

Borne the Battle

Episode #224

Dave Hume, Vietnam War Navy Veteran, stroke survivor and Karyn Pingel, VA
Speech-Language Pathologist

<https://www.blogs.va.gov/VAntage/82338/borne-battle-224-benefits-breakdown-va-speech-language-pathology-services/>

(Text transcript follows)

[00:00:00] Music

[00:00:10] Opening Monologue

Tanner Iskra (TI): Oh, let's get it! Monday, December 14th, 2020. *Borne the Battle*. Brought to you by the Department of Veterans Affairs. The podcast that focuses on inspiring veteran stories and puts a highlight on important resources, offices, and benefits for our veterans. I am your host Marine Corps, veteran Tanner Iskra. Hope you had a good week outside of podcast land. This is going to be our last regular show of 2020. Doesn't mean we're fading or anything like that. We're just gonna take the holidays to work on a couple of things. We're revamping our presence on blogs.va.gov (link: www.blogs.va.gov). We're designing and inputting a VA podcast network page on there, putting together a VA podcast network newsletter, say that three times fast, that you'll be able to sign up for, to learn not only about what *Borne the Battle* is doing, but what other VA podcasts on Vantage Point are releasing. Podcasts like *Vet's First*, *Fresh Focus*, *Focus on Women Veterans - Healthcare for Sheroes*, which just recently launched, *My Life My Story*, and others. We want to keep you informed as other podcasts drop throughout the network, so I'll keep you in the loop on when and where to sign up for that newsletter when it launches. And we're playing around with the studio I've built here in the basement and seeing if we can get a more robust YouTube presence, because of course we put all the interviews on our - on VA's YouTube page and of course we'll continue to book and talk with veterans for future episodes. A lot of things are getting packed into those three weeks. So stay tuned on all of that.

Couple of ratings. However, no new reviews this week. Although, we did get an email that came in to podcast@va.gov. It says, my name is Jackson Henderson. I'm an Air Force veteran. I'm writing to you because I've heard about the *Borne the Battle* podcast and I wanted to shed some light on a program I went through. It's called the AAM, the Academy of Advanced Manufacturing. The program was created by Rockwell Automation and helps military veterans to transition from the military to the civilian world. It is a great program, and it would be a great topic to spread the word about veteran transition and career help through your podcast and other venues.

Jackson, I appreciate you writing in to spread the word and you know, let's talk. I shot you back an email. Maybe we can go deeper on that topic in 2021. As always, if you like what we put together every week, please consider smashing that subscribe button and leaving a rating and, or especially a review on Apple Podcasts. In doing so you'll be helping push this podcast up in the algorithms, giving more veterans the chance to catch the information provided not only in the interviews, but in the benefits of breakdown episodes and in the news releases.

Speaking of; onto news releases. First one says for immediate release, the US Department of Veterans Affairs Solid Start celebrated its one-year anniversary, recently. The program aims to proactively contact veterans three times during their first year of transition from military to civilian life at the 90, 180, and 360-day mark after separation. VA, in collaboration with the Department of Defense and Homeland Security, launched VA Solid Start in December of 2019. The Veteran's Benefits Administration did connect with nearly 70,000 newly separated service members in its first-year run. If a veteran has separated from the military in the past 90 days and has not been contacted by VA Solid Start, please call +1 800-827-1000 to reach a highly trained VA Solid Start representative. And as always, if you or someone you know, is having thoughts of suicide, please contact the Veterans Crisis Line to receive free confidential support and crisis intervention available 24 hours a day, seven days a week, 365 days a year. You can call +1 800-273-8255 and press one, or you can send a text to 838255, or you can chat online at veteranocrisisline.net/chat (link: www.veteranocrisisline.net). Now the next one, I'm not going to read the full press

release on this, but the veterans benefits administration and our IT department just went live with updates on the forever GI Bill processing in accordance with the Harry W. Colmery Veterans Educational Assistance Act of 2017, otherwise known as the Forever GI Bill Act. So, the IT update now reflects the Forever GI Bill changes that happened in 2017, which were the removal of the expiration of benefits for those who served on or after January 1st of 2013, it changed the way posting 9/11 GI Bill's monthly housing allowance is calculated, it expanded the Yellow Ribbon Program eligibility to include purple heart recipients. It established the Edith Nourse Rogers STEM scholarship and improved the attendance verification process for scholarship recipients, and the proration of entitlement charge for licensing certifications and national exams. From what I gather, this has all been around since the act took place in 2017, that's all it just now is reflected in the IT software. However, if you want to read up on the Forever GI Bill yourself, you can visit www.benefits.va.gov/GIBill (link: www.benefits.va.gov/GIBill/).

(00:05:34) Interview

So, we're going to end 2020 with a benefits breakdown, even though it's an episode early, because, why not? We have an amazing success story to talk about. VA has speech pathology programs for those that need to relearn how to communicate. Now, I left this interview largely unedited as to, to not give you any false pretenses on speech therapy and the speech pathology programs at VA. Even still, I think after hearing one of our guest's story, hearing his testimony, I think you're going to come away with an appreciation of what this service can do for you. If you ever need it. Our guests are Navy veteran, David Hume, wait till you hear a story it's amazing. And his VA speech pathologist, Karyn Pingle, enjoy.

(00:06:30) Music

INTERVIEW

TI: Well, first of all... Dr. Pingel-

Karyn Pingel (KP): No 'Dr.',

TI: No 'Dr.'?

KP: No 'Dr.'.

TI: Okay. Okay, 'Mrs.'?

KP: I- if you must Karen, is great.

