

AD _____

Award Number: W81XWH-08-2-0138

TITLE: Mission Connect Mild TBI Translational Research Consortium

PRINCIPAL INVESTIGATOR: Brent E. Masel, M.D.

CONTRACTING ORGANIZATION: Transitional Learning Center at Galveston
Galveston, Texas 77550

REPORT DATE: August 2009

TYPE OF REPORT: Annual

PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT:

Approved for public release; distribution unlimited

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.

REPORT DOCUMENTATION PAGE

Form Approved
OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. **PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.**

1. REPORT DATE (DD-MM-YYYY) 01/08/2009		2. REPORT TYPE Annual		3. DATES COVERED (From - To) 01 Aug 2008-31 Jul 2009	
4. TITLE AND SUBTITLE Mission Connect Mild TBI Translational Research Consortium				5a. CONTRACT NUMBER W81XWH-08-2-0138	
				5b. GRANT NUMBER	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S) Brent E. Masel, M.D. Email: bmasel@tlc-galveston.org				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Transitional Learning Center at Galveston 1528 Postoffice Street Galveston, Texas 77550				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES) US Army Medical research and Materiel Command Fort Detrick Md, 21702-5012				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION / AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES					
14. ABSTRACT The purpose of this project is to identify the incidence of post traumatic hypopituitarism (PTH) in mild TBI and develop criteria for assessing which patients with a mild TBI are at risk for developing PTH. This study will also correlate the characteristics of the individuals with PTH by neuropsychological, neurophysiological and imaging testing as they relate to functional outcome. At 6 months post injury, patients will be screened for anterior pituitary function. IRB approvals have been obtained and an Integrated Clinical Protocol has been developed. Operational procedures have been developed. Recruitment of subjects has not yet begun					
15. SUBJECT TERMS post traumatic hypopituitarsim					
16. SECURITY CLASSIFICATION OF: U			17. LIMITATION OF ABSTRACT UU	18. NUMBER OF PAGES 10	19a. NAME OF RESPONSIBLE PERSON USAMRMC
a. REPORT	b. ABSTRACT	c. THIS PAGE			19b. TELEPHONE NUMBER (include area code)

Table of Contents

	<u>Page</u>
Introduction.....	4
Body.....	5
Key Research Accomplishments.....	6
Reportable Outcomes.....	7
Conclusion.....	8
References.....	9
Appendices.....	10

Introduction: The purpose of this project will be to study the diagnosis of post traumatic hypopituitarism after MTBI. We will determine the incidence of hypopituitarism following MTBI and develop criteria for assessing which MTBI patients are at high risk for developing posttraumatic hypopituitarism and should have routine post-injury screening. We will also determine the relationship between post-traumatic hypopituitarism and functional outcome, cognitive recovery, and resolution of PCS at six months after MTBI. At 6 months post-injury, patients will be screened for anterior pituitary function by measuring IGF1, total testosterone in males, 17 beta estradiols in females, prolactin, TSH, and morning cortisol. Incidence of single and multiple pituitary hormone deficiencies will be determined. The clinical characteristics, MRI imaging results, EEG and MEG results of the patients who have pituitary deficiency will be compared to those of patients with normal pituitary function. The relationship between pituitary dysfunction and functional outcome, cognitive recovery, and resolution of PCS will be examined.

Body of report

SA #2.3: To study diagnosis of post-traumatic hypopituitarism after MTBI

SA #2.3.1: To determine the incidence of hypopituitarism following MTBI.

SA #2.3.2: To develop criteria for assessing which MTBI patients are at high risk for developing posttraumatic hypopituitarism and should have routine post-injury screening.

Relative to SA #2.3.1 and 2.3.2, IRB approval has been obtained at all institutions. The Integrated Clinical Protocol has also been developed. Clinical and organizational procedures are being refined.

At present, no subjects have been recruited.

Key research accomplishments:

None. The recruitment of study subject has not started.

Reportable outcomes:

None. Recruitment of study subjects has not begun.

Conclusion:

None. Recruitment of study subjects has not yet begun

References:
None

Appendices:

None