AWARD NUMBER: W81XWH-16-1-0015

TITLE: Patterns of Tinnitus and Hearing Loss Secondary to Blast Injury

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RECIPIENT: Veterans Medical Research Foundation
San Diego, CA 92161

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Fort Detrick, Maryland 21702-5012

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**Patterns of Tinnitus and Hearing Loss Secondary to Blast Injury**

This three-year study proposes to recall Marine and Navy participants of the Marine Resiliency Studies, who were deployed and subject to blast-induced TBI for permission to access past and current audiograms given by the DoD and DVA, and to participate in phone interviews and complete on-line questionnaires, among consenting participants, 200 individuals divided among four groups will be invited for on-site evaluations. The study groups will be:  

**Group 1**: Blast-exposed during deployment with post concussive symptoms (PCS), new onset and persistent tinnitus;  
**Group 2**: Blast-exposed PCS, no tinnitus;  
**Group 3**: No blast-exposure during deployment, but new tinnitus;  
**Group 4**: No blast exposure, no tinnitus.  

The onsite evaluations will consist of a magnetoencephalography (MEG) scan, hearing tests, standard MRS interviews, neurocognitive tests and questionnaires, and tinnitus questionnaires. By comparing subjects with tinnitus and those without, we hope better characterize the symptoms of blast-related tinnitus when compared to tinnitus from other causes such as falls or chronic noise exposure. We hope to develop better ways make an objective test, or diagnosis for tinnitus in blast versus non-blast exposed individuals with tinnitus onset. Thus our ultimate goal is to characterize the areas of the brain specifically associated with tinnitus.
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1. **INTRODUCTION:** Narrative that briefly (one paragraph) describes the subject, purpose and scope of the research.

This three-year study proposes to recall Marine and Navy participants of the Marine Resiliency Study (MRS and MRS-II) who were deployed and subject to blast-induced TBI, who had agreed to be re-contacted for future studies, for permission to access past and current audiograms given by the DoD and DVA, and to participate in phone interviews and complete on-line questionnaires. Among consenting participants, 200 individuals divided among four groups will be invited to San Diego for on-site evaluations. The study groups will be: Group 1: Blast-exposed during deployment with post concussive symptoms (PCS), new onset and persistent tinnitus; Group 2: Blast-exposed PCS, no tinnitus; Group 3: No blast-exposure during deployment, but new tinnitus; Group 4: No blast exposure, no tinnitus. The onsite evaluations will consist of a magnetoencephalography (MEG) scan and hearing tests, and well as standard MRS interviews, neurocognitive tests and questionnaires, including tinnitus questionnaires. The MEG is an imaging study of the brain, very much like an MRI, but has distinct advantages. First, it measures the nerve tracts of the brain, as well as their firing sequence in millisecond time, and it has the advantage of being quiet, so inside scanner tests can be done to assess aspects of the tinnitus while the brain is being imaged. By comparing Service Members with tinnitus and those without, we hope better characterize the symptoms of blast-related tinnitus when compared to tinnitus from other causes such as falls or chronic noise exposure, and to identify the centers of the brain that contribute to, or constitute the source of tinnitus. By better characterizing tinnitus, and better understanding how the brain contributes to it, we hope to develop better ways make an objective test, or diagnosis for tinnitus in blast versus non-blast exposed individuals with tinnitus onset. We are hopeful that this knowledge will allow for development of treatments, either medication or therapies based on modification or re-modeling of brain connections that are causing the tinnitus. Thus our ultimate goal is to characterize the areas of the brain specifically associated with tinnitus so as to formulate purposeful and effective treatment for this potentially devastating syndrome.

2. **KEYWORDS:** Provide a brief list of keywords (limit to 20 words).

Tinnitus, Traumatic Brain Injury, Magnetoencephalography

3. **ACCOMPLISHMENTS:** The PI is reminded that the recipient organization is required to obtain prior written approval from the awarding agency Grants Officer whenever there are significant changes in the project or its direction.