TI: Karen, okay. This is all the great stuff that we catch at the beginning of the interviews. [all laugh]
Um, Karen, Dave, first of all, thank you so much for joining me on Borne the Battle. Thank you all for coming on and just sharing your story-

Dave Hume (DH): Thank you

TI: and really helping us break down what speech pathology is in the VA. Dave, real quick, briefly, can you give us a little bit of your early history? When you- when did you join the Navy?

DH: Well, I joined the military during the Vietnam era. As you know, there was a draft, my draft and my lottery number was pretty low. Obviously, I did not want to be drafted and put into a random position, guaranteeing I'd be shipped off to Vietnam immediately. So I joined the Navy reserve. I spent two years active duty and four years in the reserve.

TI: Very good. Very good. Now, Dave, while you were in the Navy, can you either give me your best friend or your greatest mentor?

DH: Tim Whitaker was my, my best friend. We play a lot of golf together in Jacksonville, where, where I was stationed and then San Diego. And when I went to ace school,

TI: Outstanding. Uh, Dave, what year did you get out of the Navy?

DH: In April '75... Yeah, it's just when I just went and got out.

TI: Very good. Dave, real quick, after you got out of the service, what did you do as for a career?

DH: Well [long pause]... All right. What I did is... when I graduated from college, I was still in the reserve. When I graduated from college, I wanted to be an entrepreneur. So I worked my... business for several years and I never had a job. So-

TI: Hmm.

DH: I was in the lawn maintenance business and landscaping, and the network marketing business... And, but- my main interest was when I was 50 years old, my wife and I started a farm- a hydroponic farm.

TI: Oh, wow.

DH: That's a long story.

TI: Go ahead and tell me.

DH: Okay, well then...well then, [long pause]

KP: You can do it, Dave. You can do it. Just take your time. You can do it.

DH: I've got something prepared, but I, I have... I sold... my lawn maintenance business and my landscaping business. And Kathy was a sailor, I said was a um, she was a secretary for 30 years in Tampa, Florida- a legal secretary. So we just decided to do something crazy. So, we had some piece of property and... Well, we decided- we saw something on TV about hydroponic farming. 'So we decided let's just let's start a farm!' So we had the property. We actually worked for 10 years. We grew all different kinds of vegetables, organic vegetables. We didn't use any chemicals. And we

had, we expanded three different times. It was doing, it was doing pretty good, but- my tomatoes were awesome. They were, they were really good. All the other- my cucumbers were really good. Really good. And, but, in 2017, I had a severe stroke and that actually ends my career. So I could not talk, I couldn't read, I couldn't write. So there was- I couldn't work anymore.

TI: Yeah. So can you tell me the history behind... How you've gotten to the point that you are able to talk now, and how you got to know Karyn?

DH: All right. There's one word, Karyn Pingel... that is unbelievable. My... Karen has done a miraculous job. Trying to teach me how to read, but I mean talk, but- and now I'm, I'm writing a blog. I'd tell you to tell you later about that about it.

TI: Okay.

DH: I've got a nice, four or five pages. How I had my- I had my stroke. Okay. Right. Yeah, here we go. I had my annual checkup at the VA eye clinic. My test was scheduled for Wednesday, February 1st, 2017. Before the test, I noticed my peripheral vision on my right hand side was different. My wife, Kathy seemed a little concerned. And so, we talked about this problem since I was going to the eye doctor on Wednesday. I see that- I see the doctor then, and then after we checked in, we waited 45 minutes for the nurse to dilate in my eyes and 45 minutes to see the doctor. The eye clinic is always busy. We have many veterans that have eye problems when I was in- when the eye doctor was examining my eyes, he noticed something wrong in my vision. He said, 'There's a neurological change in your eyes.' He recommended going to the ER that day. Of course, I tried to talk him out of the, going to the ER. As we talked about the problem, the doctor said, if my dad was in the room today, I would tell him the same thing. So, I agreed. As we drove to the ER, we talked about the conversation with the doctor. I knew Kathy was concerned and I was a little nervous myself.

When we got to the ER, we told the doctor what happened at the eye doctors. They decidedly admitted me to the ICU.

When we got there, the nurses were friendly and patient with me. When I got to my room, it seemed everybody was overprotective of me, the room was a little different than a normal room. As I looked around the room, they had a lot of machines that measure my blood pressure, my heartbeat and whatever they could monitor. When I kissed Kathy goodnight, I said, 'I'll be all right. Don't worry.' When we got home, I knew Kathy would be praying for me and I needed it. The following day, I had an MRI test on the MRI test, on the following day, Kathy was almost finished working at the farm- that's another story. I talked to Kathy on the phone and she said, 'I'll see you in a few minutes.' The farm was about 20 minutes from the VA hospital. As I walked to the cab, as they waited for Kathy to arrive, all of a sudden, I felt a little dizzy and I was very disoriented. My nurse said, 'are you okay?' Another nurse said, 'he is having a stroke, call the supervisor', but I was already in another world and I was scared to death. The nurses were, frankly, doing whatever they do when someone is having a stroke. When the doctors arrived, they began asking questions. 'What is your name?' 'Do you know where you are?' 'Can you move your arms?' 'How about your legs?' as they tried to answer the questions, I realized I cannot talk. I was in dire trouble. All I could do was pray. 'God help me.' I noticed my wife was in the room, and I don't remember how she got there. Since I cannot talk, all I can do was make eye contact with her. When she went wherever she went, I followed her eyes. As I watched her expression on her face, I knew my wife was in shock. Now think about this terrifying situation. I was having a major stroke and my wife was watching it unfold before her eyes. I can't imagine how she felt and unfortunately, she couldn't help me. When the drama ended, I guess I was in stable condition. I thought about what's next. 'Am I going to be a vegetable for life?' As a nurses began taking care of me. I knew it was going to be a long, scary night. That night, I could not sleep. Did I have a stroke, or was I dreaming? I did not think about my stroke and my long painful recovery. Every hour, the nurses were checking on me. How do you feel? Do you need anything? I thought they were trying to see if I was alive. That morning, the doctors came into my room. The primary told me, 'you had a global stroke. That is a huge one. Your right arm is partially paralyzed, and I think your vision is also damaged. The reason you can't talk anymore, you have a aphasia.'

