BRAIN Waves

Good Vibes for the Arkansas Brain Injury Community

VOL. 1, Issue 1, Winter 2019

FATIGUE
AFTER BRAIN INJURY

Fatigue is one of the most common complaints after brain injury, regardless of injury severity! Fatigue is defined as "extreme tiredness, typically resulting from mental or physical exertion or illness."[1] Just like the brain injury itself, fatigue is experienced differently from person to person.

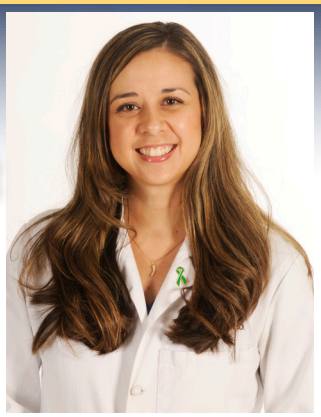
When the brain is injured, it revs up your body's use of energy, and it focuses on healing itself. By doing this, your brain does not leave you much energy to do anything else and you wear out fast! Mental AND physical activities can cause the brain injury survivor to fatigue quickly.

Physical fatigue is related to muscle weakness and decreased endurance. Mental fatigue results from having to think harder and longer on tasks that once came easily to you. After a brain injury, it is common for a survivor to work harder to do tasks that once came easily to them. This can include something as mundane as getting dressed, taking a shower, reading a book, or talking with friends.

Physical fatigue can lead to mental fatigue, resulting in worsening processing speed, memory, and attention span. These types of fatigue typically worsen as the day goes on and improve with rest. This fatigue gets better as you get stronger and as your brain injury heals.[2,3]

Understanding the potential causes of fatigue after brain injury helps you compensate for a lower energy reserve and also helps you create a plan to improve your energy level.

ASK the Specialist



Rani Haley Lindberg, M.D., FAAPMR, BIM
Associate Professor,
Residency Program Director
BHRI Brain Injury Team, Medical Director
UAMS Dept of Physical Med & Rehab

Finding ways to compensate are helpful. Creating achievable "to-do lists" and taking frequent breaks during the day are very important. Maintaining good sleep hygiene and a routine sleep-wake schedule makes a difference! Exercising to help build endurance is good for EVERYONE suffering from fatigue, including brain injury survivors. Finally, be sure to talk with your brain injury specialist about post injury complications and other medical issues that can result in fatigue, so that these issues are diagnosed and managed appropriately.[4]

Check out the references below for additional reading on this topic and be sure to contact us with any questions.

[1] www.dictionary.com. 2019. 6 January 2019.

[2] msktc.org/tbi/factsheets/fatigue-and-traumatic-brain-injury. 2019. 6 January 2019.

[3] www.brainline.org/article/fatigue-and-tbi. 2019. 6 January 2019.

[4] pmr.uams.edu/wp-content/uploads/sites/50/2016/07/Sleep-and-Fatigue-after-Traumatic-Brain-Injury-revised-7-11-16.pdf. 2016. 6 January 2019.

Ask a question! Email us at **atrp.ar.gov**

MEET THE ATRP PROGRAM TEAM!



Terri Imus, RN, BSN
Program Director, ATRP & TBI State Partnership Program



Danny Bercher, PhD, NRP
Assistant Director, ATRP



Kimberly Lamb, MS
Assistant Director, TBI State Partnership Program
Assistant Editor, Brain Waves



Kristen Alexander, MPH, MPS
Clinical Health Educator
Editor, Brain Waves



Amber Watson, MBA
Administrative Coordinator



Eddie Williams, RN, BSN
Nurse Educator

CONTACT US

Arkansas Trauma Rehabilitation Program
UAMS Center for Distance Health
4301 W. Markham, #519-4
Little Rock, AR 72207
(501) 526-7656
atrp@uams.edu

www.atrp.ar.gov

Arkansas Trauma Rehabilitation Program

SURVIVOR/CAREGIVER STORIES: THE PARKER FAMILY BY KIMBERLY LAMB



Gigi and Dan Parker during their interview at our ATRP office. Photo by Dennis Weaver

