editorial writers, Congress has added \$12 million to the Fiscal 2007 defense appropriations bill for the Defense and Veterans Brain Injury Center, headquartered at Walter Reed Army Medical Center.

The House and Senate Appropriations Committees had left the center's next-year funding at the Administration's request of \$7 million, half of its 2006 budget. The Veterans of Foreign Wars described that move as "one of the worst possible decisions any lawmaker could make during a time of war."

By mid-September, conferees wanted an alternative to consider in negotiating a final defense money bill. The Senate agreed to and accepted a bipartisan amendment from Sen. George Allen (R-Va.) and Sen. Richard J. Durbin (D-Ill.) to boost the center's budget from \$7 million to \$19 million in the fiscal year that began Oct. 1.

2006 - 2007 BIAOR Calendar of Events

For updated information, please go to www.biaoregon.org
Call the office with any questions or requests

December	7th Annual Holiday Fundraiser—Dec 3 Support Group Holiday Parties
January - April	Advocacy and legislative visits supporting proposed legislation by BIAOR. All interested please contact the office for further information
October	Annual Conference Oct 5-6, 2007 <i>Living with Brain Injury</i>
December	8th Annual Holiday Fundraiser - 2

United Way Campaign

As a 501(c)3 tax-exempt organization, the Brain Injury Association of Oregon is eligible to receive United Way funds. When donating to United Way, you can specify that all or part of the donation be directed to the Brain Injury Association of Oregon .

On the donor form, check the "Specific Requests" box and include the sentence, "Send my gift to Brain Injury Association of Oregon, 2145 NW Overton St, Portland OR 97210"

If your employer has a policy of matching United Way donations, you can take advantage of that.
BIAOR Tax ID #: 93-0900797

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Imagine What Your Gift Can Do.

The most important achievements often start where they are least expected. That's why BIAOR is the perfect place to give. It allows your money to go where it's needed most, when it's needed most, for information about brain injury, resources and services, awareness and prevention education, advocacy, support groups, and conferences and meetings throughout the state for professionals, survivors and family members. Your gift makes a difference at BIAOR.

Please mail to:

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**2145 NW Overton
Portland, OR 97205**

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Type of Payment

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Exp. date: _____
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4th Annual Pacific Northwest

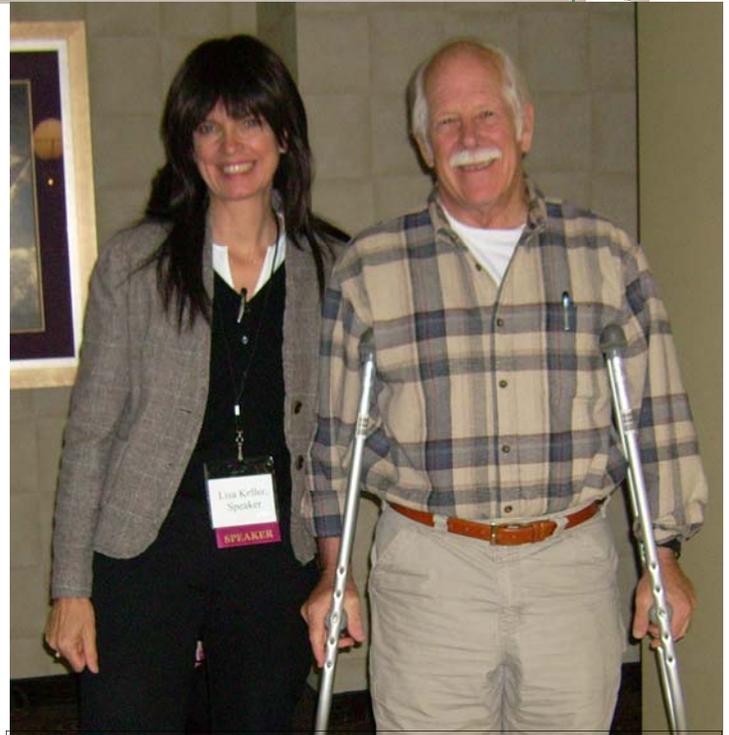
I thought the conference was a very good one overall, but the real highlight was the balance it found between professional and survivor emphasis. We were all in the same room sharing, and I thought speakers were sensitive and respectful of all questions and viewpoints, whether from professional, survivor, or family member.

The presentation on support groups was a personal highlight. It was a nice balance of anecdotes and skills one can take away to use in a group format.

The presentation on acute neurosurgical management of intracranial pressure by Dr. Dilantha Ellegala was one of the most innovative examples of clinical neuroscience research I've seen in a long time. This work will advance our understanding of intracranial pressure and will favorably impact clinical care in the near future.

I thought Lisa Keller was interesting, articulate and yet honest regarding her areas of weakness. She modeled examples of how she makes her world work for her (e.g., her alarm watch). She, Sandy, and Martin Russo from Daytimer were helpful in giving me an idea of what the BIRK is and the niche it can fill. Not a panacea by any means, but looks like it has a lot to offer, especially for folks who do not have resources or access to a rehab program.