**What were the major goals of the project?**

*List the major goals of the project as stated in the approved SOW. If the application listed milestones/target dates for important activities or phases of the project, identify these dates and show actual completion dates or the percentage of completion*
<table>
<thead>
<tr>
<th>Specific Aim 1: We propose to analyze already available DVA and DoD medical data and audiology exams and to administer a brief interview and questionnaires (Primary Aims 1 and 2).</th>
<th>Timeline</th>
<th>VASDHS</th>
<th>UCSD*</th>
<th>Percent Completion by Year Two</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Major Task 1:</strong> Obtain Local site IRB approval and Military IRB approval Coordinate Study Staff and Materials for Data Collection</td>
<td>Months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtask 1: Refine eligibility criteria, exclusion criteria, screening protocol and finalize consent form &amp; human subjects protocol</td>
<td>1-3 months</td>
<td>ASI</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 2: Prepare and submit Research Protocol and Regulatory Documents for local IRB Review</td>
<td>1-3 months</td>
<td>ASM</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 3: Prepare and submit Research Protocol and Regulatory Documents for HRPO IRB Review</td>
<td>1-3 months</td>
<td>ASM</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 4: Prepare and submit Research Protocol and Regulatory Documents for Military IRB Review</td>
<td>1-4 months</td>
<td>ASM</td>
<td>N/A</td>
<td>85%</td>
</tr>
<tr>
<td>Subtask 5: Submit amendments, adverse events and protocol deviations as needed</td>
<td>As Needed</td>
<td>ASM</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Subtask 6: Submit annual IRB report for continuing review, milestone DOD reporting, and other agency reporting (VA, HRPO, CDMRP, etc)</td>
<td>Annually</td>
<td>ASM</td>
<td>N/A</td>
<td>N/A</td>
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<td>Subtask 7: Hire staff and complete trainings and coordinate for space allocation for new staff</td>
<td>1-3 months</td>
<td>AP</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 8: Coordinate training of staff and technicians 100% concordance (inter-rater reliability)</td>
<td>1-6 months</td>
<td>AP/AD</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 9: Obtain all materials for data collection, create database, standard operating procedure and forms, and finalize all data collection</td>
<td>1-6 months</td>
<td>ASM</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Milestone Achieved:</strong> Local IRB, HRPO IRB, and Military IRB approval at VASDHS</td>
<td>at 4 months</td>
<td>ASM</td>
<td>N/A</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Milestone Achieved:</strong> Research staff hired and trained and all materials ready for data collection</td>
<td>at 6 months</td>
<td>AP/AD</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Major Task 2:</strong> Data Collection and Data Entry</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact eligible participants and complete interview and questionnaires</td>
<td>6-36 months</td>
<td>ASP</td>
<td>N/A</td>
<td>40%</td>
</tr>
<tr>
<td>Subject data entry into study database</td>
<td>6-36 months</td>
<td>AD</td>
<td>N/A</td>
<td>25%</td>
</tr>
<tr>
<td>Audit and Clean Entered Subject Data, prepare for analysis</td>
<td>6-36 months</td>
<td>AD</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Milestone Achieved:</strong> All data is collected, entered, and prepared for analysis</td>
<td>at 36 months</td>
<td>ASP</td>
<td>N/A</td>
<td>10%</td>
</tr>
<tr>
<td><strong>Major Task 3:</strong> Data Analysis and Dissemination of Study Findings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtask 1: Finalizing data auditing and cleaning for statistical analysis</td>
<td>12-36 months</td>
<td>ASI</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td>Subtask 2: Perform all statistical analyses according to protocol, share output and finding with all investigators</td>
<td>12-36 months</td>
<td>ASI</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td>Subtask 3: Investigators and personnel to prepare for dissemination of findings (abstracts, presentation, publications, DOD)</td>
<td>12-36 months</td>
<td>ASI</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Milestone(s) Achieved:</strong> Data Analysis and Dissemination of Study Findings</td>
<td>at 36 months</td>
<td>ASI</td>
<td>N/A</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Specific Aim 2:</strong> We propose to invite four groups of participants to San Diego for more comprehensive assessment, audiogram, a tinnitus questionnaire, and MEG scan (200 subjects). (Aims 3)</td>
<td>Timeline</td>
<td>VASDHS</td>
<td>UCSD*</td>
<td>Percent Completion by Year Two</td>
</tr>
<tr>
<td><strong>Major Task 1:</strong> Obtain Local site IRB approval and Military IRB approval Coordinate Study Staff and Materials for Data Collection</td>
<td>Months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtask 1: Refine eligibility criteria, exclusion criteria, screening protocol and finalize consent form &amp; human subjects protocol</td>
<td>1-3 months</td>
<td>ASI</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 2: Prepare and submit Research Protocol and Regulatory Documents for local IRB Review</td>
<td>1-3 months</td>
<td>ASM</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 3: Prepare and submit Research Protocol and Regulatory Documents for HRPO IRB Review</td>
<td>1-3 months</td>
<td>ASM</td>
<td>N/A</td>
<td>100%</td>
</tr>
<tr>
<td>Subtask 4: Prepare and submit Research Protocol and Regulatory Documents for Military IRB Review</td>
<td>1-4 months</td>
<td>ASM</td>
<td>N/A</td>
<td>85%</td>
</tr>
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</table>
Subtask 5: Submit amendments, adverse events and protocol deviations as needed
|                      | As Needed | ASM | N/A | N/A |

Subtask 6: Submit annual IRB report for continuing review, milestone DOD reporting, and other agency reporting (VA, HRPO, CDMRP, etc)
|                      | Annually  | ASM | N/A | N/A |

Subtask 7: Hire staff and complete trainings and coordinate for space allocation for new staff
|                      | 1-3 months | AP | N/A | 100% |

Subtask 8: Coordinate training of staff and technicians 100% concordance (inter-rater reliability)
|                      | 1-6 months | AP/AD | N/A | 100% |

Subtask 9: Obtain all materials for data collection, create database, standard operating procedure and forms, and finalize all data collection preparation
|                      | 1-6 months | ASM | N/A | 100% |