They said, 'it's too early to diagnose your arm, and your vision.' One of the doctors said, speech therapy will help the aphasia since I cannot talk anymore. I cannot ask her any questions.

TI: Wow.

DH: And I see you. I couldn't do anything for myself. My right arm improve. But luckily it was not paralyzed. My stroke damaged my vision, but I can live with that even though I can't drive anymore. When you have a big stroke, anything can happen to you. I suppose I was fortunate and blessed and it could have been a lot worse. On the third day, one of the nurses said, you look bored. Another nurse that was the supervisor asked, 'wouldn't you like to walk a little with a walker?' I thought that was a good idea. In a few minutes, a young man named Roman came into my room. He was a physical therapist. He had a walker for me to use. I needed a supportive strap to support me upright. When we got hooked up, Roman said, 'are you ready to walk?' My first steps were very slow and deliberate. We walked down the hallway near where the nurse's were hanging out. In a few minutes, I told Roman I was tired. When I got to my room, I was exhausted. I guess, exercise is what I needed. It was hard, but it was doing something. The following morning, Roman was ready to go, and we started to walk. Roman said, let's not use the strap today. When we got to the hang of it, to walk without the strap, I felt comfortable. Roman said, 'Be careful. Don't fall. Don't fall and break your hip.' That's all I needed. I spent six days in the ICU. Kathy came to visit me two times a day. She became my pillar of strength.

TI: Hmm.

DH: I need to say something about the nurses that work in the ICU, being a nurse in the ICU is very difficult. Some of the patients- most of the patients are critically ill. When something happens to your patient, you must have a quick-thinking personality. Everything happens in seconds. You need to be compassionate, polite, and very patient with your patients. With a guy like me, I couldn't talk, but the nurses were great. Thank you, girls. You did a great job. I'm

still alive and I'm ready to go. Finally, it was time to go to the general population. The regular medical floor, my new room had four beds and it was tiny and cramped. I realized I was spoiled in the ICU, but I have to say that the Tampa VA is building a brand-new bed tower and every patient will always have their own room.

TI: Wow.

DH: That's pretty awesome.

TI: Yeah.

DH: I spent my time watching old movies and sports, mainly golf. There was no therapist to walk with me, and I missed that. I had plenty of time to think about my stroke and my future and my time. At this time, all I could do was take one day at a time. I prayed that God had a purpose to give me a stroke. At this time, I will recover, because I know I'm stronger than this. Now it was time to go to the rehab center. The official name is the polytrauma rehabilitation center located in the VA hospital. When I first saw my room, I was very impressed. The place reminded me of a hotel suite. You have a single bed, a bathroom with a shower, and there was a study to do my homework. The meals were served at 6:00 AM, noon, and 5:00 PM sharp. I had various therapies, including occupational therapy, vision therapy, recreation therapy, and physical training. But my favorite was speech therapy with Karyn. In the first few days, I realized I was here to work hard and study to learn how to talk again. At my age, I knew it would be very difficult. When I was in the rehab center, every night, I thought about my situation about how my life would be changed as a stroke survivor. I needed to talk. I needed to take more responsibility of myself. When you have aphasia, a place like the rehab center is very overwhelming and intimidating. When the nurse and even my therapist are trying to communicate with me, I was totally lost. I could hear what they were saying, but I didn't understand it. To me. It seemed like my whole world was going too fast, and I cannot catch it. I felt like I was driving my car on the interstate and the other drivers were going 70 miles per hour, and I was going 15 miles per hour. Before my stroke, I

was a fast talker. Now it seemed everybody was stalling in like an auctioneer. As I watched TV or a movie, I felt like the videos and the sound are out of focus, but still I still can't understand most of it, maybe 20 or 25%, If I'm lucky. One night I was thinking about my challenge and my new life. I started to feel pretty down about myself, almost depressed. My homework was too hard, and I didn't really understand it. I knew other stroke survivors could develop a bad attitude, get depressed, want to quit. I asked myself, 'why me?' when my self-pity party was run out of gas. I realized everybody has a bad day in the hospital. It was getting better. I needed to get tough. I used to say that during football when I was in high school. The following night, as I was going to sleep, I heard a voice in my head. The voice said, 'We're learning to talk again. It is very difficult. It will take a long time.' My 'Mr. Miracle' voice said, 'how can you eat an elephant, one bite at a time?'

TI: That's right.

DH: This is a marathon, not a sprint.' I knew this rehab center was where I needed to be at this time. Recovery is scary, but, so is remaining exactly the same. Our greatest story is not never falling, but in getting up every time we fall. Let me tell you a puzzling story about aphasia. When I was in rehab, I knew two words, 'yes' and 'no'. One day, I said the word 'baby'. I just said it. I thank goodness it was not a curse word. How would I explain that? Kathy and I have two basset hounds and at home, my female dog is named Bailey and the other one, the male, is Bogey. Both of them rhymes with 'baby'. I knew what a baby was, but because of my aphasia, I said the wrong word, but at least I said another word besides 'yes' or 'no'. I used the word baby as a noun, a verb or an even as an adjective in my sentences when Kathy would ask me, 'what did you have for lunch today?' I said, baby, baby and more baby. [all laugh] I tried to make sentences using the word baby. My therapists were the only people who understood what I meant. The word 'baby' lasted about four or five days, but it was funny at a time. When you have aphasia, your brain can play tricks on you. When I graduated from high school and in college, I was a C student. I thought I was killing time to graduate. When I was in the fourth grade, all of the other kids took an

