

#### I BI-INSIDE September 2019 Mestage from the Executive Director

The Summer of 2019, the Brain Injury Resource Center of Wisconsin, Inc. has sure been busy and we do not intend to stop! Everything from our successful, fun-filled picnic at the Blue Lotus Farm and Retreat Center to about a month ago at Waukesha Night Out. This summer has flown by faster than I think any of us thought it would and soon fall will be upon us.

Take this time to reflect on how your life has changed, whether it is a big change or a smaller one, changes happen all of the time. A constant that you can always count on will be the Brain Injury Resource Center of Wisconsin, Inc., for we will always be here offering services to brain injury survivors, mainly living in Wisconsin although we have been asked in the past to provide services to survivors outside the state, and helping these survivors attain a full-filling and quality life post brain injury.

If you are a brain injury survivor who needs our help contact us today! There are a few different ways you can do this, you can either call us at (262) 770-4882, email us at admin@bircofwi.org or use the number above to schedule an in-person visit with us at our home office in Waukesha: 511 N. Grand Ave. Waukesha, WI 53186. The main take away from this message is that we want to help you along your path or journey towards brain injury recovery.

Lois York-Lewe

Lois York-Lewis

Executive Director and Co-Founder of the Brain Injury Resource Center of Wisconsin, Inc

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Guest Writers: Linda Strand, Joel Goldstein







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# Participation in Thrivent Choice® Makes a Difference

As eligible Thrivent Financial members direct Choice Dollars® to Brain Injury Resource Center of Wisconsin, Inc. the momentum continues to build. The funds we receive from Thrivent are used to help support our efforts to assist brain injury survivors and families locate needed resources, obtain information, and to further our education awareness and prevention efforts. Thank you to Thrivent and its members who helped make this possible! Together, we can strengthen communities and changes lives.

# Neuro-Fatigue

FACT: Seventy percent (70%) of traumatic brain injury survivors suffer neuro-fatigue.

FACT: Brain injury survivors have less than one-third (1/3) of the energy reserve others have.

Neuro-fatigue is commonly defined as the awareness of a decreased capacity for physical and/or mental activity due to an imbalance in the availability, utilization, and/or restoration of resources (energy) needed to perform an activity. Resources may be physiological or psychological.

At a physiological level, fatigue is caused by damage to neurotransmitters or neural connections, due to brain injury. This damage impairs the processing speed, attention, memory and executive functions of the brain making cognitive functioning very exhausting for the brain.

When a brain is injured, it takes a lot more energy to perform even the simplest of tasks. This is called Primary fatigue.

Primary fatigue may also be associated with muscle weakness or injuries in the peripheral nervous stem. Psychological fatigue is a "state of weariness related to reduced motivation, prolonged mental activity, or boredom that occurs in situation such as chronic stress, anxiety or depression."

This type of fatigue is called Secondary fatigue and often gets worse with stress. Neuro-fatigue is one of the most debilitating consequences of a brain injury. It affects everything the injured

person does, both physically and cognitively.

A person's emotions also become very raw when they are experiencing neuro-fatigue.
After initially sustaining a brain injury, a survivor will find that they tire easily, even after a simple activity like watching TV or having a conversation with someone.

As time goes by, a survivor is likely to try and



push themselves to do more things, resulting in neuro-fatigue. Accepting that you no longer have the same physical and mental stamina that you had before your injury goes a long way in managing neuro-fatigue.

Please also remember that it will take your brain longer to recharge itself since your brain injury.

#### Signs of fatigue:

- Pale face
- Glazed eyes
- Irritable
- Making mistakes
- Loss of Concentration
- Headaches



Kathy Richardson

#### **Avoiding Fatigue:**

- Know your limits, don't over schedule yourself.
- Pace yourself, take breaks.
- Exercise for 30 minutes a day.
- Eat a well-balanced diet at regularly scheduled times.
- Make certain you get 8-10 hours' sleep each night.
- Don't nap during the day.
- Don't drink caffeine after noon.
- Schedule all your activities for the day and follow your schedule!
- Prioritize your activities.
- Do things requiring the most energy in the morning.
- Do one enjoyable activity each day.
- Avoid stressful situations.
- Do one relaxing activity each day.
- Take your medications according to prescriptions.