Lee Parker – Traumatic Brain Injury Survivor

At about 2 a.m. on July 1, 2017, Lee Parker, a student at the University of Arkansas in Fayetteville, was struck by a car on MLK Boulevard while walking to his apartment. The driver of the car called 911. When paramedics arrived, they found that Lee was suffering from two collapsed lungs, a severely mangled right arm that was nearly amputated, significant blood loss, and a fractured skull with immediate swelling to his head. During transport to Washington Regional Medical Center, Lee went into cardiac arrest, but his pulses returned with CPR before arrival.

At 4 a.m., the police notified Lee's parents about the accident. Dan and Gigi Parker began the 200 mile journey from their home in Little Rock to Washington Regional Medical Center in Fayetteville. Dan said, "I drove, and Gigi prayed the entire way."

At 5:30 a.m., the Parkers received a call from the neurosurgeon to inform them that Lee had been stabilized and was ready for surgery. Gigi called their family members, and a prayer chain began. Dan, an RN, and Gigi, a speech pathologist, understood the severity of the injuries. They were relying on their faith to pull their family through.

At 7 a.m., the Parkers arrived at the hospital. Lee's surgery lasted six hours and resulted in the removal of a 6-inch circle of his skull to allow removal of a blood clot and to provide room for his brain to expand. Lee's prognosis was grim. If he lived, the Parkers were told to expect major deficits from the brain injury and, if his arm survived, he would have no use of his right hand.

The First 10 Days

After his initial surgery, Lee spent four days in the ICU before being moved to the neurology floor. Lee's Caring Bridge site documents the remarkable details of these early days.

Day 1: Lee received a craniotomy to relieve the elevated pressure in his brain. There were no spinal cord issues or obvious brain stem concerns. His left temporal skull was fractured.

Day 2: Lee improved enough to get the intracranial monitor out of his skull. A CT scan showed that his brain was returning to its normal size. His Glasgow Coma Score had increased to 7 from the initial 4 at admission, and was expected to improve as he was weaned from the ventilator.

Day 3: Lee was taken off sedation at 7:30 a.m. and was unassisted by the ventilator at 8 a.m. He responded to commands to move his feet and hands, and even gave a "thumbs up" sign when asked. Lee would require a helmet for at least three months to allow the brain swelling to subside and then the doctor could replace the cranial gap with a titanium plate.



Lee and Dan

Day 4: Lee recognized his parents for the first time since the accident. He passed a swallow study and ate lunch. He also walked about 40 yards with assistance. By then, the Parkers were thinking, "This was not a lucky sequence of events. It was a divine, spiritual, supernatural intervention by the Grand Physician, fueled by our prayer warriors."

Over the next six days, the Parkers watched Lee shift between his normal, sweet personality to episodes of anxiety, confusion, and belligerence. Lee didn't understand why he couldn't get back to his pre-accident life, and he wanted to reclaim his independence.

On day 8, the Caring Bridge entries reflect both suffering and gratitude. Gigi said, "Watching Lee struggle through such deep anguish is gut wrenching and exhausting, but at the same time, we're thankful to be here in light of what occurred eight days ago."

Despite the rough patches, Lee continued to improve ahead of schedule. On day 10, Lee was transported to the Baptist Health Rehabilitation Institute (BHRI) in Little Rock.

The Rehabilitation Process

Dan and Gigi actually met at BHRI in 1985. At the time, Dan was serving as the assistant administrator and Gigi was finishing her master's degree in speech pathology. Little did the Parkers know that they would come full circle with their relationship to BHRI some 32 years later with their son as a patient.