achievement test. My teacher told my mom, 'your son is smart and a little lazy, but maybe you could talk to him, and perhaps you might get him motivated in school.' Well, I guess I was too lazy and quite young. After all those years, I needed a severe stroke and aphasia to get motivated to succeed in school. Believe in yourself, and you're halfway there. I believe the magic formula was in the rehab center, speech therapy. I was very fortunate to have a professional speech pathologist. Her name is Karyn Pingel. When I first met Karen, I could immediately sense her self-confidence and her deep understanding to teach me how to talk again. In the beginning, my damaged brain refused to focus on what the therapist was saying. I can't believe how patient Karen was with me. When I didn't have the answer to the question, she was asking me. I made a weird expression on my face. Eventually, Karyn knew how to read my expressions and occasionally my mind- that was a little scary. As a teacher, she was very cautious and protective about saying anything that would embarrass me or even the other patients she had. Karyn is a very considerate teacher, and her students and the other teachers, the rehab center, it was her baby. She would say to the patients, 'are you happy in the rehab center?' 'How are the graduate students treating you?' 'How can the rehab center improve your life?' Karen was not just a great teacher and she could be a close friend, a cheerleader, and a person who cares about your health and my, and in my case, she became my guardian angel. That's true. Now, how did... how did Karen teach me how to speak, read and write again? Karen was so committed to heal me, and my healing, with Karen's help, I develop a positive attitude of my future and my therapy. There is a life after a stroke. No one knows better than me- be willing to be a beginner.

I spent five weeks in the end, the VA hospital, two weeks in the hospital, and three weeks in the rehab center. Now, it's time to go home. When the hospital discharged me, I knew I would be spending a lot of time as an outpatient, to continue my speech therapy. I felt I could live at home, but I needed a caregiver. The way Kathy handled my stroke, and I knew my wife would help me, what she did when this- my stroke- a wife should never have to see this.

Tl:

Yeah.

DH: Everybody has gone through something that has changed them in a way that they- I'm going to read that again...

TI: Okay.

DH: Everybody has gone through something that has changed them in a way that they cannot ever go back to the person they were once. That's pretty- that was very, very not good.

TI: No, that was good. That was good. You're doing good!

DH: Okay. Finally, I went back home, I spent a lot of time loving my two dogs, Kathy and I don't have children and our dogs are our kids. When anybody has truly loved their dog, your dogs are treated like children. Kathy knew I needed to get my- to get a little time to get my sea legs. Yes, I was in the Navy. Living at home as a stroke survivor, was a massive change in my lifestyle. I guess I was a little grumpy and hardheaded and very stubborn. I was like to my wife, my brothers and my friends, and especially to my employees, I guess I was unhappy with my life. I guess I was overweight forever. No matter how hard I tried, I always seem to fail. When I had my stroke, everything changed in my life. I began to be cordial and more friendly to other people. I didn't swear anymore. And my temper wasn't as bad as it was before. Suddenly, I was a nice guy. I lost over 50 pounds and kept off the weight for three and a half years.

TI: Wow.

DH: Side effects of a stroke can be invisible. Even though I finally was living at home, with my wife and my two babies, luckily the rehab center with the only was only 15 minutes from our house. I certainly enjoyed going to the rehab center, spending my time to relearn, to talk again, read, and especially being a writer. The well-educated speech pathologists, the friendly, graduated students, as they were studying to be therapists and the friends that I met... I loved this place, but unfortunately COVID-19 has changed my routine and my future, the rehab center will never be the same. The VA hospital will treat the veterans, but the atmosphere will be different. And I think lonely. Thank you, because the tele-health- my therapy will continue at this

point. I'm writing a blog and I wrote my autobiography. I give speeches to the doctors and provide small talks to graduate students who are studying speech therapy.

TI: Wow.

DH: Even though I have aphasia, my life is fantastic. I play golf, walk regularly around our neighborhood, I have a great family and my wife is an angel. Because of my stroke, and stroke recovery, its about more than just healing your brain, it's about rebuilding your life... Because stroke recovery is about more than just healing your brain, it is about rebuilding a life that you love.

TI: Outstanding Dave, no, thank you so much for your testimony. Thank you so much for that.

DH: Thank you.

TI: I had questions, but I think you answered them all, [all laugh] but that's okay. Dave, Dave, I mean, you talked for over 20 minutes, uninterrupted. That's amazing. It's amazing.

DH: It's a lot of practice.

TI: Yeah.

DH: I know Karyn has- has been so good. I can't even say anything about her since she is so... If it wasn't for Karen and I didn't, I don't believe I told you about that. I met Karen the third day after my stroke.

TI: Wow.

DH: She started working for me right from the, the rehab center.

TI: Wow, great.

DH: She started working right from the very beginning.

TI: Wow.

DH: A lot of the survivors of aphasia, they don't, they don't have that problem and they don't- I know a lot of guys that a stroke four or five years ago, and they didn't get therapy right away! But there's a difference of being in the VA hospital and Karyn's had a... [long pause] Okay. So, when I want to have to talk something like, off the cuff, its tough...

TI: No Worries, no worries. I think I understand that she was right on the ball.

DH: Oh gosh.

TI: Right, in the beginning.

