

Veterans HEALTH MATTERS

AWARD WINNING Wellness Magazine for Veterans in Florida, South Georgia & the Caribbean



INSIDE: Managing Chronic Pain

Pictured: Pain Program physical therapist Kerry Allen, D.P.T., guides Veteran Gloria Jean Scott through exercises on the recumbent bicycle at the James A. Haley Veterans' Hospital in Tampa. Photo by Ebby Talebi

TO OUR READERS

A return to cooler weather usually brings relief for many people in our part of the world. But a change in seasons isn't always enough to ease someone's suffering from chronic pain. That's especially true for those Veterans recovering from injuries and conditions that may cause them to deal with pain on a daily basis. Read on pages 3 through 5 about some of the providers and patients working together to find new and better ways of managing that pain – making life better for so many Veterans.



Bowel health can also be a big concern for many. Pay attention, not just to what you put in your body, but also to what comes out. There are clues there about the state of your health. Read more on page 6.

To add more fiber to your diet, make the banana split oatmeal on page 7. And while you're there, play the spooky mind exercise!

Be Well!

Miguel LaPuz, M.D., MPA
Network Director, VISN 8

It's Flu Season - Get Your No-Cost Shot

The flu can become more than just a feverish, achy condition that lasts a few days. Hundreds of thousands of people in the U.S. are hospitalized every year with complications from influenza. Get your flu shot every year to protect yourself, and help keep the flu from spreading to others.



Who should get a flu shot?

All people age six months and older should get vaccinated.* Those more at risk of illness and complications from the flu include:

- People with chronic health conditions such as asthma, diabetes, and heart disease
- People older than age 50
- Pregnant women and women trying to become pregnant
- Caregivers of infants or a family member with health problems
- Health care workers

** Check with your VA health care provider if you have a severe allergy to eggs. Although the flu shot contains egg protein, an egg-free flu shot may be available for you!*

Veterans enrolled in VA health care and VA staff may get a No Cost flu shot at your [nearest VA health care facility](#). If you're not enrolled in VA health care, [check your eligibility online](#). Go to <http://hbexplorer.vacloud.us>.

Non-VA Providers and

Pharmacies: Many local retail pharmacies offer flu shots that may be covered by private insurance or programs, such as Medicare. If you don't have insurance, there will usually be a charge.

If you receive your flu shot outside the VA, please let your VA health care team know so they can keep your medical records current.

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Your Pain Treatment: *Understanding the Options & Risks*

In VA, managing pain to maximize a Veteran's health and wellness begins in Primary Care with pain education and medication management.

Medication can be a part of a pain treatment plan. Opioids are prescription medications that may help relieve pain by reducing the intensity of pain signals that reach the brain. Drugs in this class include hydrocodone (e.g., Vicodin), oxycodone (e.g. OxyContin, Percocet), morphine (e.g. Kadian, Avinza), fentanyl, and related drugs.

Opioids may help relieve moderate to severe pain and are often prescribed after surgery, for an injury, or for certain health conditions, such as advanced cancer-related pain. They are also used for shorter term, comfort care.

There are also many non-opioid medications that are often more effective with fewer risks and side effects than prescription opioids, according to Nazimuddin Qazi, M.D., a board-certified physician in Internal Medicine and Addiction Medicine. He currently manages the Ambulatory Care Pain Clinic at the James A. Haley Veterans' Hospital in Tampa.

In the VA, patients receive a comprehensive diagnosis and a biopsychosocial approach – which looks at how chronic pain affects the body, mind, and social system. This helps providers better understand a Veteran's background, his or her chronic pain triggers, and what is the best solution for managing that pain.



Dr. Nazimuddin Qazi evaluates Veteran Roger Abbot for shoulder pain at the Ambulatory Care Pain Clinic, James A. Haley Veterans' Hospital in Tampa.

“We really don't understand the true reasons for chronic pain, hence it cannot be 'cured,' but it can be managed so it doesn't take over our lives,” he said.

Risks of Opioid Medications

Opioids come with serious risks and side effects – especially if used over an extended period of time. Therefore, opioids should be taken under close supervision and discontinued as soon as the acute need is over. Risks are even greater if a Veteran has a history of drug or substance abuse, a mental health condition (like depression), sleep apnea, or is over age 65.

Some side effects of long-term opioid use include severe constipation, lower sex drive, low energy, weight gain, falls, confusion, memory problems, itching, sweating, and immune system suppression.

“Opioids come with serious risks and side effects—especially if used over an extended period of time.”

