**Neurocognitive Symptoms**

Consistency of self-reported neurocognitive symptoms, post-traumatic stress disorder symptoms, and concussive events from end of first deployment to Veteran Health Administration Comprehensive Traumatic Brain Injury Evaluation by Operations Enduring Freedom/Iraqi Freedom/New Dawn veterans..Authors:Russo, Arthur C.. Psychology Department, VA New York Harbor Healthcare System, Brooklyn, NY, US, Arthur.Russo@va.gov

Fingerhut, Esther C.. Fordham University, Bronx, NY, US.Address:Russo, Arthur C., Psychology Department, VA New York Harbor Healthcare System, Brooklyn Campus, 800 Poly Place, Brooklyn, NY, US, 11209, Arthur.Russo@va.gov .Source:Archives of Clinical Neuropsychology, Vol 32(2), Mar, 2017. pp. 184-197..NLM Title Abbreviation:Arch Clin Neuropsychol.Page Count:14.Publisher:United Kingdom : Oxford University Press.Other Publishers:Netherlands : Elsevier Science.ISSN:0887-6177 (Print)

1873-5843 (Electronic).Language:English.Keywords:Veterans, Traumatic brain injury, PTSD, Assessment.Abstract:Objective: This study examined the consistency of self-reported symptoms and concussive events in combat veterans who reported experiencing concussive events. Method: One hundred and forty, single deployed, Operation Enduring Freedom, Operation Iraqi Freedom and Operation New Dawn combat veterans with Veteran Health Administration (VHA) Comprehensive Traumatic Brain Injury Evaluations (CTBIE) and no post-deployment head injury were examined to assess consistency of self-reported (a) traumatic brain injury (TBI)-related symptoms, (b) post-traumatic stress disorder (PTSD)-related symptoms, and (c) TBI-related concussive events from soon after deployment to time of VHA CTBIE. Results: Compared to their self-report of symptoms and traumatic events at the time of their Post-Deployment Health Assessment, at the time of their comprehensive VHA evaluation, subjects reported significantly greater impairment in concentration, decision making, memory, headache, and sleep. In addition, although half the subjects denied any PTSD symptoms post-deployment, approximately three quarters reported experiencing all four PTSD screening symptoms near the time of the VHA CTBIEs. At the latter time, subjects also reported significantly more TBI-related concussive events, as well as more post-concussive sequelae such as loss of consciousness immediately following these concussive events. Finally, although 84% reported a level of impairment so severe as to render all but the simplest activity doable, the vast majority simultaneously reported working and/or attending college. Conclusions: These findings raise questions regarding the accuracy of veteran self-report of both near and distant traumatic events, and argue for the inclusion of contemporaneous Department of Defense (DOD) records in veteran assessment and treatment planning. (PsycINFO Database Record (c) 2017 APA, all rights reserved).Document Type:Journal Article.Subjects:\*Brain Concussion; \*Measurement; \*Military Deployment; \*Neurocognition; \*Posttraumatic Stress Disorder; Military Veterans; Self-Report; Symptoms; Test Validity; Traumatic Brain Injury.Medical Subject Headings (MeSH):Adult; Afghan Campaign 2001-; Brain Injuries, Traumatic; Cognition Disorders; Female; Humans; Iraq War, 2003-2011; Male; Middle Aged; Neuropsychological Tests; Retrospective Studies; Self Report; Stress Disorders, Post-Traumatic; United States; United States Department of Veterans Affairs; Veterans; Young Adult .PsycINFO Classification:Clinical Psychological Testing (2224)

Neurological Disorders & Brain Damage (3297).Population:Human

Male

Female.Location:US.