Milestone Achieved: Local IRB, HRPO IRB, and Military IRB approval at VASDHS
|                      | at 4 months | ASM | N/A | 80% |

Milestone Achieved: Research staff hired and trained and all materials ready for data collection
|                      | at 6 months | AP/AD | N/A | 100% |

Major Task 2: Data Collection in San Diego and Data Entry

Contact eligible participants, coordinate travel to San Diego for completion of assessment
|                      | 6-36 months | ASP | ASP | 30% |

Subject data entry into study database
|                      | 6-36 months | AD | N/A | 10% |

Audit and Enter Subject Data, prepare for analysis
|                      | 6-36 months | AD | N/A | 0% |

Milestone Achieved: All data is collected, entered, and prepared for analysis
|                      | at 12 months | ASP | N/A | 0% |

Major Task 3: Data Analysis, Dissemination of Study Findings, and Study Close Out and Final Reports

Subtask 1: Finalizing data auditing and cleaning for statistical analysis
|                      | 30-36 months | ASI | N/A | 0% |

Subtask 2: Perform all statistical analyses according to protocol, share output and findings with all investigators
|                      | 30-36 months | ASI | N/A | 0% |

Subtask 3: Investigators and personnel to prepare for dissemination of findings (abstracts, presentation, publications, DOD)
|                      | 30-36 months | ASI | N/A | 0% |

Subtask 4: Finalize and submit all study findings to appropriate scientific meetings, publications, etc
|                      | 32-36 months | ASI | N/A | 0% |

Subtask 5: Investigators and personnel to prepare and submit final reports to corresponding agencies (DOD, VA, HRPO, etc)
|                      | 32-36 months | ASI | N/A | 0% |

Milestone(s) Achieved: Data Analysis and Dissemination of Study Findings
|                      | at 36 months | ASI | N/A | 0% |

Milestone(s) Achieved: Final Reports Submitted to appropriate agencies
|                      | at 36 months | ASI | N/A | 0% |

What was accomplished under these goals?

For this reporting period describe: 1) major activities; 2) specific objectives; 3) significant results or key outcomes, including major findings, developments, or conclusions (both positive and negative); and/or 4) other achievements. Include a discussion of stated goals not met. Description shall include pertinent data and graphs in sufficient detail to explain any significant results achieved. A succinct description of the methodology used shall be provided. As the project progresses to completion, the emphasis in reporting in this section should shift from reporting activities to reporting accomplishments.

1) Major Activities:

During this reporting period, we have accomplished the following for both Specific Aims 1 and 2:

• 100% completion of Subtask 1: Refine eligibility criteria, exclusion criteria, screening protocol and finalize consent form & human subjects protocol

• 100% completion of Subtask 2: Prepare and submit Research Protocol and Regulatory Documents for local IRB Review (we received our local VA IRB approval on 03/15/16 and our local VA R&D approval on 03/17/2016)

• 100% completion of Subtask 3: Prepare and submit Research Protocol and Regulatory Documents for HRPO IRB Review (we submitted all required documents to HRPO on 04/06/16)
• 85% completion of Subtask 4: Prepare and submit Research Protocol and Regulatory Documents for Military IRB Review (we have drafted these documents and are awaiting final approval letters from HRPO to complete the required documents for submission)
• 100% completion of Subtask 7: Hire staff and complete trainings and coordinate for space allocation for new staff (we are in process of hiring two additional staff members to assist with data collection, we have identified these staff and are working with our HR to finalize the hire)
• 100% completion of Subtask 8: Coordinate training of staff and technicians 100% concordance (inter-rater reliability) (we have begun coordinating with our study staff on assessment procedures and will continue to do so for the next reporting period)
• 100% completion of Subtask 9: Obtain all materials for data collection, create database, standard operating procedure and forms, and finalize all data collection preparation
• 40% Major Task 2, Aim 1: Contact eligible participants and complete interview and questionnaires
• 25% Major Task 2, Aim 1: Subject data entry into study database
• 30% Major Task 2, Aim 2: Contact eligible participants, coordinate travel to San Diego for completion of assessment
• 10% Major Task 2, Aim 2: Subject data entry into study database