\*CONTINUED pg. 5\*

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# Neuro-Fatigue

Conditions That May Cause or Increase Fatigue:

- Depression
- Sleep apnea
- Insomnia
- Seasonal allergies
- Hypothyroidism or other endocrine disorders
- Respiratory or cardiac problems
- Headaches
- Lack of exercise
- Vitamin deficiency/poor nutrition
- Stress
- Anemia

- Medications
- Illness
- Chronic pain
- Sensory overload

There may come a point sometime when you can barely stand up you are so fatigued.

When this happens the only thing you can do is recharge by getting some rest and a good night's sleep.

Everything else will have to wait until you feel better.
During times of extreme stress, such as

the holidays, you need to closely monitor your fatigue and take a break when you feel it coming on.

You should seek medical help for your neuro-fatigue when you are having difficulty getting out of bed, you are not able to do things you enjoy, you are not sleeping well at night, you feel as though you have brain "fog", or you are having difficulty taking care of yourself or your family.

#### Reference List

Atkins, M. 2015. Flooding of the Senses: Sensory Overload After Brain Injury. Brain Injury Retrieved January 12, 2018 from http://www.changedlivesnewjourneys.com.

Bell, Kathleen R. 2009. Fatigue and Traumatic Brain Injury. Model Systems Knowledge Translation Center (MSKTC). TBI Model Systems, Washington D.C.

Belmont, A., Agar, N., Hugerson, C., Gakkais, B., Azouvi, P. 2006. Fatigue and traumatic brain injury. Medecine Physique, 49, 370-374.

Heins, J., Sevat, R., Werkhoven, C. 2010. Neurofatigue. Retrieved January 21, 2018 from http://www.braininjury-explanation.com

Johnson, G. 2010. Traumatic Brain Injury Survival Guide. Retrieved January 25, 2018 from http://www.tbiguide.com.

University of Washington Medical Center. 2008. Fatigue and Brain Injury. University of Washington Medical Center, Seattle, WA.



#### **Healing the Brain after Injury**

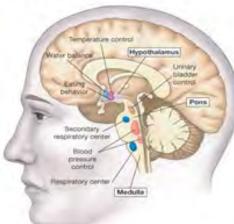


Think about this, Stephen J. Guyenet, Ph.D. has said that "if our everyday eating behavior is primarily guided by brain systems that aren't so rational, information alone shouldn't be a way to change it no matter how accurate, clear, or completing it is." (2017) This statement is powerful and true.

Unless we see, smell, taste, and experience food for ourselves, information alone will not encourage us to consume items that are beneficial to our brain and body health.

The "Brain System" is known as the *hypothalamus*. The part of the brain that controls hunger and satiety is also the hypothalamus.

#### Hypothalamus



Hypothalamus image provided by https://images.search.yahoo.com/

What is heart smart is brain gain.

What damages veins is bad for brains.

Besides controlling hunger and eating, the hypothalamus also controls the mood of a person, sleep, and thirst. In addition, the hypothalamus manages your body temperature, body weight and blood pressure.

During my interview with Kella Kunz of "Kella's Health Coaching" we discussed various points that speak directly to how powerful food and hydration is and how what we consume directly ultimately influences how our brain and body heals. Kunz breaks it down in a simple, easy to understand explanation.

I help motivate, coach, and teach individuals and couples how to pursue a healthy lifestyle both mentally & physically.

kellashealthcoaching.com kellashealthcoaching@gmail.coi

One of the keys to getting the proper brain nutrition is adding *color* to everyday meals. Follow along as Kunz explains.

Water: Simple enough yet how many of us avoid drinking the daily minimum. Is it because we get tired of drinking such a bland form of hydration?

Is it because we do not want to have to use the bathroom all the time? Is it because after a brain injury our brain forgets to tell our body it needs hydration?

Water gives the brain the electrical energy for all brain functions, including thought and memory processes. Some of the

earliest signs of dehydration include being thirsty, feeling dizzy, developing nausea, and headaches.

Children and Good Eating



Habits: There is an old saying that "Children learn, what they live." In

other words, children begin to learn good



eating habits through parent modeling.

Creating a visually appealing breakfast, lunch and dinner may not always be possible (time constraints, environment, and so on) but when the opportunity arises, create a fun meal or snack to encourage them to try brain healthy options.