I was grateful to be able to attend quite a few presentations this year compared to last, but I was most grateful for the opportunity to sit down for a good talk with the family of a brain-injured young man with whom I worked a few years back. They were facing a very serious injury, but they seemed so stressed and frustrated at the time. I worried that I had not been of service to them. Time had shown them some ways in which I was helpful, and it meant a lot to hear that. Plus, it was great just to be able to relax, talk, and laugh with them. — Tom Boyd, PhD



Lisa and Carl Keller

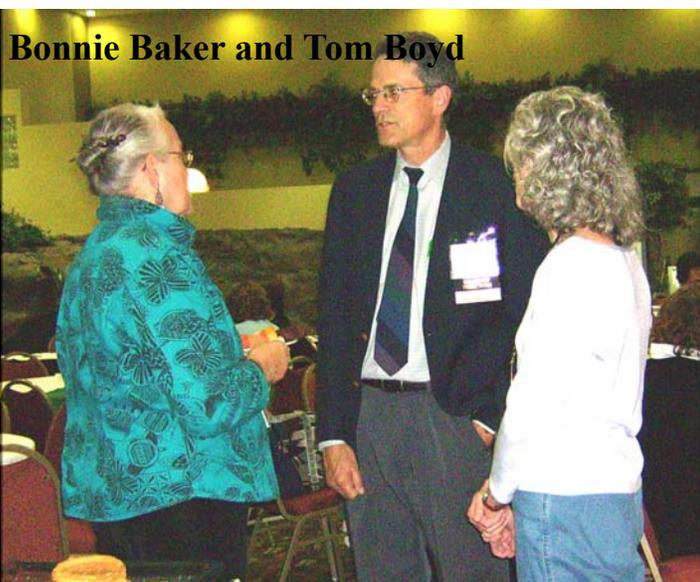
I especially liked the BIRK program presentation. Some of the color coded ideas are what my (non TBI) spouse uses to remind her of things that she may forget about.

For example:

She uses the orange (high priority) wrist band to remind her that her curlers are heating up, or that the oatmeal is on and should not be forgotten. The color coding and ONE PLACE to put things is a good organizational reminder for all of us.

I use the same types of tools: My change is always in the same pocket, my keys in another, never any others. So many simple things that non TBI survivors take for granted but the enforced organization of BIRK is a nice structure to "fall into". My one place to store things is in my palmtop computer. It has all my calendar, contacts with their phone numbers and a place to write notes about them and my to-do list. Now if I could just remember to CHECK IT regularly ... I bought a pair of six pocket pants so I could keep it with me. In fact, four pair so I can wash some and keep the same style on.

Being part of a "structured" TBI group is also a benefit. We never need to explain ourselves and are listened to. We all have a story to tell and it is good when we can tell it without someone saying "I understand" when really, they couldn't possibly know what we are going through. — Curtis Brown



Bonnie Baker and Tom Boyd

Brain Injury Conference

As much as the high quality presentations, I was impressed by the "little" things: the harpist playing background music at lunch, the opportunity for survivors, family members, and professionals to mingle over a glass of wine at day's end, the opportunity to purchase custom-made greeting cards from a survivor. All of these experiences point to quality of life, which is the ultimate goal of all the scientific research, rehabilitation therapies, support groups, and advocacy programs, well represented at this year's conference.



Perhaps more of the same next year? More opportunities for support group gatherings for survivors, more opportunities for survivors to showcase their wares, etc. — Laurie Ehlhardt, PhD



Registration table was manned by BIAOR Board members Chuck McGilvray and Jeri Cohen, and Maccabee, who looked dog tired.

Jane Laciste, California



Ron Hoover, a Portland Attorney, and his wife, Annie, a nurse with the Portland Red Cross



Once again this year the strength of the 2006 Annual BIAOR Conference this October was the opportunity for traumatic brain injury survivors and their families to attend the conference sessions alongside treatment professionals. Questions to presenters from both of these groups then crossed over the divide between those living with the devastating effects of brain injury and those seeking new and innovative solutions in support of survivors. The emphasis in these sessions on methods for building a positive future after brain injury was well represented by presenters who provided information on a range of topics from new concepts in post acute treatment methods to innovative compensatory strategies such as the Brain Injury Recovery Kit. The opening presentation on Saturday morning by Lisa Keller was especially memorable because Ms. Keller was an embodiment of the possibility building a positive future after a brain injury. McKay Sohlberg presented her annual update of her U of O project on communication assistive technology, an e-mail software program designed specifically for the challenges in attention deficit and short term memory that face TBI survivors. This was well attended by survivors and spoke to the potential of computer technology as a compensatory aid to the TBI population. The interaction both in each session and in the vendor kiosk area was the highlight of this year's conference. The connections made and friendships begun make all the planning and work worthwhile.

I would add a big applause to Sherry Stock, Executive Director, and the other conference planning committee members for their efforts and for the success of the 2006 BIAOR Conference - Bob Malone

Dr. Aaron DeShaw, Erin Molyneux, and Wayne Eklund, BIAOR Board President



Dr. Danielle Erb and Ellen Greenlaw



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YOUR ANNUAL HOLIDAY OFFICE PARTY DESTINATION FOR INDIVIDUALS OR GROUPS

COME JOIN BIAOR AT OUR ANNUAL
HOLIDAY BRUNCH, AUCTION AND PLAY

Join us for the seventh annual fundraiser

Brain Injury Association of Oregon

Portland Center Stage * Sunday, December 3, 2006
Please Purchase tickets by November 30, 2006.



For further information please contact:
Sherry Stock at biaor@biaoregon.org

Brain Injury Association of Oregon
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Portland OR 97210
503-413-7707 • 800-544-5243
Fax: 503-413-6849
Tax ID # 93-0900-797

Entertainment: 11:00 am

Balloon Sales & Raffle: 11:00 am

Brunch and Silent Auction: 12 noon

Portland Center for the Performing Arts

128 NW 11th, In the Portland Amory in the Pearl

Oral Auction: 1:00 p.m.

Portland Center Stage - 2:00 pm

I Am My Own Wife

by Doug Wright

Directed by Victor Pappas; Performed by Wade McCollum

Winner of the 2004 Pulitzer Prize for Drama, *I Am My Own Wife* spins the spellbinding tale of Charlotte von Mahlsdorf, a German transvestite who manages to survive the horrors and upheavals of mid-20th century Europe through a combination of cunning intelligence, primal instinct and amazingly good fortune. Her matter-of-fact retelling of this remarkable tale is the key to the fascination she inspires in both the author and the audience. Although it is non-fiction, the story is spun like an action-adventure drama. The *New Yorker* described *I Am My Own Wife* as "Brilliant!" The *Wall Street Journal* proclaimed that "This play deserves every prize there is." And *Newsday* called it "A rich, riveting and thrilling mystery."