1) Major activities: We have completed all sub-categories under Specific Aim 1, Major task 1, with the exception of obtaining approval for the DOEHRS data set (which is ongoing). We continue to work with the Naval Medical Center San Diego (NMCSD) and other institutions to obtain regulatory approval for access for the DOEHRS data set. Please note that this pending approval for DOEHRS data access does not hinder our study progress. It will be needed for our analysis and paper writing. We have begun and are accomplishing Aim, 1, Major task 2. Specifically, we have mailed out letters for a significant portion of our subject pool and are now in the process of consenting them for their enrollment prior to complete on line assessments (Study Aim 1). As of today, we have recruited 247 subjects for Aim 1 (who have verbally agreed to participate, and either have been or are currently in process of consenting) and have scheduled 28 subjects for their onsite assessment for Study Aim 2. For those subjects that we can reach on the phone, our staff’s recruitment rate is approximately 80-85%. Also during this reporting period, an Annual VA IRB continuing review was granted on 2/23/17 and VA R&D approval was granted on 3/15/17. The continuing review report was accepted by HRPO on 5/1/17. A protocol amendment was approved by the VA IRB on 7/12/17, which included secondary aims as an expansion of Aim 3 (Study Objective 2). This amendment included an additional optional consent for those participants who qualify for Study Visit 2. Changes to the Statement of Work or overall budget were determined to be unnecessary. The amendment information was submitted to the USAMRMC ORP HRPO and per their reporting requirements outlined in the initial HRPO approval memorandum, dated 05-JUN-2016 this amendment was considered non-substantive. Recruitment and screening for the project continues without interruption. We are currently in process of submitting an amendment to our protocol which, if approved, will allow us a waiver of documented (written) consent for the first Study Aim, in lieu of verbal consent. This will in turn allow us bypass our current lengthy, by mail, required VA consent process to enroll subjects and thus allow subjects complete Study Aim one much more rapidly, and in turn allow us to schedule their onsite assessment at the VA in a more timely way. We will continue to work closely with our scientific officer and the FITBIR team to ensure that all study milestones are met for the next reporting period. We are currently working with the FITBIR team to set up Data Access for our team and have provided the necessary paperwork this reporting period.

Status:
The subjects listed below are those for Visit 1 (phone interview), from whom Visit 2 (on-site assessment participants will be identified and recruited. On-site planned target is 200 participants. Visit 1 participants are likely to exceed the 200 number, as it is likely that more than 200 phone interviews will need to be completed to identify 200 on-site participants. To date, the vast majority of Visit 1 participants are interested in participating in on site evaluations, however.
Number of subjects recruited/original planned target: 247/200
Number of patients enrolled/original planned target: 79/200  
Number of patients completed/original planned target for Study Aim 1: 49/200  
Number of patients completed/original planned target for Study Aim 2: 22/200

Demographics Status: (all male)

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<tr>
<th>Ethnicity</th>
<th>Number</th>
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<tbody>
<tr>
<td>Not Hispanic or Latino</td>
<td>199</td>
</tr>
<tr>
<td>Cuban</td>
<td>0</td>
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<tr>
<td>Mexican</td>
<td>30</td>
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<td>Puerto Rican</td>
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<tr>
<td>South or Central American</td>
<td>2</td>
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<tr>
<td>Other Spanish culture or origin</td>
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<tr>
<td>Did NOT answer</td>
<td>2</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>247</td>
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<tr>
<th>Race</th>
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<td>11</td>
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<tr>
<td>American Indian or Alaska Native</td>
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<td>Asian</td>
<td>8</td>
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<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>1</td>
</tr>
<tr>
<td>White</td>
<td>210</td>
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<tr>
<td>More than one answer*</td>
<td>13</td>
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<tr>
<td>Did NOT answer</td>
<td>2</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>247</td>
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*RACE: Breakdown of Multiple answer participants

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<th>Race</th>
<th>Number</th>
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<tr>
<td>American Indian or Alaska Native AND White</td>
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<tr>
<td>Asian AND White</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander AND White</td>
<td></td>
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<td><strong>TOTAL</strong></td>
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Age Range (in years)  | Number in each age range |
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<tr>
<td>21-30</td>
<td>186</td>
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<tr>
<td>31-40</td>
<td>56</td>
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<tr>
<td>41-50</td>
<td>5</td>
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<td><strong>TOTAL Participants</strong></td>
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<tr>
<td>Mean Age</td>
<td>29</td>
</tr>
<tr>
<td>Median Age</td>
<td>28</td>
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</table>

Group 1: Blast-exposed during deployment with post concussive symptoms (PCS), new onset and persistent tinnitus  
Group 2: Blast-exposed PCS, no tinnitus  
Group 3: No blast-exposure during deployment, but new tinnitus  
Group 4: No blast exposure, no tinnitus

<table>
<thead>
<tr>
<th>Tinnitus Group</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>mTBI, with continuous tinnitus</td>
<td>45</td>
</tr>
<tr>
<td>mTBI, No tinnitus ever</td>
<td>4</td>
</tr>
<tr>
<td>No mTBI, with continuous tinnitus</td>
<td>12</td>
</tr>
<tr>
<td>No mTBI, No tinnitus ever</td>
<td>3</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>64</td>
</tr>
</tbody>
</table>
What opportunities for training and professional development has the project provided?

If the project was not intended to provide training and professional development opportunities or there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe opportunities for training and professional development provided to anyone who worked on the project or anyone who was involved in the activities supported by the project. “Training” activities are those in which individuals with advanced professional skills and experience assist others in attaining greater proficiency. Training activities may include, for example, courses or one-on-one work with a mentor. “Professional development” activities result in increased knowledge or skill in one’s area of expertise and may include workshops, conferences, seminars, study groups, and individual study. Include participation in conferences, workshops, and seminars not listed under major activities.

Directly through training for the study we have provided the following continued training to our study Ph.D. psychologists who are completing interviews: 1) Training in delivery of the Clinician Administered PTSD Scale and 2) Training in giving neuropsychological testing

How were the results disseminated to communities of interest?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how the results were disseminated to communities of interest. Include any outreach activities that were undertaken to reach members of communities who are not usually aware of these project activities, for the purpose of enhancing public understanding and increasing interest in learning and careers in science, technology, and the humanities.