As Kunz says, "Let **color** be your guide." The color of a fruit or vegetable speaks directly to its' nutritional value.

Eaten in its' unprocessed form (grown or bought fresh) fruits and vegetables are powerful tools for brain healing. Processed foods and color adding techniques contain added chemicals that can interrupt brain and body functions.

Once altered through processing, fruits and vegetables are susceptible to losing their actual nutritional value.

According to Olesen, fruits and vegetables come in different colors and each of these colors is a result of certain antioxidants, phytonutrients and nutrients (2019).

#### **Eating Habits and**

#### **Healing the Brain after Injury**











Does that mean a single-colored fruit only contains a single type of phytochemical? The answer is noeven a single colored fruit will still contain multiple phytochemicals along with vitamins and minerals to provide us with several disease-reducing benefits.

According to the United
States Department of Agriculture,
evidence suggests vegetables, loaded
with vitamins, minerals and essential
nutrients with powerful

antioxidant potential for health in all parts of the body, including the brain, can help maintain brain function and mental agility (2007). Scientists know that certain

nutrients and other key chemical compounds are essential to human brain function.

Serious deficiencies in some of these, such as vitamin B12 and iron, can lead to impaired cognitive function due to neurological, or nerve fiber, complications.

We all know that incorporating a variety of fruits and vegetables on a consistent basis is a key factor in helping the body and brain heal, recover, and work efficiently. Is it bad habits that drive us to continue to avoid healthier eating?

Are we too comfortable with grabbing a quick bite out or popping a frozen something in the

microwave? Or, are we just not confident in our ability to cook homemade?

Finding a solution is just a phone call or email away.
Contact us and we'll get you the assistance or resource you need to get on the right track.

We have a variety of brain power recipes that will be available in each issue of BI-Magazine. If you have a recipe to share, send us a copy to admin@bircofwi.org or BIRCofWI 511 N. Grand Ave. Waukesha, WI and see your favorite dishes in print.

Reference List:

Guyenet, S. J., Ph.d. (n.d.). The Hungry Brain.

Hypothalamus. (n.d.). Retrieved from https://images.search.yahoo.com/

Olesen, J. (2015, May 19). Fruit And Vegetable Colors: Meanings And Benefits. Retrieved from https://www.color-meanings.com/fruit-and-vegetable-colors-meaning-and-benefits/

USDA ARS Online Magazine Vol. 55, No. 7. (2007, August). Retrieved May, 2019, from https://agresearchmag.ars.usda.gov/2007/aug/aging

# **Blueberry and Oat Breakfast Muffins**

Blueberries contain colorful anthocyanins, which protect the heart and nervous system. They are part of the flavonoid compounds that may help improve general cognitive functions.

Makes 12

1 ½ cups whole-wheat self-rising flour

1/3 cup brown sugar

1 teaspoon ground cinnamon

1 cup old fashioned rolled oats

34 cup skim milk

¼ cup canola oil

2 eggs

1 teaspoon vanilla extract

2 ripe bananas (mashed)

½ cup pecans (chopped)

1 cup blueberries

Standard Muffin Pan

Muffin Pan Liners

Toothpicks for testing for muffin doneness

Large Mixing Bowl

Small Mixing Bowl

Wooden or plastic spoon for blending

Whisk for blending

Spoon to transfer mixture to the muffin pan

Wire rack or towel to remove muffin tins after baking for cooling

Oven mitts for removing the muffin tin from the oven

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# **Blueberry and Oat Breakfast Muffins**

Blueberry and Oat Breakfast Muffins (continued)

Preheat oven to 350 degrees

Using a standard muffin pan, line each cup with paper muffin tin liners

In a large mixing bowl add the flour, brown sugar, and cinnamon and mix together

In the same bowl, add the oats and stir all together

In a smaller mixing bowl, add the milk, oil, eggs, vanilla extract and mix together – then add this to the larger mixing bowl and blend them both together.

Add the mashed bananas to the larger mixing bowl and gentle blend together

Lastly add the blueberries and pecans and again blend gently so avoid mashing the blueberries.

Spoon the mixture into each of the muffin lined cups

When the oven is preheated, put the muffin pan in and bake for 20 minutes

To test for doneness, insert toothpick into the center of a few of the muffins. If no batter comes out, the muffins are done. If batter comes out, bake for another 3 minutes (repeat test and continue baking until done).



