

Representatives of the International Hyperbaric Medical Association Testify Before House Veterans Affairs Committee

“Evidence Presented on Safe and Cost-Effective Solution to Traumatic Brain Injury/Post Traumatic Stress Syndrome (TBI/PTSD)”

WASHINGTON, July 21 /PRNewswire-USNewswire/ — Today, Paul G. Harch, M.D., representing the International Hyperbaric Medical Association, presents research data from case reports and a prospective study to the House Committee on Veterans Affairs. Recent research is demonstrating that Hyperbaric Oxygen Therapy at 1.5 atmospheres helps heal blast-induced brain injury and PTSD in U.S. Veterans.

According to Dr. Harch, “Modern medicine has no other treatments for traumatic brain injury or post-traumatic stress disorder that are as effective as hyperbaric oxygen therapy when the correct dose and protocol are used.” Hyperbaric oxygen therapy is over 50 years old, and is approved for 13 indications, including non-healing wounds throughout the body and three types of brain injury.

Dr. Harch will be presenting preliminary findings from the LSU HBOT 1.5 Pilot study (LSU IRB #7051) which was funded by private citizens and charities that serve injured veterans. The first half of the HBOT 1.5 protocol produced the following significant improvements in Veterans: a 15 point IQ increase ($p < 0.001$) (the difference between a laborer and an engineer); a 40% reduction in post-concussion symptoms [$p = 0.002$ (np)]; a 30% reduction in PTSD symptoms ($p < 0.001$); a 51% decrease in indices of depression ($p < 0.001$), and a 25 percentile increase in working memory. These results and the associated improvements in brain blood flow on functional brain imaging were consistent with changes in memory and blood vessel density achieved in an animal model that employed an earlier version of the HBOT 1.5 protocol. The imaging changes, in particular, argue strongly against the placebo effect as an explanation for the cognitive and symptom improvements. The vast majority of study subjects have returned to duty, work or school, and experienced quality of life improvements. The study findings are further supported by improvements in brain injured active duty service members treated with the HBOT 1.5 protocol by Drs. Eddie Zant and James Wright (USAF, retired). In the Zant/Wright case series all of the Airmen were retained in the service. This retention saved the government millions of dollars in future medical care, disability payments, and recruiting/training costs to replace the injured Airmen.

Traumatic Brain Injury (TBI) is considered the signature injury of the Iraq and Afghanistan Wars, and it is estimated that over 600,000 are suffering from TBI, PTSD, depression, or a combination thereof. Hundreds of thousands may be undiagnosed and untreated. Many have become unemployed, homeless, incarcerated, or even suicidal because of their wounds. This treatment, if delivered in a timely fashion, may prevent many of the consequences of TBI.

Dr. Harch will also announce details of the National Brain Injury Rescue and Rehabilitation Project (NBIRR), a national multi-center study sponsored by the International Hyperbaric Medical Foundation. The study is recruiting patients with chronic TBI, PTSD, or both diagnoses and offer the full HBOT 1.5 protocol to all subjects entered. Information about the NBIRR study and Western IRB Protocol #20090761, can be found at <http://www.nbirr.org> and <http://www.clinicaltrials.gov> or by calling (800) 288-9328.

The House VA committee’s “Round Table” discussion with Dr. Harch and others can be viewed on webcast at: <http://veterans.house.gov/> at 10 a.m. Eastern Time on July 21, 2010.