



Clinical Digest

POSTDEPLOYMENT HEALTH

Mental Health Concerns in Returning Soldiers

Soldiers are more likely to report mental health problems months after returning from Iraq than immediately following their deployments. That was one of the many conclusions arrived at by researchers from U.S. Army Medical Research and Materiel Command and U.S. Army Center for Health Promotion and Preventive Medicine, both in Silver Spring, MD, after reviewing the medical records of 88,235 soldiers who served in Iraq and subsequently completed two assessments dealing with mental health.

The review included results from the Post-Deployment Health Assessment (PDHA), which soldiers completed upon return from deployment, and the Post-Deployment Health Reassessment (PDHRA), which they completed a median of six months later. Researchers also reviewed information about the soldiers' referral to and use of mental health services.

The combined assessments indicated that 20% of active duty and 42% of reserve soldiers required mental health treatment, with far more mental health concerns reported on the PDHRA than on the PDHA. Overall mental health risk increased from 17% on the PDHA to 27% on the PDHRA for active duty soldiers and from 17.5% to 35.5%, respectively, for reserve soldiers. Although the most dramatic increase was seen in concerns about interpersonal conflict, which quadrupled, concerns about posttraumatic stress disorder and depression also increased substantially.

Clinicians referred 4% of soldiers for mental health care based on their

PDHA responses and 12% for such care based on their PDHRA responses. The majority of soldiers who used mental health services had not been referred, but most of them used these services within 30 days of their screening. On the PDHRA, alcohol concerns were reported at rates similar to other mental health concerns, but referral to and use of alcoholism services were much lower than with other mental health services.

These results indicate that there is an "enormous opportunity for a better-resourced DoD mental health system to intervene early before soldiers leave active duty," the researchers say. One reason for reserve soldiers' particularly high rates of mental health concerns on the reassessment, they say, could be these soldiers' difficulties with securing health care for their deployment-related problems. The increase in interpersonal concerns highlights the impact that war can have on soldiers' family members and the inadequacy of currently available mental health care, according to the researchers.

The researchers suggest that the assessment process may have encouraged self-referral for soldiers who did not receive clinical referrals. They add that alcohol treatment may be underutilized because it triggers involvement of a soldier's commander and can have negative career ramifications.

Source: *JAMA*. 2007;298(18):2141-2148.

GERIATRICS

Gait Speed: A New "Vital Sign"?

Improvements in gait speed could serve as an effective "vital sign" in assessing elderly patients' chances for survival over the next eight years,

say researchers from University of Pittsburgh and Pittsburgh VA Health Care System, both in Pittsburgh, PA, and Merck Research Laboratories, Blue Bell, PA.

The researchers recruited 39 patients with a mean age of 74 between April and October 1996. They spent the next year evaluating the patients' health and function with six measures: gait speed, the Short Physical Performance Battery, the Medical Outcomes Study 36-item Short Form Health Survey, the EuroQol, the National Health Interview activity of daily living scale, and global health change.

Of all the health improvements measured, only gait speed improvement was associated significantly with survival over the next eight years. When the patients were categorized according to gait speed measurements, mortality rates were 33% among those who showed improvement at one year; 41% among those who showed improvement at three, six, or nine months, but not at one year; and 49% among those who showed no improvement. A significant survival benefit for one-year improvers persisted after adjustment for age, sex, initial gait speed, health care system, and comorbid burden.

The researchers offer that gait speed could be associated with survival because it indicates a better ability to recover from stressful events or improved health due to medical interventions or lifestyle changes. In addition to suggesting that gait speed measurement can be a valuable clinical tool, they say the study results suggest that interventions to improve gait speed should be assessed for their ability to enhance function; quality of life; and, possibly, survival. ●

Source: *J Am Geriatr Soc*. 2007;55(11):1727-1734.