#### **Hidden Vision Problems**

#### 7 Common Vision Problems Related to Brain Injuries

When you suffer from a brain injury, your vision can be adversely affected. If you're lucky, symptoms of visual dysfunction may resolve in a short period of time.

For others, symptoms may persist for weeks, or even months! You may be lucky enough not to have any vision problems at all.

Visual problems resulting from concussions or traumatic brain injuries (TBIs), however, are often overlooked. This is particularly the case during initial treatment of the injury.

Vision problems that are hidden and neglected can have serious consequences. For instance, they can lengthen and impair rehabilitation.

Fortunately, most visual system disorders following head trauma are highly treatable if identified.

Vision problems may not be detected if the patient is in a coma or is not able to communicate shortly after the brain injury occurs. The key is to schedule a visual examination, when the patient is able.

For athletes who suffer from persistent concussion-related symptoms, it is recommended for them to undergo a vision screening. An examination will determine if a visual dysfunction is present.

Without further ado, here are 7 common vision problems associated with brain injuries:

#### 1. Blurred or Blurry Vision

Blurred vision refers to the loss or lack of sharpness of eyesight. As a result, you may have an inability to see fine detail.

Objects appear to be out of focus or hazy. You may find yourself blinking, squinting or rubbing your eyes to gain a clearer view.

Remember, though, sudden changes to your eyesight aren't normal so don't neglect your eye visit.

#### 2. Sensitivity to Light

Sensory disorders are common among those with a traumatic brain injury (TBI), including vision anomalies. Photophobia, or sensitivity to light, is commonly reported among individuals who have sustained a brain injury.

The affected usually have intolerance to light. Sources such as sunlight, fluorescent light, and incandescent light may all cause discomfort, along with a need to squint or close their eyes.

#### 3. Double Vision

The ability to see a single image with two eyes involves a complex system of muscles, nerves and other eye parts. When two eyes correctly and accurately point and focus at the same time, we see only one image of the world.

Double vision can happen when two eyes point and focus differently from each other. With a head injury, double vision often comes on suddenly.

#### 4. Aching Eyes

A lot of people have experienced sore eyes at some point in their lives. When eye pain does not seem to get better, this could be a



sign of something more serious.

Aching eyes that result from a concussion may not always cause pain or discomfort in your eye. You could also experience pain around them.

#### 5. Headaches with Visual Tasks

Individuals who have sustained a concussion may be prone to frequent headaches when they read, watch television, spend time on the computer, etc. Good visual skills are fundamental for efficient information processing. When processing visual information is challenging, you may try harder to focus. As a result, you may be straining without even knowing it because the effort is subconscious.

#### 6. Inability to Maintain Visual Contact/Focus

Our eyes have an automatic focusing system which adjusts the lens inside our eye to see clearly at all distances. If there is a problem in how easily or quickly your eyes focus, that visual problem relates to a condition known as accommodative dysfunction. You may have difficulty tracking objects, or shifting gaze quickly from one point to the other.

#### **Hidden Vision Problems**

#### 7. Reading Difficulties

Those who have sustained a head injury may have difficulty reading due to words that seem to move or change appearance. They may also experience decreased fluency, reading speed and challenges with comprehension.

As you can see, when the visual system is dysfunctional, every task can seem difficult.
Consequently, you use more energy than usually required. From eye tracking, to fixation, to maintaining attention, a lot of visual skills are affected by a TBI. That's why, if you've suffered from a TBI, it could be beneficial to visit a strong vision care professional.

These professionals also play an important role in your overall rehabilitation.

Material for this article was taken from NeuroTracker.net and the NeuroTracker Facebook page.

My Name is Linda Scherwinski. I am the mother of a brain injury survivor and a BIRC Board Member. I have been an active supporter of BIRC since 2012.

#### If Hope Is A Color

Will Hope be enough to sustain her?