DH: No, well when I say she was a guardian angel, she has become over three and a half years, she has become a close friend, not just a teacher. She is. Yeah, she is. Then that is why Karyn is the, is the head of the, of the speech pathologists. She wasn't just a speech pathologist. She's the boss! She really is the boss. And that's why I talked about the other teacher. She's very... Polite to all of other teachers and all the students, she really knows what she knows. She'd been wondering for 20 years at the, at the speech pathologists. And she, she did a lot of other things too.

TI: She's very good, very good! [all laugh]

KP: Well, soon, I don't think my headphones are gonna fit cause my head might get so big, I might pop!

DH: Well, you deserve it. Believe me.

TI: That was an amazing testimony that you gave, you know? I'm going to talk to Karen for a little bit if that's okay. Just for a little bit here. Karen, we just heard Dave talk, and give his whole testimony about, you know, before he only knew three words. Yes, no, and baby, and he just talked uninterrupted for over 20 minutes. Give me a little history behind speech pathology, the speech pathology program at the VA. How did it come to be? And how did you come to start helping people like Dave?

KP: Sure, absolutely. So, you know, the, the James Haley Veterans' Hospital has been around since 1972. So the hospital itself is certainly not new. It has changed quite a lot over the last several decades, but it's really dedicated to improving the health of the men and women who have really proudly served our nation, and it's the, our Tampa VA is one of the most complex healthcare facilities in the VA system. We are one of five polytrauma facilities out there. And we're really truly the busiest. We are fortunate enough to be able to...Serve... Oh gosh- More than a hundred thousand veterans that live in like a four County area around us. Our hospital is one of the few to attain like numerous awards and recognition, over the course of the, of the course of the hospital's existence. And we have lots of accredited programs for stroke rehab, chronic pain, traumatic brain injury, transitional rehab, a lot of different programs that we have that have a CARF accreditation, which means that we specialize and we have attained a higher level of care, and therefore we have this special, accreditation for these specific programs.

TI: I think it's important that, and that we actually kind of shared the uninterrupted version because it does show that it is a work in progress, but it's also look how far he's come.

KP: I told him that as well. I completely agree. You know, I'd like to be able to include some additional education for the listeners about really what is aphasia. As you know, there are lots of people out there with this that they, people may have come in contact with individuals with aphasia, and they're just unaware.

TI: Yeah, let's go there. Let's go there real quick. Karen, what is aphasia? Cause he talked about it a lot in his testimony,

KP: Yeah, so it's really important to us that we teach individuals. When they're going through speech pathology services about what is wrong with them, what is the main disorder or the problem that we're working on? Because of course, in order to improve it, you have to truly understand it and be able to talk about it.

TI: Yeah.

KP: So, communication, which of course we're doing now, we do all throughout our lives, really involves a lot of different things like listening and understanding, speaking, and gesturing to express your thoughts or ideas. Of course, we have reading, writing, and then something called pragmatics, which is kind of like social communication. It's like when people look at you and go, 'Oh, you look great today'. And then they look at you and they go. 'Oh, you look great today.'

TI: Language inflection.

KP: Yeah, exactly. They said the same words, but of course it means something different. And in this huge communication system, we have speech, which is like the motor act of communicating. So it's how your mouth and your lips and your tongue and your voice come together to make each of the different sounds that we then put together to form words and sentences. Then there's language, and language is like the symbol system that we use. So, we put together the words, the rules are put together. The words are put together with rules in order to form these very complex sentences. And with aphasia, it's a multi-modal language disturbance, and it always happens from some type of brain damage. So, it could be a traumatic brain injury, like a car accident, or in the case of many of our active-duty service members, they may have been injured and, shot. You can have aphasia from that. You can also have aphasia from cancer, brain tumors, even infections. So anything that can cause damage to the brain and in Dave's case, as he mentioned, he had a pretty significant stroke. So aphasia can occur when a stroke happens on the left side of the brain. Usually that's where language can occur in. Very special people in different parts of the brain, but usually it's a left sided brain injury. It can happen at any age, but most people that have aphasia are in their middle to later years. And the people that I would say about 80,000 or so new people acquire aphasia every year. So it's estimated that a million people in the U.S. have aphasia right now. And aphasia, like everything else sort of ranges in severity from the very severe, which is global, which they've mentioned at one point and somebody with

global aphasia literally understands almost nothing, nothing that they hear, nothing that they read. They are not able to say very much at all, sometimes they can make some sounds, but sometimes they can't even do that.

TI: Wow.

KP: They also have- they're not able to even repeat things that they hear. And certainly, can't like, if you show them something, they can't name it. Sometimes, Dave tells the story of when I first met him in ICU, and he is sitting there in the bed and he was looking around, he was very alert. Sometimes people that have had a big stroke like this, they're very confused and out of it, and Dave can tell you a lot of what happened now that he has the words and he has access to the words he's able to describe... some of the things that he felt and saw, and it's really interesting to hear from his perspective. But one of the things he usually tells people is I had a pen and I had a cup and I put the two things in front of him, you know, and I asked him cup. And I looked at him and he looked at me with that expression. He described that he would get that look on his face. That meant he didn't understand. And I wrote the word cup and I said cup. And I showed him the two things and he had no idea. And I gestured, 'drink', you know, to represent cup. And he still looked at me like I was speaking some kind of alien language, so he had no idea what I was saying. And of course, my heart always drops. In cases like this, because the prognosis for somebody with global aphasia is very poor. It means they have a lot of brain damage. And although aphasia is, like I said, there's a range, global being the worst, people with aphasia always improve. Always, always, always. However, the speed with which they improve and how far they come is based on many different things. Of course, the individual themselves, how much education they have had, and people are like, well, why is that important? Well, language. Language enrichment occurs as you go to college, as you read more. So, the more language neural network you have, the more-

TI: How many synapses are... dedicated to language, right?