Sign up early—tickets limited to first 200

Here's my reservation!



Seventh annual fundraiser!



Brain Injury Association of Oregon

Portland Center Stage • Sunday, December 3, 2006

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

E-Mail Address: _____

Please Reserve the following:

Table Sponsor • \$1,000.00

Sponsorship includes 10 tickets at the same table, name or company name listed in program, name or company name listed on BIAOR website with link, name or company name listed in newsletter, and signage on table the day of the event. (\$500 tax deductible - Tax ID # 93-0900-797)

• I NEED _____ PLAY TICKETS (one ticket per paid attendee).

Please seat me at a no-host table • \$100.00 per person

If you have several friends that you would like to sit with, we encourage you to submit one check or multiple checks in one envelope. Tables accommodate 10 people. (\$50.00 tax deductible)

• I NEED _____ PLAY TICKETS (one ticket per paid attendee).

I am unable to attend. Please accept my donation for: \$ _____

I would like to donate to the auction Yes ___ No ___ Item: _____

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Memory Strategies

About Memory

Studies have shown that the patient's adjustment can be deeply impacted by mild impairments in functions such as short-term memory. The extra effort, vigilance, and concentration needed to compensate for such mild deficits result in an enormous fatiguing effect. Such an effort produces a continuous drain on energy levels and results in chronic fatigue. Intellectual functions such as short-term memory tend to deteriorate as fatigue increases. Such practices give rise to a vicious cycle that leads to feelings of inadequacy, discouragement, irritability and depression.

-- Source -- Neuropsychological Assessment, 2nd Ed., 1983, by Muriel D. Lezak



Memory Strategies Action Plan

1. Develop a routine and stick to it. Advance planning can help reduce the risk of forgetting.
2. Create a place for everything and store everything in its place.
3. Get Organized.
4. Utilize a Tote Bag or back pack. Plan ahead place things in the tote bag or Back pack that you will need for the day's activities.
5. Use a to do list.
6. Use a Journal to keep track of important plans, impressions, ideas, and appointments.
7. Use a planning calendar.
8. Use a system of reminders.
9. Use cross references.
10. Use highlighters, margin notes and tabs.
11. Use repetition.
12. Make notes and use tabs.
13. Focus on one thing at a time.
14. Understand that your sense of knowing might have become impaired by your head injury -- Learn to trust your instincts.
15. Live in the moment.

The Brain Injury Association of Oregon can deliver a range of training for your organization. This includes:



- Brain Injury 101
- Methamphetamine and Brain Injury
- Brain Injury for the Case Manager
- Brain Injury and Vocational Rehabilitation Counselors
- When worlds collide – the Worlds of BI and MR/DD
- How Brain Injury Affects Families
- Training for Direct Caregivers
- Traumatic Brain Injury: A Guide for Educators
- Returning to Work After Brain Injury
- And more!

For more information contact Sherry Stock, Executive Director, Brain Injury Association of Oregon at sherry@biaoregon.org

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www.homeward-bound.org

In response to increased need in the brain injury community, Homeward Bound Rehabilitation has just opened a full day program and this fall will be adding a supported apartment-living program. We desire to provide a more complete spectrum of services to the person with acquired brain injury, building on the residential program we have provided for 18 years at our five-bed rehab house and six-bed group farm-setting home.

Our philosophy is that we must work with the whole individual, not just the brain injury. Brain injury is what happened to them, not who they are. Tying their past to who they are today is critical for helping them become a whole person again. We use both restorative and compensatory training to improve the person's ability to function in all aspects of family and community life. At Homeward Bound we look for the abilities of the individual rather than the deficits. We look for what the TBI survivor can do rather than what they can no longer do - this in turn leads to increased independence. As an example, one of our residents was a world-renowned gem cutter prior to his brain injury. Initially he suffered from deep depression assuming he would never again be able to create his work. On the farm we created a studio for him and brought out his gem cutting equipment. He is currently working several hours most days and has begun selling to some of his old contacts. He will likely be one of our first residents to move into the supported-living apartments and will come back to the farm daily for day programs and to work in his studio.



Our Day Program



The day program features an interdisciplinary and comprehensive curriculum including cognitive and behavioral assessment and intervention. Cognitive exercises (including computer-assisted) are used to improve attention, memory, and executive skills. Each client starts the day orienting with current events and with their day planner. Several are working on Medication Management skills. Other classes available include money management, shopping, cooking, and nutrition, just name a few. All our classes are designed to prepare the client for independent living.

The Apartments

Apartment living is in a nearly new apartment building located in Hillsboro with both one and two bedroom units available. Public transportation is very accessible since the apartments are located next to the Max transit line and it's also only one block from a Starbucks. Homeward Bound residents will be involved either in volunteer jobs, or gainful employment, or they will be bused back to the Farm House for the day program. The amount of supervision and staff involvement will be evaluated and then provided.



Fundraiser For TJ Webber - Got Helmet ?

On August 15th 2006 TJ Webber was longboarding in South Salem. With no helmet at a speed of 30 – 40 mph he hit head first to the pavement and suffered an acute head injury. This resulted in a Traumatic Brain Injury that requires special care and medical expenses not entirely covered by insurance. Please attend or donate to this family in time of crisis, God Bless You and Thank You !

When: Friday December 1st

Where: McNary High School
595 Chemawa Rd
Keizer Oregon

Time: Starts at 6:00 pm

What: Spaghetti Dinner

Cost: \$10.00 Adults \$5.00 Youth (10 & under)

Dinner from 6:00 pm until 7:15

BINGO !

Starts at 7:30

Cost: \$1.00/ card (min. of 8 games to be played) Cards are good for all games

SILENT AUCTION

This will run through the evening until 9:00 pm Some items for auction are family night fun packs, catered dinner for 4, 1 night stay for 2 at Wittenburg in Keizer, and much more to come.