Your body may also develop a tolerance for the medication, causing you to take more to receive the same level of pain relief. This increases the risk for addiction. In one study, one in four people receiving prescription opioids, long term, in a primary care setting struggled with addiction.*

The bottom line: be informed. If you are a Veteran enrolled for care who suffers from chronic pain, create a plan for managing your pain with your VA Patient Aligned Care Team (PACT) or pain clinical specialists. As with most health issues, a treatment plan involving multiple approaches is most likely to lead to success.

*Learn more at www.cdc.gov/drugoverdose/prescribing/guideline.html

- Susan Wentzell



Managing Chronic Pain

What the VA is doing to help empower Veterans

A Q&A with Jennifer L. Murphy, Ph.D.

Dr. Murphy is the Clinical Director of the inpatient Chronic Pain Rehabilitation Program at the James A. Haley Veterans' Hospital in Tampa. Read "About the Author" at the end of this article for more information on this pain specialist.

Q – How would you describe chronic pain?

A – Most simply, chronic pain is pain that persists beyond 90 days; however, the experience of living with a chronic pain condition, pain that does not resolve, can be quite complex. Chronic pain can impact one's psychological well-being, social system, physical abilities, and employment, among other things.

Q – How does the VA help Veterans enrolled for VA health care control chronic pain?

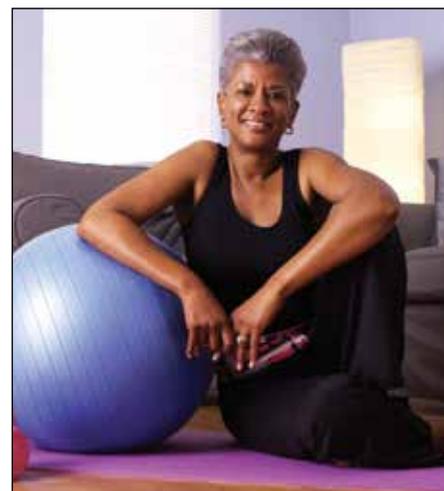
A – The VA provides the most comprehensive approach to pain care, allowing Veterans to access various treatments that can help them manage chronic pain most effectively. In Primary Care, medication management and pain education for optimal wellness begins.

Specialty pain services offer things such as medical consultation, complementary health (e.g., chiropractors), psychological treatment to reduce the negative effects of pain on life, rehabilitation therapies (e.g., physical, aquatic, occupational), as well as therapeutic recreational activities (e.g., adaptive sports).

The VA also has comprehensive pain programs that combine many of these treatments.

Q – What are some things Veterans can do at home to manage chronic pain?

A – Effective pain care really means making various lifestyle changes that not only lessen pain intensity but decrease the negative impact of pain on a Veteran's quality of life. Consulting with pain specialists and learning guidelines for increasing safe movement, pacing activities, and engaging in pleasurable social outings can help those with pain feel less overwhelmed by it. Instead of avoiding activities and people, Veterans are encouraged to learn more about the many fulfilling things they still can do.



Q – Tell us about the Chronic Pain Rehabilitation Program at the Tampa VA.

A – The Chronic Pain Rehabilitation Program, or CPRP, helps people understand and react to pain in a more adaptive way. This happens through treatment plans devised with the Veteran and a team of professionals who are invested in improving the quality of life of Veterans with chronic pain. Since chronic pain affects everything – the body, mind, and social system – the CPRP treats the whole person, not just the symptoms. This "biopsychosocial" approach empowers Veterans to learn helpful ways to self-manage pain so that life is fuller.



Q – How is a Veteran referred to the Chronic Pain Program at the Tampa VA? Do Veterans come from all over?

A – As the only inpatient pain rehabilitation program in the VA system, Veterans travel from across the country to participate in the CPRP. Those Veterans enrolled in the VA Sunshine Healthcare Network facilities are also welcome. For details on how to refer a Veteran for program evaluation, VA healthcare professionals should visit our website at www.tampa.va.gov/chronicpain. Veterans can also review the site, and all are welcome to contact us directly with questions at 813-972-2000, extension 5173.

About the Author

Jennifer L. Murphy, Ph.D., is a pain psychologist and Clinical Director of the



inpatient Chronic Pain Rehabilitation Program at the James A. Haley Veterans' Hospital in Tampa. She is also the VA's trainer and author for the Cognitive Behavioral Therapy for Chronic Pain initiative and manual, and is the national VA leader of interdisciplinary pain programs.