Nothing to Report

What do you plan to do during the next reporting period to accomplish the goals?

If this is the final report, state “Nothing to Report.”

Describe briefly what you plan to do during the next reporting period to accomplish the goals and objectives.

We will continue recruitment and data collection in next reporting period.
We will simultaneously begin to enter, clean and prepare data for publication and dissemination of information. During this final reporting period, we will complete analysis on all collected data

4. IMPACT: Describe distinctive contributions, major accomplishments, innovations, successes, or any change in practice or behavior that has come about as a result of the project relative to:

What was the impact on the development of the principal discipline(s) of the project?

If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how findings, results, techniques that were developed or extended, or other products from the project made an impact or are likely to make an impact on the base of knowledge, theory, and research in the principal disciplinary field(s) of the project. Summarize using language that an intelligent lay audience can understand (Scientific American style).

Nothing to Report

(please note, of the 71 possible, only 64 have completed assessments so that they can be categorized among the four groups)
What was the impact on other disciplines?
If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how the findings, results, or techniques that were developed or improved, or other products from the project made an impact or are likely to make an impact on other disciplines.

Nothing to Report

What was the impact on technology transfer?
If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe ways in which the project made an impact, or is likely to make an impact, on commercial technology or public use, including:
- transfer of results to entities in government or industry;
- instances where the research has led to the initiation of a start-up company; or
- adoption of new practices.

Nothing to Report

What was the impact on society beyond science and technology?
If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe how results from the project made an impact, or are likely to make an impact, beyond the bounds of science, engineering, and the academic world on areas such as:
- improving public knowledge, attitudes, skills, and abilities;
- changing behavior, practices, decision making, policies (including regulatory policies), or social actions; or
- improving social, economic, civic, or environmental conditions.

Nothing to Report

5. CHANGES/PROBLEMS: The Project Director/Principal Investigator (PD/PI) is reminded that the recipient organization is required to obtain prior written approval from the awarding agency Grants Officer whenever there are significant changes in the project or its direction. If not previously reported in writing, provide the following additional information or state, “Nothing to Report,” if applicable:

Changes in approach and reasons for change
Describe any changes in approach during the reporting period and reasons for these changes. Remember that significant changes in objectives and scope require prior approval of the agency.

Nothing to Report

Actual or anticipated problems or delays and actions or plans to resolve them
Describe problems or delays encountered during the reporting period and actions or plans to resolve them.

As noted above in section “3. Accomplishments” A waiver of documented (paper) consent for Aim 1 (online questionnaire data entry and telephone interview) is currently being requested as the practicality of obtaining written informed consent has proven to be challenging during the first 2 years of study activity.
The current recruitment and informed consent process is as follows: A pool of 2700 previous MRS participants (who indicated interest in being contacted) are telephoned about their interest in this project. After interest is expressed a hard copy of the consent and HIPAA is mailed and a follow up phone call occurs when the consent is in hand. Following the consent discussion, the participant mails the completed hard copy of the consent and HIPAA form back to the research office. Once the signed consent document is received by the research office, participants are provided a tertiary ID and password for the study portal to complete Visit 1, the online and telephone portion of the study. This VA required cumbersome enrollment mail-consent process has limited the ability to enroll interested participants. Since study initiation there have been over 245 previous participants who have expressed interest to participate in the study. Of those expressing verbal interest, only 79 completed signed (mailed) consents have been received back to the research office. Multiple issues have arisen with the process of having signed documents returned and received by the VA research office, both with the efficiency of the VA mailroom, difficulties with mail system, and follow through by participants. Despite attempts to improve the process, obtaining written documentation of consent has been limiting and impractical for enrollment. With the support of our Director of Research Projects Division, we are currently in process of submitting an amendment to our protocol which, if approved, will allow us a waiver of documented consent and HIPAA waiver for the first Study Aim. This will in turn allow us to enroll subjects much more quickly and to schedule their onsite assessment at the VA (at which time they will be consented for the second Study Aim) in a more timely way. Our staff is prepared to assess multiple subjects per week, however due to the limiting factor of the VA required consenting process, the large number of willing participants cannot be booked for their onsite visit. Our hope is that with this waiver of consent for Study Aim 1, we significantly can increase enrollment for both Study Aim one and two in the next three quarters and complete this study as planned.

Changes that had a significant impact on expenditures
Describe changes during the reporting period that may have had a significant impact on expenditures, for example, delays in hiring staff or favorable developments that enable meeting objectives at less cost than anticipated.

Nothing to Report

Significant changes in use or care of human subjects, vertebrate animals, biohazards, and/or select agents
Describe significant deviations, unexpected outcomes, or changes in approved protocols for the use or care of human subjects, vertebrate animals, biohazards, and/or select agents during the reporting period. If required, were these changes approved by the applicable institution committee (or equivalent) and reported to the agency? Also specify the applicable Institutional Review Board/Institutional Animal Care and Use Committee approval dates.