If you have questions please call: (503)393-5023 leave a message, or call (503) 990 –1269 ask for Pam or Jim.

Donations also being accepted at MaPs Credit Union to the TJ Webber Fund #3951213 please call Pam for address

Homer Simpson Quotes - from *The Simpson's*

Homer: Weaseling out of things is important to learn. It's what separates us from the animals ... except the weasel.

Homer: Kids, you tried your best and you failed miserably. The lesson is, never try.

Homer: How is education supposed to make me feel smarter? Besides, every time I learn something new, it pushes some old stuff out of my brain. Remember when I took that home winemaking course, and I forgot how to drive?

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3 lbs

For the TV watchers among us, a new show is premiering on CBS at Tuesday 10:00 PM, November 14, 2006, that might be of interest to you. It is called *3 lbs* and it is about people who sustain brain injuries and the neurosurgeons who treat them.

This new medical drama is about two elite neurosurgeons who have different takes on how to treat their patients. One who cares about them and one who only cares about their brains. Dr. Doug Hanson (Stanley Tucci) is a brilliant neurosurgeon and one of the best in New York City. His method is simple. The brain is like a wire box, and the patient is not important because that is just the outside. Dr. Jonathan Seger (Mark Feuerstein) has a totally different point-of-view. To him, the psychological health of his patient is a priority. When these two top doctors work on a patient, however, they forget their differences and perform miracles.

The Pilot Episode:

After a young girl falls ill in the middle of a violin recital, she is sent to brain surgeon, Dr. Douglas Hanson. While Dr. Hanson figures out what is wrong in the young girl's brain, he also supervises the first day of his protégé, Dr. Jonathan Seger.

There is no scientific study more vital to man than the study of his own brain. Our entire view of the universe depends on it. - Francis H.C. Crick (from *Scientific American*, September, 1979)

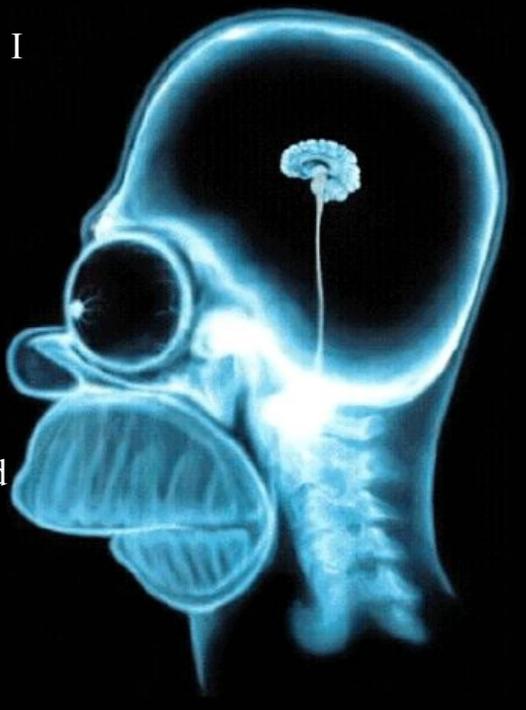
Homer: Aw, twenty dollars! I wanted a peanut!

Homer's Brain: Twenty dollars can buy many peanuts!

Homer: Explain how!

Homer's Brain: Money can be exchanged for goods and services!

Homer: Woo-hoo!



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Brain Injury Researchers Taking Clue From Rodent

Hibernating Arctic ground squirrels might guide scientists to new treatments for battlefield injuries, strokes and cancer.

Tests show that during hibernation ground squirrels are able to resist brain damage and injuries related to loss of blood flow and oxygen to the brain.

Scientists said they think this is partly because squirrels' body temperatures can go below freezing without causing damage – a rare feat for a mammal.

"The Arctic ground squirrel is famous for being super cool," said Kelly Drew, a scientist and professor of the Institute of Arctic Biology at the University of Alaska Fairbanks. "The more I play with these animals the more I find they are remarkable. They just don't display trauma to the brain."

Drew said it's possible that a pill or an injection could allow the human body to mimic what ground squirrels do during hibernation.

Induced hibernation might mean injured soldiers or people without access to medical treatment could survive with fewer long-term injuries, Drew said.

Doctors sometimes use drug-induced comas in patients with brain injuries. Hibernation differs from coma because it is not caused by brain malfunction or disease.

Drew's research has won \$2.4 million in funding, some of it from the Defense Department.

Drew said it has been confirmed repeatedly that cooling the temperature of an animal or human protects the brain. Now she is trying to figure out how hibernation works.

She said squirrels' rate of blood flow goes down to a dramatic 10 percent of normal on average, which resembles stroke conditions.

"If we want to make some sort of impact with our work, stroke is where we want to research," Drew said. She added that stroke damage can sometimes progress for days. "If somebody has a

stroke, usually they are paralyzed on one side – they can't talk."

For soldiers, the resulting difference could mean coming out of induced hibernation after major trauma and not being paralyzed.

Brian Barnes, director of the Institute of Arctic Biology, said it could take 10 years to understand how ground squirrels resist brain damage during hibernation and possibly 10 more years for clinical tests on humans.

"But both time frames are speculative," Barnes said.

Applying squirrels' on-and-off cycles of six to eight months hibernating in nests to humans could also allow astronauts to spend extended periods in space or stop cancer cell growth, Barnes said.

By: Hannah Guillaume
Scripps Howard Foundation Wire

Source: <http://www.fortwayne.com/mld/journalgazette/living/15941292.htm>

Neurologist: Head trauma puts troops at risk for further injury

A concussion is like an ankle sprain, said Warren Lux, a neurologist and acting director of the Defense and Veterans Brain Injury Center. "If you're hurt, you're not at 100 percent and you're at risk for more injury," he said.

