

NEUROLOGY PODCAST EXCERPT #1: (aired spring 2006)

COVERED THE U.S. GOVERNMENT'S NEW COMPREHENSIVE NEUROSCIENCE PROGRAM—TO STUDY NEUROLOGICAL PROBLEMS THAT RETURNING SERVICEMEN AND WOMEN HAVE AFTER BEING IN ACTIVE COMBAT.

What follows is one of many conditions that are being investigated.

[verbiage right before this of another medical condition the military is investigating]

#) Reporter:

I think the rule of ask “forgiveness instead of asking permission” applies to a lot of military medical situations.

#) Host:

THAT SEGUES US INTO THE AREA OF PERIPHERAL NERVE INJURY, WHERE SOME EXTRAORDINARY EXAMPLES OF FIELD MEDICINE MAY MAKE THEIR WAY INTO MAIN-STREAM VIA THE COMPREHENSIVE NEUROSCIENCE PROGRAM.

#) Reporter:

You're referring to Chester Buckenmaier's work with regional anesthesia, or nerve blocks, for pain control.

#) Host:

HE SIDESTEPED AN AIR FORCE EDICT NOT TO USE THE NERVE BLOCK PUMPS ON MEDEVAC PLANES. THE AIR FORCE THOUGHT THE PUMPS THEMSELVES WOULD MALFUNCTION OR THEIR MICROCHIPS WOULD TINKER WITH THE PLANES' INSTRUMENTATION. SO HE TOLD HIS PATIENTS TO HIDE THE PUMPS WHILE THEY WERE IN TRANSIT. GOOD THING THEY WERE SMALL ENOUGH TO FIT IN A FANNY PACK.

#) Reporter:

[LAUGHING] Yes! That order was rescinded later.

#) Host:

WHY IS PERIPHERAL NERVE INJURY SUCH A BIG ISSUE IN THE GULF WAR?

#) Reporter:

We hear a lot on TV about the death toll from the war. No one can minimize that. But the biggest toll today is pain — pain from injuries sustained by soldiers who survive. Our soldiers wear Interceptor body armor and Kevlar helmets that deflect shrapnel away from the torso and head “kill zones.” But the soldiers' arms and legs are left unshielded so they can be mobile. The body armor's success has an unintended effect of creating a new class of survivable physical trauma. Iraq is more than an extreme environment — it's a war on the extremities.

Seventy percent of those who lose a limb in combat feel relentless pain years after being wounded. But the latest research suggests that if you give a nerve block right after a traumatic injury, it may alleviate or even prevent certain forms of chronic pain, including phantom-limb syndrome. And soldiers will be alert and comfortable on pump-controlled doses of non-addictive

drugs while they're evacuated.

Colonel William Campbell is expanding on Buckenmaier's work with nerve blocks to pre-empt chronic pain.

#) Host:

EVERY WAR PRODUCES ITS MEDICAL SIGNATURE. IN THE CIVIL WAR, IT WAS "IRRITABLE HEART." IN WORLD WAR ONE, IT WAS "SHELL SHOCK." WORLD WAR TWO VETS HAD "BATTLE FATIGUE." VIETNAM DEFINED "POST-TRAUMATIC STRESS DISORDER." LET'S HOPE WE CAN ERASE THE GULF WAR'S SIGNATURE WITH THE RESEARCH BEING DONE TODAY. YOU CAN READ MICHELLE SULLIVAN'S COMPLETE REPORT ON THE GOVERNMENT'S COMPREHENSIVE NEUROSCIENCE PROGRAM IN THE MARCH 2006 ISSUE OF CLINICAL NEUROLOGY NEWS.

#) Host: (cont'd)

JUST AHEAD, OUR CASE FILE — THE CONTROVERSY SURROUNDING SPINAL CORD REGENERATION.

SCI-FI, AS USUAL, HAS PRECEDED REAL-WORLD MEDICINE IN SPINAL CORD REGENERATION. A CHARACTER IN STAR TREK THE NEXT GENERATION, UNDERWENT SPINAL CORD REPLACEMENT SURGERY UNDER QUESTIONABLE CIRCUMSTANCES. WHO WAS THAT CHARACTER? BONUS POINTS IF YOU KNOW THE SHOW'S TITLE AND WHEN IT AIRED. IN A MOMENT, THE ANSWER.

#) [OMN SPOT]

#) Music:

#) Host:

IF YOU WATCH STAR TREK RERUNS WHILE YOU'RE ON CALL, YOU KNOW THAT LIEUTENANT COMMANDER WARF RECEIVED THAT SPINAL CORD TRANSPLANT. THE SURGICAL TECHNIQUE WAS UNTRIED — AND, AT ONE POINT DURING THE PROCEDURE, WARF APPEARED TO HAVE DIED. BUT ONE OF HIS REDUNDANT SYSTEMS KICKED IN TO HELP REGENERATE THE SPINAL CORD AROUND THE IMPLANT. THE EPISODE, WHICH FIRST AIRED IN FEBRUARY 1992, WAS APPROPRIATELY CALLED ... "ETHICS." *(end of first excerpt)*