TIP OF THE SPEAR: The Next Generation of Brain Health Baselining

TAL OPERATIONS COMPLETE

TOTAL

CORES

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PE

PROGRAM EVOLUTION

Warfighter Brain Health Initiative

Focus on traumatic brain injury treatment and prevention

Preservation of the Force and Family

Established fifth domain focusing on cognitive performance

SABRES

More robust brain health and performance battery than any other program in Department of Defense Special Operations Assessment Baselining Readiness

valuation

System

LEVELS OF EVALUATION PURPOSE

- Holistic Survey
- CNS Vital Signs
- Quantitative
 Electroencephalogram (qEEG)
- Review & Intervention

- General Well-Being
- Objective Performance
- Objective Brain Physiology
- Actionable, Personalized

Feedback

Input-Output

understanding triangulation reaction unique Sleep electroencephalogram QEEG function fundamental mapping scales overlap Evoke testfocus behavioral patterns testfocus behavioral spiritual fitness well focus test sustained physical FIZ fitness executive fiexibility Insomnia spiritual Scale Severity attention Index domains working CNSUS social life cognitive health subscales readiness outputs Analyses Vital reduced eVox time holistic Event financial processes processing Related-Potentials individual assessm Epworth CNS support family electrico Identification neurocognitive Morningness-Eveningness

Leveraging Advances in Neurocognitive Science

Two Lines of Effort

- Assessment
- Performance Enhancement

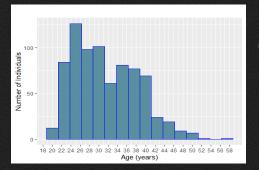
Interpretation

- Detailed Outcome analyses
- Cognitive Performance Training Plans
- POTFF Referrals



Population Demographics

Total of 794 SABRES Assessments*



- <u>Age</u> 20-58, median 30
- <u>MOS Category</u> CSO/SOO (390), Support (362)
- <u>Rank</u> NCOs E4-E5 (277), Staff NCOs E6+ (329)
- Gender 764 Male, 30 Female
- <u>Years of Service</u> 32% 5-8, 17% 9-12, 13% 13-16, 18% 17-20

*Demographic information is not available for all 794 assessments

Reason for Assessment:

- 70% Baseline
- 30% Provider Indicated

Top Concerns/Areas for Improvement (non-exclusive):

- *Sleep* 55%
- Stress 47%
- Auditory Processing/Memory 32%
- Attention 30%
- Residual Concussive Effect 21%
- Overactive Brain 18%

Cognitive Phenotype of SOF Population

- Impact of Chronic Fatigue/Sleep Impairment slow Reaction time and Executive Function/Cognitive Flexibility percentiles (28th, 42nd, 45th percentiles, respectively)
- Sacrifice speed for high accuracy Reaction time and High Variability data
- **Broad Situational awareness** Theta/beta brainwave ratios (2.2 ± .53)
- Potential indicators of TBI/Concussion ERP300b latency (517.5 ± 65.4 ms)
- <u>Slight sympathetic and parasympathetic predominance</u> of autonomic nervous system regulation— *Bimodal HRV frequency spectrums*
- **Brain Function Index within range** *Mean peak alpha frequency (10.0 ± 0.67Hz)*

Performance Enhancement Interventions

- <u>Neurofeedback</u>— Identify brainwave activity outside of normative range and use operant conditioning with auditory/visual reinforcer
- **<u>Biofeedback</u>** HRV Training to optimize mind-body connection
- <u>Cognitive Training Plans</u> Learn skill, develop/test skill under stress, implement skill in job related tasks
- Sleep hygiene and Fatigue management Education, resources, tracking/referrals
- <u>Performance coaching</u> Observation and training support by embedded Cognitive Performance Specialists



Operational Effectiveness of SOF Personnel

The first SOF truth is "humans are more important than hardware." Comprehensive, actionable data on brain function and performance

*Take action to address negative findings or deficits *Optimize desired capabilities

Low Performers are identified before more serious impairments or impact to mission readiness

SABRES emphasis on well-being and performance is changing culture to seek care sooner