



## Discharges for adjustment disorder soar

By Kelly Kennedy - Staff writer

Posted : Saturday Aug 14, 2010 12:34:17 EDT

Two years ago, under congressional pressure, the military changed its policy on separating troops dealing with combat stress for pre-existing personality disorders — an administrative discharge that left those veterans without medical care or other benefits.

Now, veterans advocates say, the personality-disorder discharges have been replaced with similar discharges for “adjustment disorder.” And once again, Congress seems poised to jump in.

Sen. Christopher “Kit” Bond, R-Mo., plans to send a letter to President Obama asking that the military provide detailed data showing how many people have been discharged for adjustment disorders. In the meantime, Bond’s staff has been gathering more general data that shows discharges for “other designated physical or mental conditions not amounting to disability” — a broad category that includes adjustment disorder — have increased from 1,453 in 2006 to 3,844 last year, an increase of 165 percent.

Over the same time, discharges for personality disorder dropped from 1,072 in 2006 to 260 last year.

“We request your assistance to ensure that a new loophole has not been created that abuses the administrative discharge system by erroneously discharging members of the armed forces who are experiencing symptoms of PTSD and/or TBI, rather than providing them with compassionate medical care worthy of their service and sacrifice,” states a draft copy of Bond’s letter.

The letter asks that the military provide the number of adjustment disorder discharges, by rank, with deployment information.

Shana Marchio, Bond’s spokesperson, said the issue initially was brought to the senator’s attention by Steve Robinson, a former Army ranger who has been active in veterans issues and now works as a veterans advocate.

“We’re hoping to create another good, bipartisan coalition to address this issue,” Marchio said. “The good news is that the Pentagon has moved away from personality disorders, but we feel this could be another piece of the same problem.”

Marchio expects the letter to go out after Labor Day.

She said the biggest issue is that these troops don’t get the treatment they need for post-traumatic stress disorder or traumatic brain injury.

According to the psychiatric manual used to diagnose mental health issues, the DSM-IV, adjustment disorder occurs when someone has difficulty dealing with a life event, such as a new job or a divorce, or after someone has been exposed to a traumatic event. The symptoms can be the same as for post-traumatic stress disorder: flashbacks, nightmares, sleeplessness, irritability, anger and avoidance.

According to military and Veterans Affairs Department policy, if those symptoms last longer than six months, the diagnosis should be changed to PTSD. With a PTSD diagnosis, a person may be medically retired with an honorable discharge, a disability rating of at least 50 percent, and medical care.

“This is a case of inappropriate discharges,” Robinson said. “There are no medical benefits for these guys, and there are hundreds of cases.”

Pentagon officials did not respond to requests for comment for this story, but Marchio said Army representatives talked to congressional staff members about the issue last week.

“While this was a positive step, our office didn’t hear the answers we needed to hear about the rise of the discharges and has asked for additional information,” she said. “The Army has since assured Senator Bond’s office that they will provide, no later than the day after Labor Day, our office the data needed to evaluate the rapid rise in the use of these discharges.”

### ‘TOOLS TO SELF-DESTRUCT’

During his 2008 deployment to Iraq, Army Pfc. Michael Nahas, 22, said he lived through two roadside bomb explosions and one rocket-propelled grenade attack, and watched people die in another explosion in Mosul, where he served with the 4th Infantry Division.

Two months after he returned home to Fort Carson, Colo., he said he began feeling anxious and guilty about people who he believed had died needlessly.

He went to the post mental health clinic for help. Over the course of three weeks, he had three appointments — and a lot of medication, including 14 milligrams of