KP: Exactly, right. So, if you have better brain networking and access to things in different routes, if one route is damaged, you have more opportunity to go around that damage and try to find a different way or a different word. We do that all the time. You know, if we can't come up with one word, we think of another way to say it. So, in aphasia that entire language system is damaged. And so, Dave's prognosis was very, very poor. And of course, that doesn't deter me. You had asked before, a little bit about how I got into doing what I do, and my daughter had an aneurysm rupture in her brain when she was an infant. I come from a family of doctors, so I always thought I would be a doctor, but when my daughter experienced her aneurysm rupture, I was introduced to the rehab field, to the physical therapist and the occupational therapist and the speech language pathologist that made such a profound difference in my daughter's life, and in my life, then I went back to school to become a speech pathologist so that I could help other people like those therapists helped my daughter. So I just sort of knew that that was my calling and that I needed to... be able to give back and preferably to stroke survivors. Cause that's truly my love. But I always thought I'd worked with kids- like always. So- when I was in school and did an externship with children, and I also worked in the school system, but we were required to do an adult placement. And I was fortunate enough to have my mentor, Dr. Cynthia Uchipa, who was a professor at the University of South Florida. So, I met her there and she was also the section chief of speech pathology. At that time at the VA, she took me as her student and taught me everything that she knew... just like Dave says, I'm his guardian angel. Dr. Uchipa is my guardian angel. Within two weeks of being at that hospital, I can tell you, I knew with 100% certainty that I belong there and I would stay there forever, and I would fight for a position at that facility that it was the most amazing thing I had ever experienced in my life. The-

TI: What facility was it?

KP: The James Haley Veterans' Home

TI: Oh, yeah. So, you've been at the hospital since the beginning of your speech pathology career?

KP: Oh, yes sir. Yes. And I always, I joke that if I couldn't be there, I would train dogs because I can't imagine... a life, not at that facility. It is, you know, it's, it is absolutely an amazing hospital to work at, so that two weeks I was there, I come home, and I tell my husband, 'I'm staying at the VA'. And he's like, 'what? You want to work with kids?' He's like, 'you've always wanted to work with kids. I'm like, 'no, I don't. I want to work at the VA hospital'. He's like, 'seriously?', I'm like, 'Oh my God, you have no idea'. Anybody who says something negative about the place, I honestly believe it's because they haven't experienced it. They haven't been there. Yes, people can have a bad experience at a hospital. Everybody has had a bad experience in some healthcare environments, you know, of one sort or another, but this place is so amazing. And I have been blessed to be able to stay there for 22 years.

TI: Wow, Wow. So, you're now the chief pathologist running the program, but you still have patients, and you gave me your 'why the VA'. You had an experience early on in your career. I mean, with your experience though, you could probably work at any health consortium... anywhere other than, other than where you're at. So... why stay at the VA?

KP: The patients are definitely a huge part, but it's honestly the VA's mission as a whole to take care of those who have borne the battle, that I honestly believe is super important to me. It's something that is very meaningful to me, but the way that our VA system of care operates that we can provide the services to these individuals, as long as they benefit, and it is deemed medically necessary. So, in the real world, so outside of the VA, Dave would have had 16 speech pathology visits, 16. Dave on average received between... and it varied, you know, based on his, point in recovery, but Dave received anywhere from two to four and a half, five hours of speech therapy a day. Dave would have gotten 16 hours of speech therapy in a year in the outside world, Dave would never be Dave today... if he had not served his country, he just, it would have been impossible. He would not have been able to get the support and the services that he needed. And I keep my patients, yes, because I love them. Dave knows that Dave loves me, but I love Dave as well. I love- I can't imagine my life without

them as section chief, I have the... ability, if I wanted, to be a hundred percent administrative, but I cannot. I cannot live without them. They, they make my life meaningful. They really helped me, truly gain purpose in my life. So... they feel I give to them, but they give to me equally.

TI: Outstanding. So outstanding to hear. You are the chief pathologist. Can you real quick, briefly, can you give me a brief history behind the speech pathology program at VA and how it came to be? Is it just at James Haley or is there, are there other places that veterans can go?

KP: No, the speech pathology program exists nationwide. Just like physical therapy or occupational therapy, it does vary from hospital to hospital. As far as how many speech language pathologists are present. And some of the facilities in the more rural areas, they... don't have a speech pathologist that is there full time. They may have a traveling speech pathologist that works at several VA's and sometimes, you know, they- now that tele-health is such a big modality we are able to access some of the veterans in more rural areas that way, but speech services are available at all of the- or I can't say all- but at most of the VA hospitals throughout the nation.

TI: but either way they, if it's needed, they can get it through tele-health now that's incredible.

KP: Oh, yes. Telehealth has really changed a lot of what we are able to do. We, our service, the Tampa speech pathology department has led the nation in telehealth visits for many years now. So, we were very early adopters. There's again, Dr. Uchipa is very forward-thinking and she saw the writing on the wall and she helped us get into this nearly 10 years ago now. So, we've been doing telehealth since the beginning. It has changed and morphed into something far more amazing. Originally, you could only do it to a Seabach community-based outpatient center, which, is better than having to come to a main facility. However, not nearly as good as what we can do now, which is straight into the home. And for people like Dave with aphasia, Trying to even log onto a computer. And that's another story, right, Dave? Well, to get onto the computer access email, and do all of

that... very difficult. So, we have the ability to give these veterans a dedicated tablet. It's like an iPad, but it's in a special protective case, but we're able to issue them to, you know, to the veterans that need them for free it comes with its own internet, they don't have to have any expenses and all they have to do is once they get into the tablet and that even having to put in the password can be very challenging for people with aphasia. Dave can tell you, it's- we spent, weeks, many sessions learning how to do this initially. And I'm sure his wife can tell you that sometimes he still gets a little flustered, but you just push a button. If he just pushes the button, he can automatically... connect to us, there's a special link. It's a static link. So, it doesn't change. I'm only available through these special tablets, so that's really changed the ball game for us and being able to provide speech pathology services, to our veterans, wherever they may be. Also, our active duty service members are benefiting from this because they may be stationed, down at MacDill, they may require services on their lunch break. They're able to go to their car, they don't have to come all the way out to the facility and we're able to provide them with services and not to mention COVID, but of course they've then been able to not only have speech pathology services, but primary care and other specialty services are being provided via tele-health as well.