Significant changes in use or care of human subjects
Nothing to Report

Significant changes in use or care of vertebrate animals.
Nothing to Report

Significant changes in use of biohazards and/or select agents
Nothing to Report
6. **PRODUCTS:** List any products resulting from the project during the reporting period. If there is nothing to report under a particular item, state “Nothing to Report.”

- **Publications, conference papers, and presentations**
  Report only the major publication(s) resulting from the work under this award.

  **Journal publications.** List peer-reviewed articles or papers appearing in scientific, technical, or professional journals. Identify for each publication: Author(s); title; journal; volume: year; page numbers; status of publication (published; accepted, awaiting publication; submitted, under review; other); acknowledgement of federal support (yes/no).

  Nothing to Report

  **Books or other non-periodical, one-time publications.** Report any book, monograph, dissertation, abstract, or the like published as or in a separate publication, rather than a periodical or series. Include any significant publication in the proceedings of a one-time conference or in the report of a one-time study, commission, or the like. Identify for each one-time publication: Author(s); title; editor; title of collection, if applicable; bibliographic information; year; type of publication (e.g., book, thesis or dissertation); status of publication (published; accepted, awaiting publication; submitted, under review; other); acknowledgement of federal support (yes/no).

  Nothing to Report

  **Other publications, conference papers, and presentations.** Identify any other publications, conference papers and/or presentations not reported above. Specify the status of the publication as noted above. List presentations made during the last year (international, national, local societies, military meetings, etc.). Use an asterisk (*) if presentation produced a manuscript.

  Although we are still in the data collection phase, we are currently preparing several papers (i.e review and methods) that will reference this project. Please see below preliminary details of the papers. Please note that these papers are currently in the writing phase and have not be submitted/or in press.

  2. Clifford R, Yurgil KA, Risbrough V, Baker DG. Impact of TBI, PTSD, and Hearing Loss on Tinnitus Progression in a US Marine Cohort. With the advantage of MRS longitudinal data, we are examining whether prior hearing loss, PTSD, or tinnitus (either intermittent or constant) predicts progression of tinnitus.
  3. Clifford R, TBA, Methodological report and preliminary data on this project. This paper will include demographics and analysis results from participants who completed their Tinnitus online data reports, as well as all study methods, including audiologic and tinnitus methods utilized.

- **Website(s) or other Internet site(s)**
  List the URL for any Internet site(s) that disseminates the results of the research activities. A short description of each site should be provided. It is not necessary to include the publications already specified above in this section.

  Nothing to Report
• Technologies or techniques
  Identify technologies or techniques that resulted from the research activities. In addition to a description of the technologies or techniques, describe how they will be shared.

Nothing to Report

• Inventions, patent applications, and/or licenses
  Identify inventions, patent applications with date, and/or licenses that have resulted from the research. State whether an application is provisional or non-provisional and indicate the application number. Submission of this information as part of an interim research performance progress report is not a substitute for any other invention reporting required under the terms and conditions of an award.

Nothing to Report

• Other Products
  Identify any other reportable outcomes that were developed under this project. Reportable outcomes are defined as a research result that is or relates to a product, scientific advance, or research tool that makes a meaningful contribution toward the understanding, prevention, diagnosis, prognosis, treatment, and/or rehabilitation of a disease, injury or condition, or to improve the quality of life. Examples include:
  • data or databases;
  • biospecimen collections;
  • audio or video products;
  • software;
  • models;
  • educational aids or curricula;
  • instruments or equipment;
  • research material (e.g., Germplasm; cell lines, DNA probes, animal models);
  • clinical interventions;
  • new business creation; and
  • other.

Nothing to Report

7. PARTICIPANTS & OTHER COLLABORATING ORGANIZATIONS

What individuals have worked on the project?
Provide the following information for: (1) PDs/PIs; and (2) each person who has worked at least one person month per year on the project during the reporting period, regardless of the source of compensation (a person month equals approximately 160 hours of effort). If information is unchanged from a previous submission, provide the name only and indicate “no change.”

Example:
Name: Mary Smith
Project Role: Graduate Student
Researcher Identifier (e.g. ORCID ID): 1234567
Nearest person month worked: 5

Contribution to Project: Ms. Smith has performed work in the area of combined error-control and constrained coding.
Name: Dewleen Baker M.D.
Project Role: Principal Investigator
Researcher Identifier (e.g. ORCID ID): 0000-0002-1736-9838
Nearest person month worked: 3 CM
Contribution to Project: Dr. Baker has overseen refinement of eligibility criteria, exclusion criteria, the screening protocol and finalization of the consent form & human subject’s protocol as well as ensured that the study hits all quarterly milestones during this reporting period.

Name: Caroline Nievergelt, Ph.D.
Project Role: Co-Investigator
Researcher Identifier (e.g. ORCID ID): 0000-0001-5766-8923
Nearest person month worked: 1.09 CM
Contribution to Project: Dr. Nievergelt has assisted in refinement of eligibility criteria, exclusion criteria, the screening protocol and finalization of the consent form & human subject’s protocol, and the design of the overall study during this reporting period.