The risk of concussion to U.S. troops in Iraq and Afghanistan is higher now than it has been in past wars, according to the center, mainly because of the prevalence of bomb blasts. That's why the center is focusing on concussion and other forms of mild Traumatic Brain Injury to help figure out how to treat it and how long troops should wait before returning to hazardous duty. Right now, they know this for sure: "Brain injuries can affect your ability to make good decisions," he said.

Just as it's unreasonable to expect someone who just sprained an ankle to go for a run, it's probably not the best idea for someone who experienced a concussion to immediately return to combat where quick cognitive processes and reflexes are needed, Lux said. Concussion often results in a temporary loss of consciousness, confusion and memory loss. Most people recover from concussions within about a week, and anyone who is going to recover has usually done so within three months, said Lux.

But while brain function often returns to what it was before the injury, the brain itself might not fully heal. "Statistically there's a higher rate of brain injury in people who've already had a

brain injury than there is in the general population," Lux said.

Some people engage in risky behaviors that raise the probability of injury, said Lux. Others might have delicate brains, or perhaps the brain becomes more susceptible to a second or third injury as a result of previous damage. What is known is that after multiple concussions, the chance of recovery goes down, and "multiple concussions can be more than additive," Lux said. That means that multiple concussions can add up to severe, long-term impairment.

By Matt Millham, Stars and Stripes
<http://www.estripes.com/article.asp?section=104&article=41307>

Helping to improve the lives of people with brain injury

Rondi Grace

Upon my arrival in the great state of Oregon, I truly found myself in new territory. Not only was I working for a new organization, I found myself in the position of developing a new service for people with brain injury. With the resources of MENTOR ABI (a group of local providers who specialize in post-acute rehabilitation and supports for persons with acquired brain injury and other neurological disorders) squarely behind me, I began in earnest developing supports for people with acquired brain injuries that were community based. Although MENTOR ABI is the largest and oldest provider of post-acute rehabilitation services in the country, it had yet to offer that in Oregon. Initially, we planned to create an hourly supported living service for those people with brain injury who have a "DD/MR" waiver. Brokerage models were designed in the state of Oregon several years ago to offer an array of services for people who did not require 24-hour care. We noticed that there was no Portland area brokerage that offered specialized

supports for persons with brain injuries who were served on the DD/MR waiver.

Progress has been made. At this point, Developmental Systems (a part of the MENTOR Network) can provide specialized supports for persons with brain injury in the Portland community – particularly those who need a few hours of support each day or week to maintain their quality of life and independence at the highest level possible. The types of services offered are community living supports, community inclusion supports, family training, specialized supports, and supported employment. So far, this has been a welcome and rewarding service development activity that addresses a missing part of the continuum of care for people with brain injuries.

Along with establishing hourly services, Developmental Systems and MENTOR ABI, is also developing a group home in the community for men with brain injury who currently reside in one of the forensic units at the Oregon State Hospital. It will be a wonderful

opportunity to work in partnership with Addictions and Mental Health and the Psychiatric Security Review Board to reintegrate these men back into the community. It has been real pleasure to work with everyone involved and see their unwavering commitment, dedication, and passion for people. I am particularly excited to participate in developing an option for these men that will surely impact the quality of their lives. Developmental Systems is currently in the process of becoming a Community Mental Health Provider and will continue to expand our services as needs arise within the state of Oregon.

From gaining the opportunity to be a part of these service development activities, I have gained a much stronger sense of determination and dedication to do what we can to meet the needs of the people with brain injuries in Oregon.

For more information on The Mentor Network, contact Rondi at Rondi.Grace@TheMentorNetwork.com



Walk for Thought 2006

The Salem Brain Injury Support Group hosted the "Walk For Thought" on September 30, 2006. The Walk was held at Bush Pasture Park in Salem. The purpose of the Walk was to raise funds for support group activities and to raise awareness about brain injury in the community. The participants were greeted by a beautiful fall day and lots of activity in the park. Some participants walked around the park a couple of times and some just strolled. There were about 40 participants including a group from Windsor Place. Everyone seemed to enjoy seeing each other and sharing in the picnic that was supported by several community grocery stores. The prize for the person who raised the most pledges was won by Pat Real. He won an excursion on the Willamette Queen Sternwheeler. The second and third prize winners were Nancy Dalrymple and Gene Shriner.

The event organizers would like to thank the many people and businesses that supported the Walk. We want to say thank you to the following businesses.

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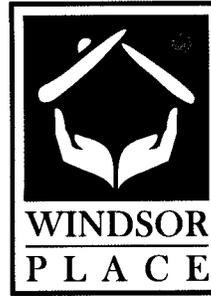


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If you look at the anatomy, the structure, the function, there's nothing in the universe that's more beautiful, that's more complex, than the human brain. -Keith Black (quoted in Discover magazine, April, 2004)

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Holiday Strategies: Planning Strategies for A Happy Holiday Season



by Carolyn Rocchio

Thanksgiving through the first week of January is a special time of the year for family gatherings, parties, and holiday celebrations. As much as the family may look forward to this time of happy occasions, it can also be a difficult time for individuals with brain injury and their families.

For some it can be a period of depression when thoughts are more focused on losses and an inability, imposed by the injury, to participate in and enjoy the holidays as before the brain injury occurred. Families with unrelieved caregiving responsibilities may be unable to attend functions as in the past and in some cases refuse invitations which exclude the family member with brain injury. Even inclusive invitations may be declined for fear of embarrassing social skills lapses on the part of the individual with brain injury.

Alcoholic beverages are commonly offered at social events during the holidays and alcohol consumption can be very dangerous for persons after a brain injury. It is believed that the effect of alcohol is significantly increased after a brain injury, having possibly 3 times the effect to that of an uninjured person. Many individuals with brain injury use prescription drugs for seizures and other medical conditions and the use of alcohol may alter the effectiveness of these drugs and/or increase the risk of seizures.