Fighting a 20-Year Battle with Pain

Veteran Jennett Baynes has had low back pain since 1996 when she served in the U.S. Army. The Tampa resident's pain was so bad she had trouble walking. A walker helped some, but much of the time she had to use a wheelchair to get around with her husband's assistance.

Along with the deterioration of her physical health, which included migraine headaches, nerve tremors, and pain in her knees and wrists, her emotional health suffered, too.

In 2014, things began to look up for Baynes when she was admitted to the outpatient Chronic Pain Rehabilitation Program at the James A. Haley Veterans' Hospital in Tampa, where she is a patient.

“The medical and psychology staff at Haley worked as a team with physical, occupational, and recreational therapists to develop a plan for me to make my entire quality of life better,” she said.

“They reevaluated my medications, which led to a change that helped reduce my migraines and nerve tremors. With their help, and with diet and exercise, I've lost 36 pounds. My weight loss permitted my doctor to remove three medications and lower the dosages on others, which makes me feel much healthier.

“The physical therapy was more intensive than I had originally thought, but as I got more flexible, it lessened my pain. Pool therapy relaxed my muscles. Recreation



Pain psychologist Evangelia Banou, Ph.D., shares facts about spine health with Veteran Jennett Baynes, who has suffered from chronic low back pain for 20 years.

therapy distracted me enough that I was pain-free for half the class. Adaptive sports help you do activities regardless of your disability, even after the program. And the relaxation and good sleep techniques they taught me have been a big help, too,” Baynes said.

Today, the 47-year-old rarely uses her walker or wheelchair. “On a scale of zero to ten — I would say my pain level lowered from an eight to a four,” Baynes said. “The treatment team acknowledges your pain is real and gives you different ways of looking at it, dealing with it, and distracting yourself from it to stop the damaging effects of it on your life.”

“The new point of view the program gave me about pain, and the fact it seems more tolerable now, made me realize it's never too late to try to live your life better.”

– Susan Wentzell

The Scoop on Poop

What It Says About Your Health

What's the one thing we may do daily, but rarely talk about? Poop. For most people, it happens every day. It keeps us healthy by removing wastes and toxins from our gut. What comes out can tell us much about our health. Next time, take a peek before you flush. What you see might tell you a lot about what's going on inside.

What Color?

A color other than brown doesn't always mean there's something wrong. Eating different colored foods can change the color of your poop. But sometimes a different color can indicate a problem if it's persistent. You could have a liver or gall bladder disorder, celiac disease, or a pancreatic disorder.

A consistently red or black stool may mean your digestive track is bleeding. That may point to cancer or another life-threatening condition. If something doesn't seem right, talk to your VA PACT Team right away.

What Shape?

The size and shape of your poop doesn't always mean there's a problem. Ask yourself, "Is this normal for me?" Pay attention to any sudden changes in your stools. If your poop becomes hard and compacted, you may need to eat more fiber and/or drink more water. Very thin or pellet-like poop may point to a problem with your colon. Loose, greasy, and oily may mean a food allergy. Chronic diarrhea could mean you have a virus or bacteria. If you feel there's an issue, talk to your VA PACT team.

Tips for Good Digestion

- Eat fiber-rich fruits, vegetables, legumes, beans, and grains.
- Drink at least 8 glasses of water a day.
- Try to eat 4-5 small meals per day.
- Eat more probiotics daily, like yogurt or kefir.
- Don't overeat. Too much food strains the digestive system.
- Move more during your day, and be sure to stretch!

Bristol Stool Chart

The Bristol Stool Chart was designed in 1997 by the University of Bristol as a gauge for understanding your poop. It's not meant to diagnose any problems. Use it as a guide as you start tracking your movements. Which "type" are you?

TYPE 4 – long and smooth (good stool)



TYPE 1 – separate, hard lumps (possible constipation)



TYPE 5 – soft, separate blobs (good stool)



TYPE 2 – compact with lumps (possible constipation)



TYPE 6 – fluffy and mushy (possibly poor nutrient absorption, especially if smelly and/or oily)



TYPE 3 – sausage-shaped with cracks (good stool)



TYPE 7 – watery, nothing solid (possibly virus or bacteria)



Can You Find 10 Differences



ANSWER:



You can quit. Do it with TeleQuit.

The TeleQuit program offers an in-home telehealth device and coaching, medication, and other forms of support, all free of charge. Benefit from daily reminders and learn how to identify triggers and manage your cravings.