Denise Meagher

With a war threatening to tear the world apart, Dottie is faced with a battle for survival at home. Life on the farm, like Dottie's emotions, has gone haywire. Her older brother has left to fight. Her mother battles despression as her father continues to make his nightly visits to the barn. The care of her youngest sister, Emmy, falls to her.



https://youtu.be/UQrRiedr28c



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#### Please Help with our Fundraising Effort Brain Injury Resource Center of Wisconsin

We are collaborating with Yankee Candle® fundraising to help reach our fundraising goal! Yankee Candle® offers a variety of items including candles, décor, home and kitchen products (all starting under \$10.00 and 40% of every sale goes to us!)



BIRCofWI is an all-volunteer based organization. Funds raised allow us to perform various types of outreach throughout Wisconsin. You may or may not be aware of the variety of Programs and Services we are able to offer:

This outreach includes the following:



- Informational and Educational Website
- The BI-Inside Magazine (Wisconsin's only magazine focusing on Brain Injury)
- Education and Awareness Events
- One-on-one Resource Facilitation
- Facebook and social media outreach
- Social and Life Skills Events/Sessions
- Arts and Crafts Session
- Advocacy assistance
- Online Brain Injury Resource Directory
- Access to support groups
- ICU Tote Bag Program
- CBIS training and preparation and Brain Injury Fundamentals webinars

PEATURES:

We are a 501C3, Registered Charity 27-4483622, Tax Exempt Organization - We are 100% funded through the generosity of people like you

There are 2 ways to shop: online or from the \*catalog (\*catalog orders are delivered to the BIRCofWI in Waukesha and will be available for pickup in time for the holidays!)

\*Catalogs need to be picked up from the BIRCofWI Home Office 511 N. Grand Ave. Waukesha

#### ONLINE

Website offers over 500 items online, including exclusives. Site: <a href="https://www.yankeecandlefundraising.com/">https://www.yankeecandlefundraising.com/</a>
Scroll down to START SHOPPING then enter Group Number 999992183 then click Start Shopping

- Be a part of the fundraiser by becoming a seller yourself!
- Click on the Seller Login button then fill out the Sign up to be a seller form.
- Use the Group Number 999992183 to register.

#### IMPORTANT ONLINE ORDER DATES:

Sale Begin: 08/01/2019

Sale Ends: Online shopping is available until January 8, 2020 for this fundraiser - orders are shipped to customers

home or business

Delivery: 2 -4 Weeks from receipt of order

# See you at the 2<sup>nd</sup> Annual FALL CRAFT AND VENDOR FAIR Hosted by



Saturday, October 5, 2019

Moose Lodge 1721 1721 Chestnut Street West Bend, WI

9:00 am until 3:00 pm

Join us for Food, Fun, and Lots of Shopping!

# Michael Strand

Relationships and marriage can be difficult for anybody, which means with a brain injury they can be exceptionally tough. I was engaged to be married at the time of my accident in January of 1989.

After I came out of my coma we had to decide whether or not to continue with our June wedding as planned and risk forfeiting our deposits, or to put it off for another year. Against the advice of many, we decided to go for it.

All my wife had to do was work full time, pay the bills, and plan a wedding for two hundred, as well as take care of me. I had to learn how to walk so I could make it down the aisle. In the end I did my part and my wife did hers.

That was the easy part. Most relationships don't make it past a brain injury.

Brain injury can fundamentally alter who you are. A common lament in many troubled marriages is that one's spouse is no longer the person one fell in love with.

Brain injury pretty much assures that fact. After thirty

#### Brain Injury and Marriage

years of marriage I can give you some hints as to what you can expect.

If you marry a person with a brain injury you may feel like you have to do everything. You have to support the household because your spouse may not be able to earn a significant income.

Fatigue is a major component of brain injuries so you may have to do a lot of the work around the house and yard. Your spouse may no longer be able to do mechanical repairs or cook, and if they try do some of the things they could do before, it can have disastrous results.

There are no clear boundaries, which means, you are perpetually walking on a mine field.

At first, and for the foreseeable future, you are going to feel like you gained a child, not a spouse. No adult wants to be treated like a child, and no adult wants to admit they need to be treated like a child.

Nevertheless, with a brain injury it's a fact of life. A brain injury survivor needs to admit they need help and their spouse needs to admit that an adult is not going to enjoy being taken care of like a child.

The lines of tension are set very taut and very ambiguous.

On the offhand chance your marriage lasts long enough, there is yet another hurdle. Supposing a brain injury survivor gains the ability to function more or less like a competent adult, a process which can take years, the marriage

must once again adjust to shifting roles.