Name: Mingxiong Huang, Ph.D.
Project Role: Co-Investigator
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.8 CM
Contribution to Project: Dr. Huang supervised MEG data acquisition equipment set up and programming, provided MEG trainings to all MEG operators, and served as the MEG lead this reporting period.

Name: Chung Cheng, Ph.D.
Project Role: Collaborator
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 0.71 CM
Contribution to Project: Dr. Chung supervised/completed MEG programming and supervised MEG data analysis this reporting period.

Name: Victoria Risbrough, Ph.D.
Project Role: Co-Investigator
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.8 CM
Contribution to Project: Dr. Risbrough has assisted in refinement of eligibility criteria, exclusion criteria, the screening protocol and finalization of the consent form & human subject’s protocol, and the design of the overall study during this reporting period.

Name: Royce Clifford, M.D
Project Role: Co-Investigator
Researcher Identifier (e.g. ORCID ID): 0000-0002-5515-4336
Nearest person month worked: 1.8 CM
Contribution to Project: Dr. Clifford has assisted in refinement of eligibility criteria, exclusion criteria, the screening protocol and finalization of the consent form & human subject’s protocol, as well as set up all equipment related to audiology exam and completion of assessments during this reporting period.
Name: Kate Yurgil, Ph.D.
Project Role: Co-Investigator
Researcher Identifier (e.g. ORCID ID): 0000-0003-0651-5219
Nearest person month worked: 1.8 CM
Contribution to Project: Dr. Yurgil has assisted in refinement of eligibility criteria, exclusion criteria, the screening protocol and finalization of the consent form & human subject’s protocol, and the design of the overall study during this reporting period.

Name: Genevieve Quintard
Project Role: Neurocognition Battery Expert
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 8.26 CM
Contribution to Project: Ms. Quintard has performed work on the study recruitment materials, study databases, and assisted with all other preparation for data collection.

Name: Andrew De La Rosa
Project Role: Data Manager
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 2.39 CM
Contribution to Project: Mr. Delarosa has performed work on the study recruitment materials and study databases during this reporting period.

Name: Albert Olivares
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 2.46 CM
Contribution to Project: Mr. Olivares has performed work on the study databases during this reporting period.

Name: Anjana Patel
Project Role: Project Manager
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.2 CM
Contribution to Project: Ms. Patel has performed work on the study recruitment materials, study databases, staff hiring, staff training, equipment procurement, overall staff supervision, subject assessment planning, and local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Name: Taylor Kash
Project Role: Regulatory Manager
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.2 CM
Contribution to Project: Mrs. Kash has performed work on the study recruitment materials, study databases, and local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.
Name: Shetal Patel, Ph.D.
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 3.29 CM
Contribution to Project: Dr. Patel has performed work on the study recruitment materials, study databases, and VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Name: Kathryn Spaventa-Vancil
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 7.94 CM
Contribution to Project: Dr. Spaventa-Vancil has performed work on the study recruitment materials, study databases, and assisted with local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Name: Dhaval Patel
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.8 CM
Contribution to Project: Mr. Patel has performed work on the study recruitment materials, study databases, and assisted with local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Name: Meegin Kincaid
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 11.88 CM
Contribution to Project: Ms. Kincaid has performed work on the study recruitment materials, study databases, and assisted with local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Name: Bruna Cuccurazzu
Project Role: Research Assistant
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 3.35 CM
Contribution to Project: Mr. Cuccurazzu has performed work on the study recruitment materials, study databases, and assisted with all other preparation for data collection.

Name: Kathryn Resovsky
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: .17 CM
Contribution to Project: Kathryn Resovsky has performed work on the study recruitment materials and assisted data collection this reporting period.
Name: Krysta Meany, Ph.D.
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 2.27 CM
Contribution to Project: Dr. Meany has performed work on the study recruitment materials, study databases, assisted with local VA IRB and R&D submissions as well as the HRPO submission during this reporting period, and has participated in Visit 1 phone assessments.

Name: Kent Kubo
Project Role: Research Assistant
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: 1.44 CM
Contribution to Project: Mr. Kubo has performed work on the study recruitment materials, study databases, and assisted with all other preparation for data collection

Name: Michelene Wasil
Project Role: Research Associate
Researcher Identifier (e.g. ORCID ID): Not applicable
Nearest person month worked: .02 CM
Contribution to Project: Ms. Wasil performed work on the study recruitment materials, study databases, assessments, and assisted with local VA IRB and R&D submissions as well as the HRPO submission during this reporting period.

Has there been a change in the active other support of the PD/PI(s) or senior/key personnel since the last reporting period?
If there is nothing significant to report during this reporting period, state “Nothing to Report.”

If the active support has changed for the PD/PI(s) or senior/key personnel, then describe what the change has been. Changes may occur, for example, if a previously active grant has closed and/or if a previously pending grant is now active. Annotate this information so it is clear what has changed from the previous submission. Submission of other support information is not necessary for pending changes or for changes in the level of effort for active support reported previously. The awarding agency may require prior written approval if a change in active other support significantly impacts the effort on the project that is the subject of the project report.

