

Passing a Torch Passing a Torch Passing a Torch from Vietnam to Iraq

Generations of researchers follow Soldiers at risk for PTSD.

By Greg Widner, Rob Klemisch, Gary Collins, Rodney Haug, and Rumi Kato Price

“War changed me forever.” Almost every combat veteran says this in retrospect. Generations of combat-exposed veterans as well as their families have struggled with the psychological toll war takes in the years after the fighting is over. Long before the term Post-Traumatic Stress Disorder (PTSD) was coined in 1980, the psychological injury of combat trauma was expressed in such terms as “shell shock” and “war neurosis.” Psychological and physical

consequences of multiple combat traumas are even measurable using archival military records of Civil War soldiers. While PTSD may be a relatively new term, its psychological symptoms are certainly not a new phenomenon.

The veterans returning from the current wars in Iraq and Afghanistan are no exception to the risk of psychological injury. Charles Hoge and associates, in their landmark study of PTSD from the first cohorts of Soldiers deployed to Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF), estimated that up to 20 percent were suffering from a PTSD-like syndrome after they came back. Their



A National Guardsman is participating in the long-term study on PTSD. His name has been obscured to protect his identity. (Photo courtesy of Washington University)

new report indicates that 35 percent of OIF/OEF veterans used mental health services within their first year of returning home.

Although the cumulative number of OIF/OEF deployed military personnel reached 1.5 million as of August 2006 (with an estimated 2.5 to 3 million serving on active duty over the past five years since 9/11), this does not yet compare with the 3.4 million deployed to Southeast Asia during the Vietnam War, from 1964 to 1973 (with a total of 8.7 million serving in the military). Given

that a higher proportion is serving in theater, the magnitude of mental health problems of returning veterans of the current wars may outpace the Vietnam War if fighting and casualties continue at the current level.

Generations of research teams at Washington University School of Medicine in St. Louis, Mo., have followed Vietnam veterans at risk of PTSD and substance abuse for the past 30 years. The Vietnam Era Study (VES) originated in a request from a research arm commissioned by the White House under President Richard Nixon's

administration, which was concerned about the large number of returning veterans exposed to potent opiates while stationed in Southeast Asia. The original study conducted by Lee N. Robins and her associates involved interviewing approximately 1,200 Vietnam veterans and non-veterans in 1972 and 1974. Then a 25-year follow-up was initiated by Rumi Kato Price, one of Dr. Robin's protégés, after two decades of hiatus. The VES 25-year follow-up study interviewed about 850 of the original 1,200; the current 30-year follow-up is still ongoing. Over time, the VES study began focusing more on multiple traumas and the associated mental and physical consequences as veterans entered the second half of their lives.

In the current phase, veterans in the longitudinal cohort (a group of study participants followed over a period of time) were invited to visit the research team's St. Louis lab so that an in-depth clinical assessment of chronic PTSD could be conducted face to face in a controlled setting. David (a fictitious name) sits patiently, thinking about visiting the famous Gateway Arch in St. Louis; he has never had a chance to see it before today. He has just finished a lengthy interview about his PTSD, which started after he came home from Vietnam in 1971. Although he has been interviewed three times in the past, this is the first time he meets the study's lead investigator. When a small gift of a coffee mug with the university's emblem is presented to him in appreciation of 30 years of service to the study, David and the lead investigator cannot hide a sense of connectedness—as though they have known each other since the war's end. Both parties can finally put names and faces together.

In the following week, Ray (fictitious name) sits somewhat nervously while answering questions about his combat experiences over the first six months of his 12-month tour in Iraq. He looks out the window every five seconds or so. When asked about it, he replies, "Yeah,

it still feels like Iraq. I have to watch out for a sniper all the time."

Ray is part of the Soldiers' Young Legacy (SYL) study by the same research team, a new study to interview servicemembers deployed to Iraq and Afghanistan. Despite the great success the VES achieved, many questions about PTSD still remain. For example, were there signs even before the Soldiers were first exposed to combat?

Accumulated research findings now point to the possibility that certain individuals are more susceptible to develop symptoms of PTSD when exposed to severe trauma, just as some people are more likely to develop a severe flu when exposed to a virulent virus. If such a susceptibility does exist for PTSD, how can researchers help detect the signs and identify persons who are more likely to develop PTSD?

The Soldiers being deployed to Iraq and Afghanistan are helping the research team answer these questions. Unlike the previous VES and many other studies of veterans of the Vietnam War, the First Gulf War, or current OIF/OEF war veterans, the Washington University study is attempting to obtain information before as well as after deployment. Information gained will enable military authorities and clinicians to identify the development of PTSD earlier. This, in turn, would allow intervention before Soldiers experience acute stress syndrome.

While veterans of the Vietnam War came home in a time when the term Post-Traumatic Stress Disorder didn't exist, current Iraq and Afghanistan veterans are serving in a time when many characteristics of PTSD are known on a biophysical level. PTSD has now been associated with changes in the levels of certain hormones and even changes in the size and shape of certain parts of the brain. Moreover, research appears to suggest biological



Dr. Rumi Kato Price is leading a new study on PTSD, tracking Soldiers before they deploy. (Photo courtesy of Washington University)

susceptibilities may be one reason some, but not all, people exposed to combat develop PTSD.

However, there are many more questions these results have not been able to answer. For example, are those with PTSD showing different levels of certain hormones because they experienced trauma, or did they develop PTSD because they already had different levels of these hormones before they experienced trauma? These are the sorts of questions that information from the SYL study can help answer. Participants will be asked to give DNA and biological samples of certain hormones associated with stress before and after they are deployed.

What happens in Soldiers' lives after combat can also affect biological adaptation, such as cognitive and neurological adaptation, including hormone and brain functions. For example, social support by a spouse and



real names), participated in their pre-deployment interviews in late May. When the research staff last spoke with Jeff, he was excited about the opportunity to put his skills to use, while Shawn was concerned about the family he was leaving behind. Before he left, Shawn said, "I hope that by participating in the Washington University research, it helps ... identify problem areas for Soldiers who are deployed to Iraq. I hope this educates the public on how global conflict... wear(s) on Soldiers and their families." Both Jeff and Shawn are currently serving in Iraq and are expected home this fall. While they were not sent off with coffee mugs, as were their predecessors in the VES, they were each given an MRI photograph of their brain taken for the study: a different parting gift presented in appreciation of the great gift of knowledge they will provide that will benefit all future veterans.

Readers interested in finding out more about the new study should visit www.rkp.wustl.edu/proj_desc_SYL2.html or call 800-863-7414.

relatives may be important to restore subtly dysregulated hormone response in civilian life back home. From years of research on Vietnam veterans' resiliency, such an idea certainly makes sense. Researchers hope that early identification of susceptible military personnel and prevention (cognitive or pharmacological) will reduce the likelihood that early symptoms of PTSD will develop into its chronic form. In this sense, Soldiers of this generation will leave a legacy to future veterans, much as Vietnam veterans left a legacy by sharing their precious life experiences through studies such as the VES.

A total of five pilot case participants have been recruited for the SYL study to date. Two recent enrollees in the SYL study, Jeff and Shawn (not their

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