TI: That's outstanding to hear. Who- who's eligible for speech pathology services?

KP: Any of our veterans that are eligible for our healthcare. So, if they are enrolled in the veterans' healthcare system, through the veterans' health administration and a person is eligible to receive care, we are a console based service. So, what that means is usually we get referrals from primary care providers, or specialty providers like, the ear nose and throat docs, or pulmonology, sometimes from other therapists or registered dieticians, they can send us consults as well. So, we don't see all veterans, but we just see the veterans who have some need in their speech, language, cognition, or swallowing. Also, voice, we do voice and we also do assistive technology. We have a speech pathologist who is dedicated. She has her assistive technology specialization, and she helps the veterans learn to use

technology to benefit them, whether it's, like in Dave's case, our assistive technology specialist, Talena Codell, taught him to use his laptop as well as special software called Grammarly, which helps him to write and put things together and recognize, you know, help him recognize better ways to say things.

TI: Shoot, Grammarly helps me use the internet! [all laugh] So, we broke down the assistive technology program with Ursula Draper, I think in episode 160. So, if anybody wants to check out what assistive technology can do for your veterans, go ahead and check that episode out. You know, it's funny, we were talking about- it's funny that you're talking about the iPad. I was wondering as he, as you were talking about, that was like, well then getting on here on this interview platform that we use for Borne the Battle that must have been an exercise in itself. You know, just, just getting here to the interview, using the internet with Dave.

KP: Dave has come a long way. It's come a long week or use. I do think that if we had a camera at the house, I'm sure that his wife, Cathy get might be there some days, like wanting to pull her hair out because, you know, we've done something 50 times and then it gets a little... screwed up, but Kathy helped him get on today to make sure that everything was smooth and he didn't have any glitches. He was nervous enough to share his story.

TI: Outstanding, outstanding. Karen, are there some successful techniques or treatments that you've used with your patients over and over again? Like is there a certain, like you did mention like the cup, is there something that people can do at home if they are dealing with aphasia?

KP: So, there are lots of resources online, the American Speech Hearing Association, ASHA, they have a lot of materials out there for caregivers and patients. There are also lots of- of computer programs and things like that. I mean, the bottom line is anything that truly focuses on language is going to improve language. One of the most effective treatment modalities that we have found is something that's functional and important to the veteran like reading. So, we

have a book club at our facility. I started about 10 years ago and the individuals with aphasia who thought they would never be able to read a book again- So it's a regular book, just, you know, it could be John Grisham novel, Greg Iles, novel, whatever. We take the book, and they are taught to look at the book, the text, and to listen to an unabridged audio at the same time, because if you can have that multi-modal input, so, what they see, what they hear, matches that can help them with their understanding. It also improves speed of processing. So if you think about what Dave said about when, you know, the way he processes things, when he, he felt like he was on the highway going 15 and everybody else's going 70, even though he could hear it, he was always a little behind in understanding. So book club really helps. To improve processing speed as well. And of course, it's going to improve reading comprehension and auditory comprehension, two of the main things that are affected by aphasia. They have homework. So either myself or my graduate students spend many, many, many hours literally rewriting these novels into aphasia friendly words. The sentences are all redone so that they- I have very few propositions, very few strange grammatical or syntactical structures, because that can be very challenging for people with aphasia. So they get sort of like a summary or a cliff notes version, if you will. So they can read it and hear it in the normal way. But they also have like a cheat sheet, where they can go to it and read it in a simplified version. We break out the vocabulary words. So there's pictures, with a definition and all again, aphasia friendly, and now, comprehension.

TI: Now, are they just bringing new books? Are you just picking books?

KP: So, I get the input from the veteran, because remember this is all very veteran centric. It's about, what's important to them. And I will say it's a democracy in my group. So we do you want to-

TI: Yeah, because you can't be doing every single book that everybody wants to do, but that's amazing that you have that.

KP: It's incredible. Yeah. And it's- it takes a lot of time to redo this, but we have multiple levels, so it's not just one size fits all, so it's very customized to each individual veteran. And Dave is a really good example of starting at the bottom and the easiest summary and the easiest questions, and now Dave doesn't even need the summary and Dave can write up to three sentences to answer each of the questions. He can answer the discussion questions. Its- the materials really range and are able to suit the veterans based on, their current ability levels. So we modify it and it gives them an opportunity to come to group, and they can practice their talking, and their conversation skills, and they have conversations with each other, gives us all a shared topic to discuss, so again, aphasia affects understanding what you read, what you hear, you're talking, and of course you're writing. And so, book club gives you a comprehensive way to do all of those things in a normal person activity. So, there's nothing better out there than doing something like that.

TI: Outstanding. Karen, what am I missing in pathology or how your program provides service to veterans? Am I missing... anything?

DH: Don't give up. An idea is... don't give an idea about getting the... never mind.

KP: No, no, no, Dave, go ahead! Say what you're going to say.

DH: I, I want you to be a teacher. I don't want you to go to the military.

KP: I understand what you mean.

DH: I mean, I want to be a teacher. I mean, I want to be a teacher and not just a complete, boss.

