



April 24, 2015

The Honorable Jerry Moran  
United States Senator  
Senate Russell Building, Room 361A  
Washington, DC 20510

The Blinded Veterans Association (BVA) is the only Congressionally chartered Veterans Service Organization exclusively dedicated to serving the needs of our Nation's blinded veterans and their families. The Association has provided such services for 68 years, BVA greatly appreciates your support for improving the care and services for our disabled veterans.

On behalf of our members, I write to add our support for S. 564, which would hopefully mark the beginning of a change in the way our Nation cares for those who have bravely defended it.

The legislation will significantly improve the ability of our veterans, and, in our case, those with vision loss, to access VA benefits. Improvements in audiology accessibility have, sadly, seen frequent delays in the past. Passage of this bill will result in improved VA services and delivery.

The proportion of blast-related injuries seen from Iraq and Afghanistan is higher than in previous wars. About 68 percent of all Wounded-In-Action (WIA) evacuations are for blast-related injuries due to the enemy's weapons of choice-- Improvised Explosive Devices (IEDs) and Rocket-Propelled Grenades (RPGs). As a result, although more wounded soldiers are surviving injuries that would have been fatal in previous wars, the nature and extent of those injuries tend to be more severe and require more complex long-term medical management.

The most common otologic finding in blast injury is tympanic membrane rupture, which will occur in 50 percent of adults. The IEDs commonly employed by insurgents in Iraq produce pressures exceeding 60 pounds per inch, reaching peak pressure in about 2.5 to 50 milliseconds. Unsurprisingly, personnel who survive exposure to such blasts frequently suffer Traumatic Brain Injury (TBI), traumatic amputation of limbs, and injury to the ear and multiple other organs. There are 19 conditions associated with blindness and hearing loss.

Currently, auditory rehabilitation has been an end-organ discipline. The treatment and rehabilitation of auditory and vestibular injury associated with blast trauma, however, will require a multidisciplinary approach to include otolaryngology, neurology, audiology, speech-language pathology, neuropsychology, mental health, and physical and occupational therapy. The type of auditory deficit present in the patient will determine treatment options that include medical/surgical interventions, technological considerations, and auditory training/counseling.

In addition, patients with TBI may have cognitive impairments (problems with orientation, attention, concentration, perception, comprehension, learning, organization of thought, executive function, problem solving, and memory) that will require special attention to maximize the benefits of rehabilitation. Providers may need to introduce new ideas and concepts by showing the patient examples. Reducing visual and auditory distractions and giving directions one step at a time are also way that providers can reduce confusion for a patient with cognitive impairments. It is also important to demonstrate and explain information in more than one modality.

Although eye injuries are less common in LAV accidents, up to 28 percent of soldiers exposed to blasts have significant eye injuries. Visual field deficits must be taken into consideration when providing aural rehabilitation and amplification device instructions. Patients may have limitations in their field of vision and require the use of glasses, magnifiers, or other visual aids to benefit from rehabilitation. Furthermore, behavioral and emotional issues, including aggression, agitation, mental trauma, and adjustment to disabilities, may interfere with treatment plans at early stage of recovery.

Passage of this landmark legislation will help veterans. The Blinded Veterans Association is one of nine Congressionally chartered Veterans Service Organizations currently supporting S. 564. BVA has assisted blinded veterans and their families in adjusting to life without sight and regaining confidence and independence since its founding in 1945.

Sincerely,

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