

Operating the Jaws of Life



Staff Sgt. Michael J. Taylor

Spc. Christopher Page and Spc. Stephen Virgil, firefighters with the 23rd Ordnance Company show Maj. Gen. Patricia E. McQuiston how to use the jaws of life during a walk through on Ramstein Airbase March 23. McQuiston observed the fire fighters as they trained to put out a fire on a make-shift airplane.

Cancer screenings prove critical

By Kristen Marquez
HMEDDAC PUBLIC AFFAIRS

A colonoscopy is something many people try to put off as long as possible – it just doesn't have a great reputation for being a screening to get excited about.

For many people who are at average risk of colon cancer, a colonoscopy is not recommended until age 50. For those at higher risk because of family history or other issues, earlier and more frequent screenings may be necessary. For Mannheim-based defense contractor Tony Voles, that issue was found during routine pre-deployment medical exams.

Voles, 49, who served in the Army for three years and has been a contractor for 25 years, thought he had a little bit of time before he needed to be screened.

"I am a civilian employee of a defense contractor, and I was going through my pre-deployment physical at the Heidelberg clinic in December," he said in an e-mail. "I was preparing to deploy to Iraq and Afghanistan after the New Year. Part of the physical involved completing a (fecal) occult blood test."

Due to Voles' other health issues, when the test came back positive, it was almost dismissed as being normal. However, Leslie Mittag, Heidelberg Medical Department Activ-

ity's population health nurse case manager, noticed the result while looking over his paperwork and insisted he have a follow-up test.

"She insisted that I have another test that covered a three-day period," he said. "At this point, I did not think it was necessary and since the doctor had already signed my paperwork, I did not want to do the test. But she insisted. I did the test and all three samples came back positive. At this point, I was not alarmed because the doctor advised me that a second test would probably come back positive."

Nevertheless, Mittag encouraged him to schedule a colonoscopy with a local German facility. He did, and the results were frightening – a cancerous tumor.

"I was devastated when I heard the news," he said. "I was speechless, I heard what the doctor was saying, but I could not believe he was talking about me."

"Physically I felt fine so, how could I have cancer? This was my worst nightmare, and I did not know what to do. If my wife was not there to support me, I am not sure how I would have handled the days and weeks following the news. I also sought out the advice from a good friend who was diagnosed with cancer two years ago. Talking with him about his ordeal helped me accept my situation," he said.

Voles is now back in the United States being treated for the cancer.

"I was not planning to have a colonoscopy until sometime after April of 2011 when I turn 50 years of age," he said. "However, since I did not have any symptoms and I do not of a family history of colorectal cancer, I cannot say for sure when I would have actually had the procedure done."

Mittag said she was just doing her job when she encouraged him to get the screenings – a job she simply loves.

"I had my intuition tell me something wasn't right, and felt he needed further testing," she said. "I went to (his doctor) and informed her of the patient since she had recently also seen him regarding immunizations. She put a hold on his deployment, and then I took him over to the TRICARE Service Center to get assistance on getting him a colonoscopy procedure as soon as possible. I felt obligated to thoroughly make sure he was totally looked at regarding the positive fecal occult blood testing that was done."

Voles now understands the importance of the screenings. "I urge everyone to follow the guidelines for fecal occult blood test screenings, sigmoidoscopies, and colonoscopies. It is important to have these procedures done in order detect cancer at its earliest stage," he said.

Troops seek TBI treatment

By Joanne Hsu
U.S. ARMY PUBLIC HEALTH COMMAND PUBLIC AFFAIRS

March is National Brain Injury Awareness Month. Brain injuries, specifically traumatic brain injuries, are major health concerns in the military.

Twelve percent of troops (about 320,000) returning from Iraq and Afghanistan reported experiencing TBI.

TBI is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain. "Concussion" is also used to describe TBIs.

Symptoms of TBI include headaches, dizziness, tiredness, trouble concentrating, forgetting things, irritability, balance problems, trouble sleeping and changes in vision.

Servicemembers can benefit from being aware of TBI and its symptoms because it is easy for TBI to be undetected by a doctor.

This could be because brain injury symptoms may not be present until weeks or months after a traumatic event. This is especially true with closed-head trauma where there are no visible effects such as bleeding or a fractured skull.

TBI is hard to distinguish from other emotional or behavioral problems such as post traumatic stress disorder or depression. There are still many unknowns about injuries to the brain that result from blasts or explosions. According to the New York Times, "These are the first wars (Operation Enduring Freedom and Operation Iraqi Freedom) in which Soldiers protected by strong armor and rapid medical care, routinely survive explosions at close range and then return to combat."

Explosions or blasts are the leading cause of TBI for active duty military personnel in war zones.

There are two major things Soldiers and their families can do about TBI.

- ♦ Know the signs and symptoms of concussions and see a doctor if symptoms continue for more than three months.
- ♦ Keep the Defense Veterans Brain Injury Center phone number (stateside civ. 800-870-9244) nearby. DVBIC can answer questions about TBI or direct Soldiers to medical providers.

For deployed Soldiers, here are tips on how to protect against brain injuries.

- ♦ Wear a helmet or other appropriate head gear when on patrol or in other high-risk areas.
- ♦ Wear safety belts when traveling in vehicles.
- ♦ Check for obstacles and loose debris before climbing or rappelling down buildings or other structures.
- ♦ Maintain clean and orderly work environments that are free of debris.
- ♦ Be aware of what is on the ground around you at all times when aircraft rotors are turning.
- ♦ Use care when walking on wet, oily or sandy surfaces.
- ♦ Employ the buddy system when climbing ladders or working at heights.