This doesn't happen all at once either. Just like that troubled part of life we call adolescence, returning to the role of co-equal partner is an awkward process of fits and starts.

All the boundaries can change and there is no set or certain rhythm along the way. One hopes that after everything else, the marriage can make this adjustment.

At this point you are probably asking "is it worth it? I will tell you, in all honesty, probably not. I say this because I don't want to fill anyone's head with all sorts of unrealistic hopes.

I don't believe that soul mates are found, I believe they are made after years of effort. I believe one of the reasons so many marriages fail today is that we listen to all these love songs that place unrealistic expectations on a relationship in which things like fellowship and respect and good communication are just supposed to happen.

The love song that I do believe in is one by RUSH called "Ghost of a Chance" and it starts out like this:

I don't believe in destiny or the guiding hand of fate

I don't believe in forever or in love as a mystical state

I don't believe in the stars or the planets or angels watching from above...(continued)

But I believe there's a ghost

## But I believe there's a ghost of a chance that we can find someone to love

And make it last

I have a wonderful marriage; my wife and I are very

#### Brain Injury and Marriage (con...)

much in love, but it hasn't been easy and I certainly don't want to say, "Hey, we did it, you can too!" For us it has been worth it, but it has meant a lot of pain and regret as well as happiness.

It is possible; it's just not easy; which can be said of marriage in general, only with brain injury it is more so.

#### A Wife's Perspective

Mr.Q is Linda's husband and the author of the previous article.

This article was written on June 24, 2014
Mr. Q and I have been through a lot together in 25 years.
But I thought that today I would tell you the story of how very close we came to not having these 25 years together.

You see, about five months before our wedding, I got that phone call. You know **the one.** 

The one you hope that you never, ever get. In the movies, it always comes in the middle of the night or something, but in real life, it comes when you are least expecting it and in the middle of something mundane.

In my case, I was at work. The phone rang and it was someone calling from the hospital.

My fiancé had been in an accident. I should come right away.

And I should let someone else drive. That's all they would tell me.

I asked, 'Is he OK?' ... the answer, 'just come'. So, my friend, Sue, drove me to the hospital.

When we got there and I told the ER staff who I was, they said "Oh, come this way, we have a nice, quiet room where you can wait for someone to come for you."

What? A special room? A nice, quiet, special room? A room where they can break the bad news and you won't freak out all the other patients? Of course, this is what was going through my head, and it wasn't all that far off.

You see, Mr. Q had been driving home from work, and he was hit by a Mack truck. OK, maybe it wasn't literally a Mack truck, but it was a large semi-truck.

He had a severe head injury and was in a coma. There were really no answers to any of my questions.

Will he be OK? No one knows.

Will he ever be the same? No one knows.

How long will the coma last? No one knows.

It was a very scary time for





Linda Strand

me. Twenty-five years later and I still can't even write about it without tearing up.

Thank goodness for our friends. We have many friends, and every single one of them was invaluable to me during that time. I am still grateful to this day for all they did for me.

In the end, Mr. Q was in a coma for eight of the longest days of my entire life. Once he came out of the coma, he remained hospitalized for many more weeks while he relearned how to speak, eat and walk. As time went by, some people suggested I should delay our approaching wedding, but I refused. I knew I wanted to marry this man and I didn't want to wait.

Twenty five years later and I know I made the right decision. It definitely hasn't always been easy, but it has totally been worth it.

I love this man with all of my heart and don't even want to imagine a life without him.

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# Is The Time Right For Afternative Therapies?

"It seems that I am wiser than he is to this small extent, that I do not think know what I do not know."

—Socrates

The theory of neural plasticity claims that long after a brain is injured it may still retain the ability to repair itself, to regain lost functions by establishing new neural pathways in response to experiences and functional demands. It is an exciting and potentially disruptive way of understanding the brain.

The long-held belief that a brain injury survivors' progress inevitably plateaus after a year or two is increasingly challenged by thought leaders such as Drs. Norman Doidge, Paul Harch, Xavier Figueroa, Carol Henricks, Michael Lewis, Margaret Naeser, David Perlmutter, among others. These physicians cite dramatic cases from their clinical practices of survivors making late-stage recoveries in response to alternative therapies such as, but not limited to hyperbaric oxygen therapy (HBOT), neurofeedback, photobiomodulation, nutraceutical supplementation and craniosacral therapy.