To sign up, call 877-619-0106, select option 3. Or ask a member of your VA health care team.



FEATURED Recipe!

Banana Split Oatmeal

Ingredients

- 1/3 cup oatmeal, quick cooking, dry
- 3/4 cup water (very hot)
- 1/2 banana, sliced
- 1/2 cup frozen yogurt, nonfat



Directions

Put oatmeal in a microwave safe cereal bowl. Stir in water. Microwave on high power for 1 minute. Stir. Microwave on high power for another minute. Stir again. Microwave an additional 30-60 seconds on high power until the cereal reaches the desired thickness. Stir again. Top with banana slices and frozen yogurt.

Tip: Add a teaspoon of chia seeds for 2 more grams of fiber!

Nutritional Information: Serves 1. Per serving: 246 calories, 1.9 g fat (.6 g saturated fat), 2 mg cholesterol, 101 mg sodium, 50 g carbohydrate, 4 g fiber, and 7 g protein

To find more healthy recipes, visit www.nutrition.va.gov.



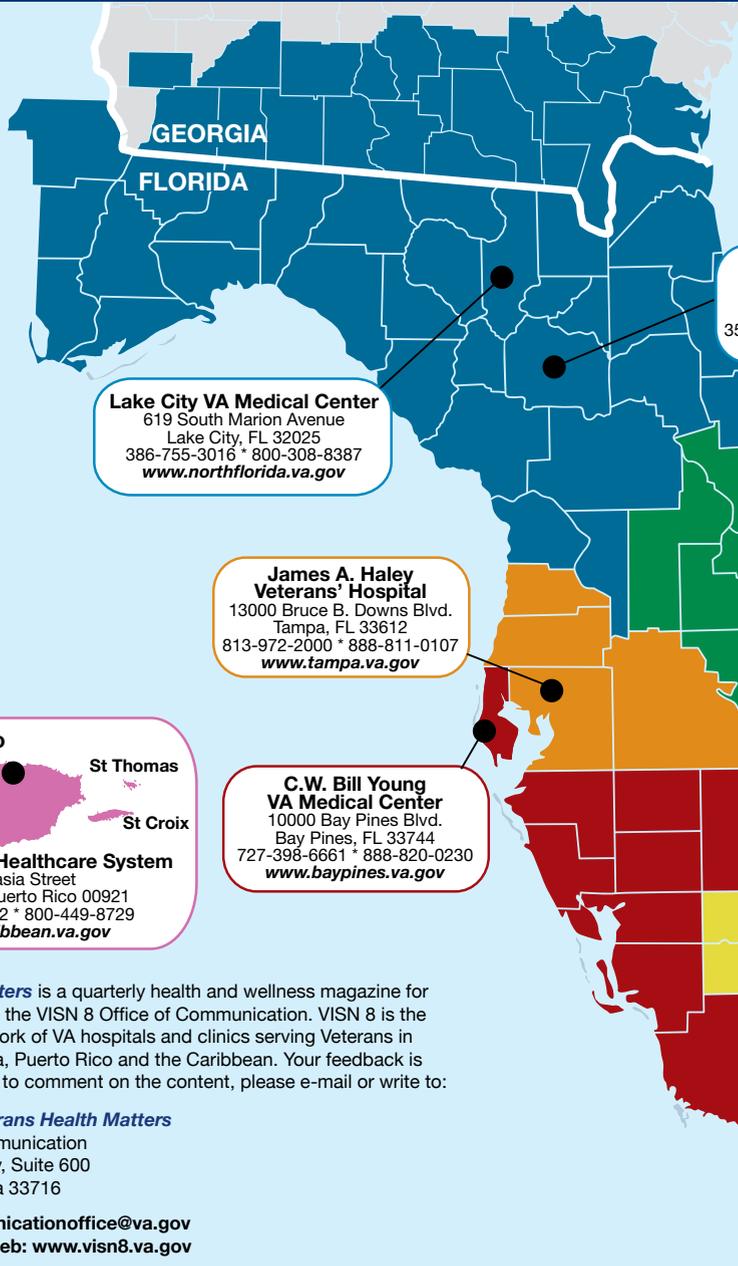
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Great American Smokeout

Be a Quitter. Join the Great American Smokeout on November 17. Ask your provider how the VA can help. Learn more at www.publichealth.va.gov/smoking.

VA Sunshine Healthcare Network www.visn8.va.gov



Find a VA hospital or clinic near you:

www.va.gov/health/FindCare.asp

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