Nothing to Report

What other organizations were involved as partners?
If there is nothing significant to report during this reporting period, state “Nothing to Report.”

Describe partner organizations – academic institutions, other nonprofits, industrial or commercial firms, state or local governments, schools or school systems, or other organizations (foreign or domestic) – that were involved with the project. Partner organizations may have provided financial or in-kind support, supplied facilities or equipment, collaborated in the research, exchanged personnel, or otherwise contributed. Provide the following information for each partnership:
Nothing to Report

8. SPECIAL REPORTING REQUIREMENTS

COLLABORATIVE AWARDS: For collaborative awards, independent reports are required from BOTH the Initiating PI and the Collaborating/Partnering PI. A duplicative report is acceptable; however, tasks shall be clearly marked with the responsible PI and research site. A report shall be submitted to https://ers.amedda.army.mil for each unique award.

QUAD CHARTS: If applicable, the Quad Chart (available on https://www.usamraa.army.mil) should be updated and submitted with attachments.

9. APPENDICES: Attach all appendices that contain information that supplements, clarifies or supports the text. Examples include original copies of journal articles, reprints of manuscripts and abstracts, a curriculum vitae, patent applications, study questionnaires, and surveys, etc.

N/A
Patterns of tinnitus and hearing loss secondary to blast injury
Log Number: MR141217
Funding Opportunity Number: W81XWH-14-CRMRP-NSRRA

PI: Dewleen G. Baker, M.D.  
Org: Veterans Medical Research Foundation  
Award Amount: $1,499,323

Study/Product Aim(s)

• To test the effects of blast-related TBI on hearing loss, we will obtain audiology data, current TBI status, and use annotated MRS data to determine the effect of TBI on hearing loss.
• To replicate and quantify further our previous work on PTSD, TBI, and tinnitus, we will use audiology data, current TBI status, tinnitus severity scores along with annotated MRS data to determine the effects of deployment-related TBI on tinnitus symptom severity as measured by the tinnitus functional index (TFI), controlling for relevant variables, i.e. prior noise exposure, prior hearing loss, and PTSD status.
• To compare 4 subgroups with blast exposure and ongoing TBI symptoms and without, post-concussive symptoms and tinnitus and without, we will examine MEG resting-state signals as well as MEG responses evoked by auditory stimuli in individuals to elucidate the neural mechanisms of tinnitus related to blast, and will relate MEG findings to TFI scores, audiograms, cognition and behavioral measures.

Approach

• To use extend MRS data collection to objectively measure tinnitus and hearing loss, we will contact MRS participants for consent to use audiogram data, administer an interview (TBI and PTSD status) and questionnaires (TFI), and recruit a subsample of 200 Marines (blast plus ongoing TBI symptoms versus no-blast) and (tinnitus versus tinnitus) for on-site collection of MEG scans and quantitative audiogram data.
• Primary outcome measures: Audiograms data, TFI score, MEG data.

Goals/Milestones

CY1 Goals – Initiate Study and Data Aggregation
☐ Hire, train staff, buy equipment, finalize and submit regulatory and human subjects protocols to corresponding IRBs
☐ Obtain local and Military IRB approvals
☐ Acquire DOEHRS and audiogram data, analyze for pattern of hearing loss

CY2 Goals – Data Collection and Analyze Data for Aims 1 and 2
☐ MEG studies on MRS participants
☐ Audiograms, TBI and PTSD questionnaires

CY3 Goals – Data Collection, Score and Analyze Data, and Final Report
☐ Analysis of data and published reporting of results

Comments/Challenges/Issues/Concerns
☐ None applicable with LOI application

Budget Expenditure to Date
Projected Expenditure: $465,214.60
Actual Expenditure: $1,034,108.40

Timeline and Cost

<table>
<thead>
<tr>
<th>Activities</th>
<th>CY 1</th>
<th>CY 2</th>
<th>CY 3</th>
</tr>
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<tbody>
<tr>
<td>Hire staff, prepare for data collection, obtain all regulatory approvals</td>
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<tr>
<td>DOEHRS and audiogram data, analyze for pattern of hearing loss</td>
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<tr>
<td>Perform MEG for tinnitus and blast patterns in 50 per group</td>
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<tr>
<td>Analyze Tinnitus Data, Dissemination of Study Findings, and Final Reports</td>
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<tr>
<td>Estimated Budget ($1.5MM)</td>
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<td>$550K</td>
<td>$484K</td>
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</tbody>
</table>

Updated: January 29, 2018

Classic “notch” at 4000Hz from noise, which increases with exposure to noise. We hypothesize a “notch” at 6000Hz in blast-related TBI

MEG coherence mapping image overlaid on MRI scan in patient with unilateral tinnitus shows left auditory cortex is significantly more active. (Courtesy of Henry Ford Hospital).

Accomplishment: To define a pattern of blast-related hearing loss and tinnitus, distinct from non-blast, which could serve as a biomarker of diagnosis and basis for treatment