Once at BHRI, Lee began physical, occupational, and speech therapy (PT, OT, ST) immediately. Throughout his rehabilitation, Lee began to understand more about his accident and his need to progress. Lee underwent surgery at Baptist Health Medical Center to remove fixation pins in his right elbow and install a plate hinge. Four months later, he would undergo nerve grafts in St. Louis.

He returned to BHRI after surgery and continued his therapies. During this time, Lee came to accept the need to sit out of school for a semester. To help lessen the blow of his time off, the Parkers enrolled together in a free online boating course. The course helped Lee to continue learning and stay focused.

By the end of July, Lee was released from BHRI and returned home with the Parkers. At home, he continued outpatient PT, OT, and ST 2-3 times a week. In an Aug. 9, 2017, Caring Bridge entry, Gigi said, "Trust, communication, schedules, finding the 'new' normal, being flexible, all are requirements for successful transition, and they do not all come together at once."

Day by Day

Although Lee was well into recovery when released from BHRI, he still faced other surgeries: a metal plate removed from his right elbow In August, and in October, both a nerve transplant and bone flap replacement.

Today, 18 months later, Lee Parker has made almost a full recovery. Although there are still nerve regeneration needs in his right arm and hand, he has regained most of its use.

In 2018, Lee graduated from the University of Arkansas with a degree in business. He is currently employed full-time by JB Hunt.

The Parkers fondly remember all those who bridged the gap for them through prayer, sitting in waiting rooms, providing food, and offering hotel rooms for rest.

Continued on page 4

Continued from page 3

Lee's Caring Bridge site (**www.caringbridge.org/public/leeparker2**) is a testament to the family's faith and to their support network. When asked what advice she would share with others facing the care of a loved one with a traumatic brain injury, Gigi said, "Be a balanced advocate for your loved one without being aggressive. Develop your circle of support, rely on your faith, and never give up!"



Lee and Gigi

Lee's Helpful Hints on the Path to Recovery

Be as active as you are able. Exercise your mind and body through reading, thinking, expressing thoughts verbally, and walking around while taking in your surroundings.

Overcome frustrations. When frustrations set in, take a breath, take a step back, and rely on family, friends, and your circle of support for help.

Trust and 'buy in' to the process. Trust that those incredible men and women, medical professionals, are in the journey with you and are wise to the next step in the process.

Embrace Patience and the Power of Positivity. It's a marathon not a sprint. Take it day by day. Celebrate the small victories, and remember that there may be hiccups and road bumps along the way, but tomorrow is a new day.

Share your story with us! Email us at **atrp.ar.gov**

Apps for Pain Management

APP HIGHLIGHT

Smart phone apps can help you take an active role in your pain management. You can use them to track your pain levels, identify trends, set acheiveable goals, and learn coping strategies. They can help you pinpoint potential stressors and sources of relief. You can even use the apps to share information with your healthcare provider.

The **AR IMPACT** (Improving Multi-disciplinary Pain Care Treatment) team here at UAMS recently reviewed the literature and presented high quality apps! Here are the top three:

My Pain Diary ($4.99, Apple/Android)**:** Track, recall, analyze, and report symptoms. This app saves all of your entries into a fully searchable history with a color-coded calendar. The graph feature helps you see how your symptoms correlate with each other, and even with the weather. Printable reports available.

Tracknshare Symptom Tracker ($4.99, Apple)**:** This app is fully customizable to track any symptoms and see how they change alongside other health items such as mood, sleep, and diet. You can see trends with multiple graphs.

Manage my Pain ($3.99 + subscription options, Apple/Android)**:** Easily describe your pain in less than 30 seconds. Record activities that are meaningful to you, track how well your meds are working and summarize your pain levels for your doctor.

RESOURCE HIGHLIGHT

WHO WE ARE

The LoveYourBrain Foundation was established by brothers Adam and Kevin Pearce after Kevin sustained a severe traumatic brain injury from a snowboarding accident before the 2010 Winter Olympics. Our mission is to improve the quality of life of people affected by TBI.