They theorize that brain plasticity is the best way to understand such previously unheard of recoveries.

But if alternatives therapies are so great, if they really hold such promise, why are they not more widely embraced by medical professionals?



Bart and Joel Goldstein

J. Goldstein is the author of this article

If it turns out that there are persuasive reasons for doctors to steer clear of alternatives, what does that imply for the rest of us? Are those reasons equally compelling for survivors and caregivers?

Scientific proof and understanding of underlying causes is the gold standard in medicine, but what if it is absent? What are we to do about alternatives with long records of safety and mounting evidence of efficacy?

What should a reasonable and prudent person do? The answers to these questions are complex.

If we untangle the threads, we may find a perspective from which to view safe alternatives in ways that help everyone involved in the circle of care – patients, caregivers, therapists, allied health professionals, and yes, even doctors and hospitals.

Physicians avoid alternatives for several reasons:

They receive little if any exposure to them during their extensive education, no encouragement from their conservative professional culture, and no business incentive in their practices. If these influences weren't enough, there may be serious hazards facing doctors who try alternatives.

It exposes them to malpractice lawsuits when, inevitably, a patient is unsatisfied with an outcome. Worse, they risk being disciplined by local medical societies and boards for using unconventional treatments, and in extreme cases, may even be censored, lose their license or face criminal charges, lodged by the FDA or others.

Practitioners of safe alternatives have sometimes suffered these dire consequences. So for physicians there may be a high practical price to be paid for trying alternative therapies which, if they simply avoid, they cannot be faulted.

We have met doctors who acknowledge being intrigued by the prospect of trying alternatives, but deterred by possible practical consequences. It's hard to fault them.

For more of this article please visit: https://www.brainline.org
Search for "Is the Time Right For Alternative Therapies?"

#### **Brain Injury Survivor Story:**

#### Jenessa Olson

Traumatic brain injuries are sustained in many different ways. Some of us have similar circumstances just by chance. A very common way that we got our traumatic brain injuries was due to a car accident.

Jenessa Olson is an example.

Olson was young, just a sophomore in high school. I would like to think that her story started out as just the life of a typical teenager.

Olson and her friends had been spending a Saturday night together. While driving down a gravel country road they were listening to music and laughing as friends do.

They also already drank about 3 bottles of beer shared between the three of them. One of Olson's friends received a phone call about a party they could go to.

Knowing they all had a curfew that evening her friend looked at the time and decided that she would have to speed in order to make it in time. Olson hadn't realized that that her friend's plan was to drive 90 miles per hour while they were driving down a gravel road!

What happened next was a common mistake. The road curved, but the driver hadn't noticed on time.

Once she realized she had missed the curve she over-corrected. By doing this, the car went down the ditch and over to the opposite side of the road.

Olson said that they were

airborne as the Ford flew into the intersecting road. She fell out of the windshield and hit her head at some point.

Once the paramedics reached Olson and tending to her, she started screaming. Olson has no memory of this whatsoever, but was told this later on.

The paramedic sedated Olson so they could tend to her injuries more easily. Soon after, she was transported to the hospital and was there for two weeks.

Olson was then transported to the Madonna Rehabilitation Center where she stayed for another two weeks. After coming home, just like any other brain injury survivor, life doesn't come back to the way it was before.

On the outside, Olson looked as if nothing had ever happened. That is a blessing; however, this can make life that much tougher.

To everyone else a person looks just fine because they have no idea what's going on inside. A traumatic brain injury doesn't always have outward signs that there is anything wrong, which, in turn, makes life difficult.

Others have no idea if you're having difficult or struggling with something. Olson said that she lost a lot of people in her life, as in friends that once were.

People just didn't understand her, how she was now, or how to treat her.



Olson could see how different she was, forgetting things and repeating words that she had already said, she didn't want to be like that or make those mistakes. She decided that she had to help herself out on her own.

Olson said that, "Nobody could save me but myself."

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Waukesha, WI 53186-4916



Mike is a parent and strong advocate for those with brain injury and their community supports such as BIRC of WI services.

Please reach out to him for you or friends/families real estate needs.