When, as a result of a brain injury, individuals are dependent upon a structured environment to function at peak performance, the holiday season can be a difficult time. In most

households the holiday season is replete with added stress to get things done, additional entertaining, shopping, and extraordinary confusion. For individuals with low tolerance to noise and increased motion in their environment, they often become stimulus bound, and shut down cognitively. Therefore, it is wise to consider planning around problem areas for an enjoyable holiday season. Although many individuals with brain injury accommodate change well, it is often best to prepare in advance so schedule changes will be accepted more smoothly. Some suggested ways for making the holidays fun and less stressful for all, particularly when persistent cognitive /behavioral issues are problematic might include:

1. Holiday shopping should be a fun activity and indoor malls are weather controlled and safe places for strolling on foot and/or for those wheelchair or walker assisted. However, the holiday period can make shopping less than a fun activity without preplanning. Start early to avoid the holiday crowds and use the opportunity to incorporate cognitive exercises into the planning. The individual with brain injury should make a list of gifts to be purchased or hand made, when possible, suggested gift ideas and estimates of costs associated with the gifts.

2. Catalogs that come in the mail this time of year are wonderful for gift ideas and also for estimation of prices. Take some time to sit down and look through a few as part of the independent planning phase.

3. Make out a simple budget before going to the bank and allow your family member with brain injury as much control

of the funds as possible even though money management skills may be impaired.

4. Place greater emphasis on use of journals or calendars to record routine events as well as holiday activities. Schedule a week in advance, with a daily review to make note of any changes as they come up. Those accustomed to a daily routine may be better prepared when special dates and activities are written in the journal and/or on the calendar in colored ink for emphasis.

5. Each day, during the holidays, orient the individual by discussing the day's activities over breakfast to avoid misunderstandings about changes from the normal routine. It is helpful to repeat this information several times during the day for those with severe memory problems.

6. If bright or flashing lights bother your family member and/or possibly trigger seizures, carefully plan any additional lighting that will be used during the holidays and avoid laser holiday lighting displays.

7. Crowded places and loud music may also bother some individuals and should be taken into consideration and monitored, if necessary.

8. Food is a big part of holiday fun and many of the foods may be very temptingly displayed. Parties, holiday family dinners, and open house gatherings are often scheduled at times that do not coincide with routine mealtimes, thus, presenting a problem for those whose mealtimes are more rigidly scheduled. You may want to offer a light

(Holiday Strategies Continued on page 21)

(Holiday Strategies Continued from page 20)

snack at the regular mealtime to "tide him/her over" until the main meal, or make whatever adjustments are necessary. For those with more severe cognitive deficits, which interfere with appropriate food intake, it may be necessary to help with monitoring to avoid overeating. It is very common for damage in the hypothalamus area of the brain to interrupt signals to the brain which help the individual know when their appetite has been satisfied, thus, many with brain injury need help with quantity control monitoring. Additionally, memory problems and attention can derail a persons resolve to watch their food intake to avoid excessive food and beverage intake. After a brain injury burning of calories may also be changed and individuals who could eat anything and everything before the injury may need to more diligently watch calories to avoid weight gain.

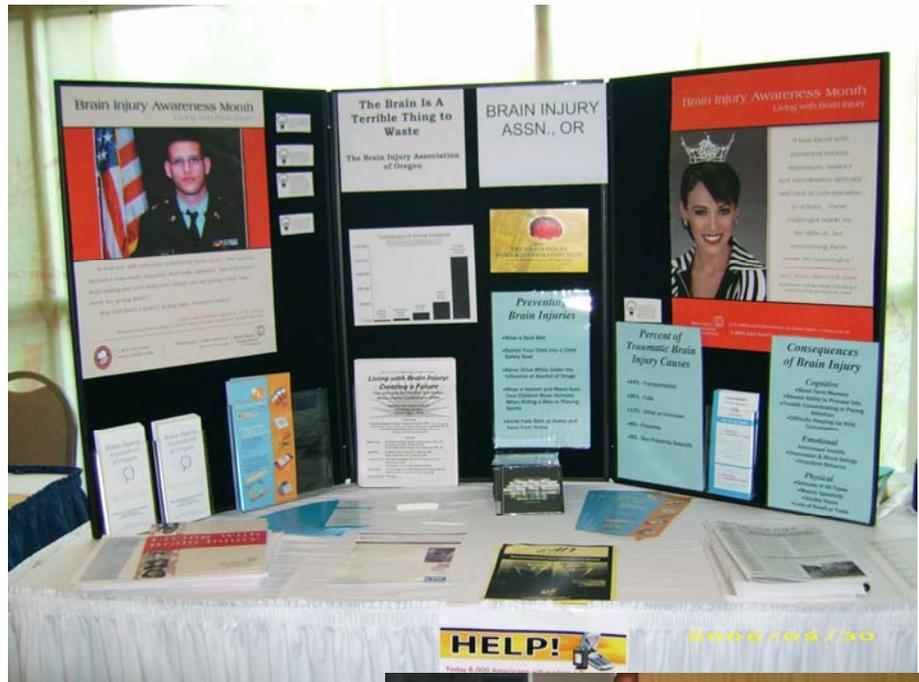
9. By all means don't forget that increased activity during the holidays may be more fatiguing than usual so plan rest periods accordingly. This is particularly important when cognition and behavior are problems. Fatigue often increases confusion that can result in an outburst or other kinds of unpleasant behaviors.

10. Structure can be your best strategy for ensuring the entire family has a higher quality of life. Initially it takes effort to get the structure in place but it pays dividends in the end. Flexibility is a key word during the holiday season but planning and preparation will hopefully result in a happy holiday for family and friends.

Next comes New Year's resolutions! Start thinking about ways your entire family can enjoy life more fully, fulfill the demands of your caregiving role and provide the best possible quality of life for your family member with brain injury.

Planning strategies for a happy holiday season,' by Carolyn Rocchio, *Family News and Views*, November, 1997. Reprinted courtesy of the Brain Injury Association.