KP: So, did you get that? Dave is, worried. So, especially when I told, you know, some of my prize students that I was taking this promotion, the looks on their face... was, they were quite fearful. They did not, they did not want to lose me. I assured them that I wasn't going anywhere that I would still be here for them as long as they needed me. That that was very important to me. So, he's worried because you said with my experience, I could go wherever.

- TI:** I can tell you, Dave, she's not going to leave, buddy.
- KP:** No... I'm very dedicated. My boss used to laugh and she- because I'm so enthusiastic, I love work- every day I go to work and I'm happy. Although, now I work from home it's and see all the patients virtually, but, you know, it's, it's one of those-
- TI:** Well, hopefully that won't be, hopefully that won't be forever. Hopefully that won't...
- KP:** It won't be, it won't be, but I'm, I wake up and I love my job. I love working with all of the speech pathologists, all of the staff at the hospital, and of course, all of our very special patients. I love it. I'm truly... happy to be there every day. And my boss used to say, 'well, wait until you've been here five years.' and I would go, 'it's been five years!' And then she'd say, 'okay, wait, 10 years.' I'm like, 'it's been 10 years.' And she's like, 'how about 15?' I'm like, 'I am still so happy.' She's like, 'okay, never mind.' So 20 years I'm still so happy. It's it is amazing. It's amazing to be able to love what you do... love where you do it and love who you work with. There's no greater gift.
- TI:** I can already tell you that the VA and people like Dave, we're very happy to have you on the team. So, Dave, I got one last question for you. Okay... Is there anything that I missed or have not asked that you'd like to share? Maybe something that you would like the audience to know?
- DH:** Well, I am so proud to be a veteran that... I am so happy that they have a function there, a facility like this. If I wasn't a veteran- I- my life would be completely different.

[01:07:44] Ad

- Narrator 1:** The VA does a very good job on the medical side- I don't know of anyone that has any complaints. My primary care doctor is probably the best doctor I've had in my life.

- Narrator 2: This is my friend, a good patient of mine, he only comes once a week, but I do enjoy it. I come early in the morning.
- Narrator 3: That is exactly why I choose VA.
- Narrator 4: Choose VA today. Visit VA.gov (link: www.va.gov).

[01:08:25] Outro, Music

TI: One of David's goals was to come on a podcast and tell his story, himself. And, I'm happy that Borne the Battle was able to oblige. Just an incredible story. I want to thank him and Karen for coming on and being a part of this episode. You can find more about VA Speech Pathology Programs at prosthetics.va.gov/slp. Our Borne. the Battle veteran of the week is Air Force Veteran, Brigadier General, Chuck Yeager, who recently passed away on December 7th of this year at the age of 97. I would say that this comes by the way of, et cetera, but it was widely reported as Chuck was a part of Americana. Test pilot, World War II ace, and the first person to fly past the sound barrier. Known as America's greatest pilot, Chuck Yeager flew for more than 60 years, including taking an F-15 to nearly 1000 miles per hour in 2002 at the age of 79.

Everyone knows the name, Chuck Yeager, because of the sound barrier, and him being the first one to break it. However, that may not even be his greatest exploit. During World War II, when his P-51 was shot down behind enemy lines, he linked up with the French Resistance and taught them bomb-making skills.

He also saved the life of another pilot, by amputating the man's leg with a pen knife and carrying him over the mountains into Spain, which was a neutral country during World War II. After making it back to friendly lines, he was approved to go back to war and shot down five enemy planes in a single day, earning the rare ace-in-a-day status. After breaking all the airspeed records, Chuck would go on and log 127 combat missions in Vietnam as a bomber pilot and retired as a Brigadier general in 1975. In 1983, a film was made about him, starring Sam Shepherd, called The Right Stuff, where he even made a cameo. Hailing from a

small town in West Virginia Yaeger had many sayings and was even described by some news, military beat reporters, as a Savage on Twitter, seriously, even well into his nineties. Some of his sayings included, "The first time I ever saw a jet, I shot it down," and "living to a ripe old age is not an end in itself. The trick is to enjoy the years remaining" to which he certainly did.

Air Force Veteran, Chuck Yeager. We honor his service. That's it for this week's episode, if you yourself would like to nominate a Borne the Battle Veteran of the Week, you can. Just send an email to podcast@VA.gov, include a short writeup, and let us know why you'd like to see him or her as the Borne the Battle Veteran of the Week. For more stories on veterans and veteran benefits, check out our website, [blogs.va.gov](https://www.blogs.va.gov) [Link: <https://www.blogs.va.gov/>] and follow the VA on social media. Twitter [Link to VA's twitter page: https://twitter.com/DeptVetAffairs?ref_src=twsrc%5Egoogle%7Ctwca], Instagram [Link to VA's Instagram page: <https://www.instagram.com/deptvetaffairs/?hl=en>], Facebook [Link to VA's Facebook page: <https://www.facebook.com/VeteransAffairs>], YouTube [Link to VA's YouTube page: <https://www.youtube.com/channel/UCBvOzPLmbzjtpX-Htstp2vw>], RallyPoint [Link: <https://www.blogs.va.gov/VAntage/56052/questionrallypoint-greatplace-start/>]. Deptvetaffairs, US Department of Veterans Affairs, no matter the social media, you can always find us, with that blue check mark. And as always, I'm reminded by people smarter than me to remind you that the Department of Veterans Affairs does not endorse or officially sanction any entities that may be discussed in this podcast, nor any media products or services they may provide. Thank you again for listening, have a happy and safe holiday season and we will do some end of the year stuff, but we'll see you right here for a new episode of Borne the Battle on January 11th. Take care.

[1:13:16] Outro music