THE LYB YOGA PROGRAM

The goal of our free six-week program is to build community and foster resilience for people with traumatic brain injury and their caregivers. We welcome people with postconcussion syndrome, mild to moderate TBI, and severe TBI, if they meet certain criteria (see website). After completion, participants can access other gentle yoga classes taught to the broader community at a discounted rate. Each class involves:

- 10 minutes breathing exercise
- 45 minutes gentle yoga
- 15 minutes guided meditation and relaxation
- 20 minutes facilitated discussion

Our six-week programs will run each January, April, July, and October at Blue Yoga Nyla in North Little Rock. Classes are limited to 13 students, so reserve your space today! For more details and to sign up, visit **www.loveyourbrain.com/yoga/practice.** For questions, email: **mary@loveyourbrain.com**

SUPPORT GROUPS

Little Rock:
3rd Wednesday at 11:30 a.m.
Baptist Health Rehabilitation Institute
Contact: (501) 202-7047
Lunch is provided

Hot Springs:
2nd Thursday of every month at 2:30 p.m.
Roland Room at CHI St. Vincent
Contact: (501) 416-6325

Texarkana:
4th Friday at noon
St. Michael Rehab in the Dogwood Room
Contact: alison.crank@christushealth.org, (903) 614-4000

Fayetteville:
3rd Tuesday from 1-2 p.m.
SOURCES Conference Room
Contact: Brooke at (888) 284-7521

Jonesboro:
3rd Tuesday of every month at 3 p.m.
Encompass Health (formerly Health South) lower lobby
Contact: Ashley Watson: (870) 351-5995

Memphis:
3rd Tuesday at 5:30 p.m.
Regional One Health Rehabilitation Hospital, 3rd floor, Turner Tower Dining Room
Contact: (901) 545-8487

Learn more at: **atrp.ar.gov/resources/support-groups/brain-injury-support-groups/**



TO THRIVE, NOT JUST SURVIVE

TRIUMPH 24 HOUR CALL CENTER: 1-(855) 767-6983

WHAT IS IT?

- A FREE helpline that you can call anytime of the day or night to speak with a nurse

WHO IS IT FOR?

- People with a brain injury or spinal cord injury or family members, doctors, & nurses.

WHEN SHOULD I CALL?

- When you have health-related questions or concerns
- If you need help with your transition home from the hospital or nursing home
- If you are unsure whether you should go to the Emergency Room
- When there are changes in your condition that you have questions about

EVENTS/ANNOUNCEMENTS

Thank you for reading our inaugural edition of *Brain Waves!*
Please look for more editions each quarter!

NeuroRestorative Timber Ridge Brain Injury Awareness Walk:

March 8, 2019, 8 a.m.-3 p.m.
For more info, call: (501) 594-5211

Are you a professional?
Here are two great upcoming education opportunities:

AR Trauma Rehabilitation Symposium:
May 2-3, 2019
Wyndham Riverfront in NLR
tinyurl.com/ATRP2019

Brain Injury Conference:
Save the Date: Aug. 9, 2019
Benton Events Center
Stay Tuned for More info!

YOU'RE INVITED!

2019 Brain Injury Survivors' Day Conference

THURSDAY, MARCH 28, 2019 | 9:30 a.m. TO 4 p.m.
Registration opens at 8:30 a.m.

IMMANUEL BAPTIST CHURCH
501 NORTH SHACKLEFORD ROAD
LITTLE ROCK, AR 72211

FEATURING:
Informative Speakers
Helful Resources
Pet Therapy and Music Therapy
Free Lunch
Door Prizes
Free T-shirt for all Attendees!

PLEASE RSVP: CALL US AT (501) 526-7656
OR EMAIL AWATSON@UAMS.EDU

*This event is for survivors and their families. This is not a professional or continuing education event.