BIAOR At The Oregon Occupational Therapists Annual Conference in Eugene



Jeri Cohen, BIAOR Board Member and Volunteer



Oregon Brain Injury Support Groups

Bend

CENTRAL OREGON SUPPORT GROUP

2nd Saturday 10:30am to 12:00 noon

St. Charles Medical Center

2500 NE Neff Rd, Bend 97701

Rehab Conference Room, Lower Level

Joyce & Dave Accornero, 541 382 9451

Accornero@bendbroadband.com

Brookings

BRAIN INJURY GROUP (BIG)

1st Monday 7:00—8:30 pm

Brookings Evergreen Federal Bank

850 Chetco Ace, Brookings OR 97415

Dynelle Lentz, 541-412-8531

Cottage Grove

BIG II (Brain Injury Group II)

every Thursday 11 a.m. to 12:30 p.m.

the Jefferson Park Recreation Room

325 S. Fifth St, Cottage Grove

For directions and information,

Anna, 767-0845.

Corvallis

STROKE & BRAIN INJURY SUPPORT GROUP

1st Tuesday 1:30 to 3:00 pm

Church of the Good Samaritan Lng

333 NW 35th Street, Corvallis, OR 97330

Call for Specifics

Amy Nistico, (541) 768-5157

aeasterl@samhealth.org

Eugene (2)

COMMUNITY REHABILITATION SERVICE OF OREGON

3rd Tuesday 7:00 to 8:30 pm

Central Presbyterian Church

15th & Patterson, Eugene, OR. 97401

Call for Information

Jan Johnson, (541) 342-1980

comrehabjan@aol.com

BIG (BRAIN INJURY GROUP)

Tuesdays 11:00am-1pm

Hilyard Community Center

2580 Hilyard Avenue, Eugene, OR. 97401

Curtis Brown, (541) 998-3951

BCCBrown@aol.com

Hillsboro (3)

HELP

(Help Each Other Live Positively)

4th Saturday - 1:00-3:00 pm

TBI Survivor self-help group

(Odd months)

TBI Family & Spousal (Even Months)

Cognitive Enhancement Center

982 Naomi Court, Hillsboro, OR 97124

Brad Loftis, (503) 547-8788

bcmuse2002@yahoo.com

HOMEWARD BOUND SUPPORT GROUP

Call for further information - Starting in Sept

Carol Altman, (503)640-0818

Klamath Falls

SPOKES UNLIMITED TBI GROUP

4th Friday 3:00pm to 4:30pm

415 Main Street

Klamath Falls, OR 97601

Dawn Lytle, (541) 883-7547

dlytle@spokesunlimited.org

Lebanon

BRAIN INJURY SUPPORT GROUP OF LEBANON

1st Thursday 6:30 pm

Lebanon Community Hospital

525 North Santiam Hwy, Lebanon, OR 97355

Conf Rm #6

Lisa Stoffey 541-752-0816

lstoffey@aol.com

Medford

TURNING POINT

3rd Tuesday 4:00pm-5:00pm

Call for More Information

Pam Ogden, (541) 776-3427

Pamela.Ogden@sogoodwill.org

Newport

BRAIN INJURY SUPPORT GROUP OF NEWPORT

2nd Saturday 2-4 pm

657 SW Coast Hwy

Newport, OR 97365

(541) 574-0384

www.progressive-options.org

Pendleton

Inactive at this time.

For more information contact:

Joyce McFarland-Orr (541) 278-1194

jmcfarland@Oregonrail.net

Portland (9)

BRAINSTORMERS I

2nd Saturday 10:00 - 11:30am

Women's self-help group

Wilcox Building Conference Room A

2211 NW Marshall St., Portland 97210

Next to Good Samaritan Hospital

Northwest Portland

Jane Starbird, Ph.D., (503) 493-1221

drstarbird@aol.com

BIRC Alumni Support Group

Last Tuesday of every odd month

1815 SW Marlow, Ste 110, Portland, 97211

Contact Doug Peterson for additional information

503-292-0765 or doug@progrehab.com

BRAINSTORMERS II

3rd Saturday 10:00am-12:00noon

Survivor self-help group

Emanuel Hospital, M.O.B.-West

2801 N Gantenbein, Portland, 97227

Northeast Portland

Steve Wright (503) 413-7707

biaor@biaoregon.org

CROSSROADS (Brain Injury Discussion Group)

2nd and 4th Friday, 1-3 pm

Independent Living Resources

2410 SE 11th, Portland, OR 97214

Southeast Portland

Roxie Choroser, 503-232-7411 Roxie@ilr.org

FAMILY SUPPORT GROUP

3rd Saturday 1:00 pm-2:00 pm

Self-help and support group

Currently combined with *PARENTS OF*

CHILDREN WITH BRAIN INJURY

Emanuel Hospital, Rm 1035

2801 N Gantenbein, Portland, 97227

Northeast Portland

Joyce Kerley (503) 413-7707

joycek1145@aol.com

FARADAY CLUB

Must be pre-registered -

1st Saturday 1:00-2:30pm

Peer self-help group for professionals
with brain injury

Emanuel Hospital, Rm. 1035

2801 N Gantenbein, Portland, 97227

Northeast Portland

Arvid Lonseth, (503) 680-2251 (pager)

alonseth@pacifier.com

TBI SOCIAL CLUB

Location varies, call for times and

location of meetings

Meets twice a month - days and times vary
call for information

Sandra Ward, (503) 735-4857

slwsundance@qwest.net

HANDLING STRESS AND ANGER

This group will meet once a month to learn
methods of stress reduction and to explore ways of
lessening impulsive anger. For more information

contact: Joyce Kerley

(503) 413-7707

joycek1145@aol.com

PARENTS OF CHILDREN WITH BRAIN INJURY

This group will meet once a month, and is a self-
help support group. Currently combined with

FAMILY SUPPORT GROUP

Emanuel Hospital, Rm 1035

2801 N Gantenbein, Portland, 97227

Northeast Portland

Joyce Kerley (503) 413-7707

joycek1145@aol.com

Roseburg
UMPQUA VALLEY DISABILITIES NETWORK
 2nd Monday 12 noon - 1pm
 419 NE Winchester, Roseburg, OR 97470
 Tim Rogers, (541) 672-6336 x202
 timrogers@udvn.org

SALEM SOCIAL CLUB
 6:30pm - 8:30pm
 2nd Wednesday of
 March, June, September and December
 Windsor Place
 3005 Windsor Ave. NE, Salem, OR 97301
 Sharon Slaughter, (503) 581-0393
 sharonlaughter@qwest.net

No, indeed; I don't know anything. You see, I am stuffed, so I have no brains at all. - L. Frank Baum (the "Scarecrow" in *The Wonderful Wizard of Oz*)

Salem (2)
SALEM BRAIN INJURY SUPPORT GROUP
 4th Thursday 5pm-7pm
 Salem Rehabilitation Center
 2561 Center Street, Salem OR 97301
 Carol Mathews-Ayers, (503) 561-1974
 smpays@salemhospital.org

Vancouver Washington
VANCOUVER TBI SUPPORT
 1st Thursday, 6-8pm
 Disability Resources of SW Washington
 5501 NE 109th Court Suite N
 Orchards, WA
 Cindy Falter (360) 694-6790
 Kaycie Tolleson, (360) 750-6773

ARE YOU A MEMBER?

The Brain Injury Association of Oregon relies on your membership dues and donations to operate our special projects and to assist families and survivors. Many of you who receive this newsletter are not yet members of BIAOR. If you have not yet joined, we urge you to do so. It is important that people with brain injuries, their families and the professionals in the field all work together to develop and keep updated on appropriate services. Professionals: become a member of our Resource Referral Service. 2005 dues notices will be mailed this month. Please remember that we cannot do this without your help.

Your membership is vitally important when we are talking to our legislators. For further information, please call 503-413-7707 or 1-800-544-5243 or email biaor@biaoregon.org.

Brain Injury Association of Oregon

- New Member Renewing Member

Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Member is:

- Individual with brain injury Family Member
 Professional. Field: _____
 Other: _____

Type of Payment

- Check payable to BIAOR for \$ _____
 Charge my VISA/MC/Discover Card \$ _____
 Card number: _____
 Expiration date: _____
 Print Name on Card: _____
 Signature Approval: _____
 Date: _____

Type of Membership

- Basic \$35 (\$50 for family) Students \$25
 Non Profit \$75 Professional \$100 Sustaining \$200
 Survivor Courtesy \$ 0 (Donations from those able to do so are appreciated)

Sponsorship

- Bronze \$250 Silver \$500
 Gold \$1,000 Platinum \$2,000

Additional Donation/Memorial: \$ _____

In memory of: _____
 (Please print name)

Please mail to:

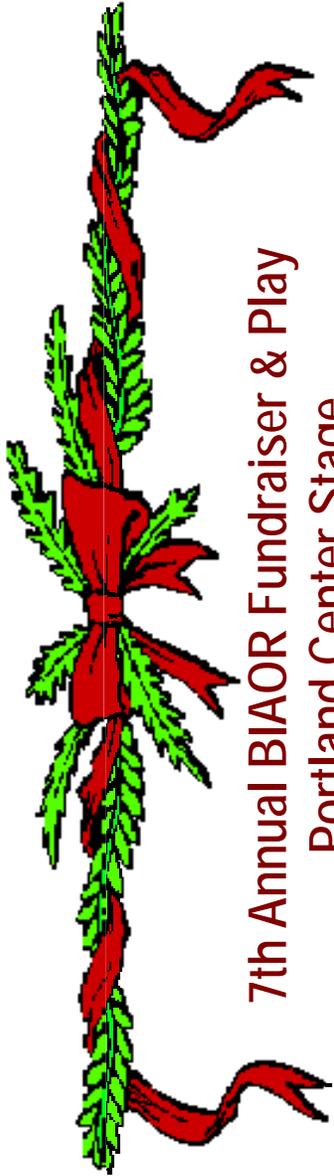
BIAOR Membership
 2145 NW Overton Street
 Portland, OR 97210
503-413-7707 or 800-544-5243
Fax: 503-413-6849
www.biaoregon.org • biaor@biaoregon.org

If you are receiving unwanted or multiple newsletters or have errors in your name or address, please contact BIAOR—503-413-7707 or biaor@biaoregon.org. Thank you.



The Brain Injury Association of Oregon
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Portland, OR 97210-2924

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**7th Annual BIAOR Fundraiser & Play
Portland Center Stage**

December 3, 2006, Portland, OR

**Great Holiday / Office Party Idea
Register Early—Limited Seating**



How To Contact Us

Brain Injury Association of Oregon (BIAOR)

2145 NW Overton
Portland, OR 97210-2924
(503) 413-7707
Toll free: (800) 544-5243
Email: biaor@biaoregon.org
Website: www.biaoregon.org

Oregon Brain Injury Resource
Network (OBIRN)
Toll free: (800) 544-5243
Email: tbi@wou.edu
Website: www.tr.wou.edu/tbi

BIAOR Open

biaoropen-subscribe@yahoogroups.com

BIAOR Advocacy Network

BIAORAdvocacy-subscribe@yahoogroups.com

**Vehicle
Donations**



Through a partnership with VDAC (Vehicle Donations to Any Charity), The Brain Injury Association of Oregon, BIAOR, is now a part of a vehicle donation system. BIAOR can accept vehicles from anywhere in the country. VDAC will handle the towing, issue a charitable receipt to you, auction the vehicle, handle the transfer of title, etc. Donations can be accepted online, or via a toll free number. The online web site is <http://www.v-dac.com/org/?id=930900797>

Thank you to all our contributors and advertisers.