Social Security/ Disability POINTERS

WHO TO CONTACT:
Social Security or Medicaid?

by Tonya Cater, Social Security Public Affairs Specialist

Sometimes it's confusing to know who to contact and for what. Social Security and Medicare offer similar and related services, so people aren't always certain who does what. This "cheat sheet" can help you know who to call.

Contact Social Security to:

- See if you're eligible for Medicare.
- Create a "my Social Security" account to do things like request a replacement Medicare card and report a change of address, name, or phone number.
- Sign up for Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance).
- Apply for extra help with Medicare prescription drug coverage (Part D) costs.
- Report a death.
- Appeal an Income-Related Monthly Adjustment Amount (IRMAA) decision (for people who pay a higher Part B and/or Part D premium if their income is over a certain amount).

Find information on how to do all of this and more at **www.socialsecurity.gov** and **www.socialsecurity.gov/benefits/medicare**.

Contact Medicare to:

- See what services Medicare covers.
- Get detailed information about Medicare health and prescription drug plans in your area, including costs and services.
- Choose and enroll in a Medicare health or prescription drug plan that meets your need.
- Find a Medicare Supplement Insurance (Medigap) policy in your area.
- Find doctors, health care providers, and suppliers who participate in Medicare.
- Get information and forms for filing a Medicare appeal or for letting someone speak with Medicare on your behalf.
- Compare the quality of care provided by plans, nursing homes, hospitals, home health agencies, and dialysis facilities.
- View Medicare publications.

Visit **www.medicare.gov** for these services.

To learn more about your claim status or deductibles, or for questions about premium payments, you can call 1-800-MEDICARE (1-800-633-4227; TTY: 1-877-486-2048).

Determining who to contact is the first step in getting the answers you need. Please share these lists with family and friends who need to know more about Social Security and Medicare.

Suggest a topic! Email us at **atrp.ar.gov**

Arkansas Trauma Rehabilitation Program
UAMS Center for Distance Health
4301 W. Markham, #519-4
Little Rock, AR 72207

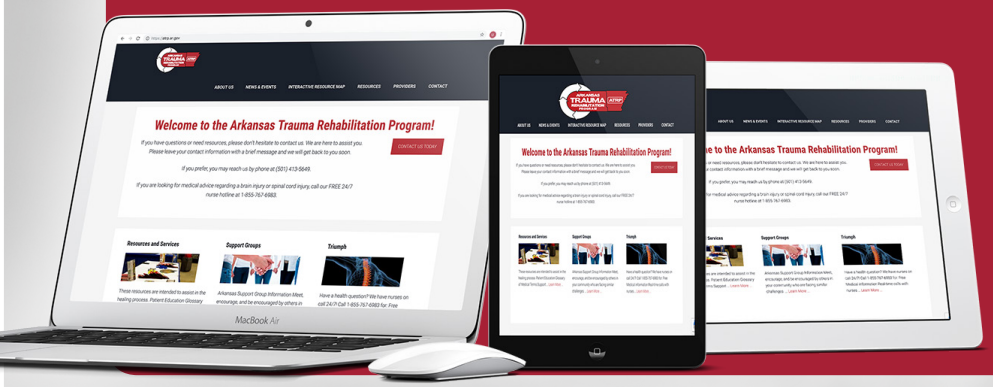
The Arkansas Trauma Rehabiliation Program offers a Disability Resources Website to connect those with trauma-related disabilites to helpful resources and organizations in the community

To access the Disability Resources Website, go to:

www.atrp.ar.gov

On The Website You Will Find

- **Clickable and Searchable Resource Map.**
- **Links to Online Resources.**
- **Medical Definitions with Pictures.**
- **Patient Education Videos.**



For more information about the Disability Resources Website, Call **(501) 295-6576** or email **atrp@uams.edu**

TRIUMPH is a partnership of the UAMS Center for Distance Health and the UAMS Department of Physical Medicine and Rehabilitation, and is funded by the Arkansas Trauma Rehabiltation Program.