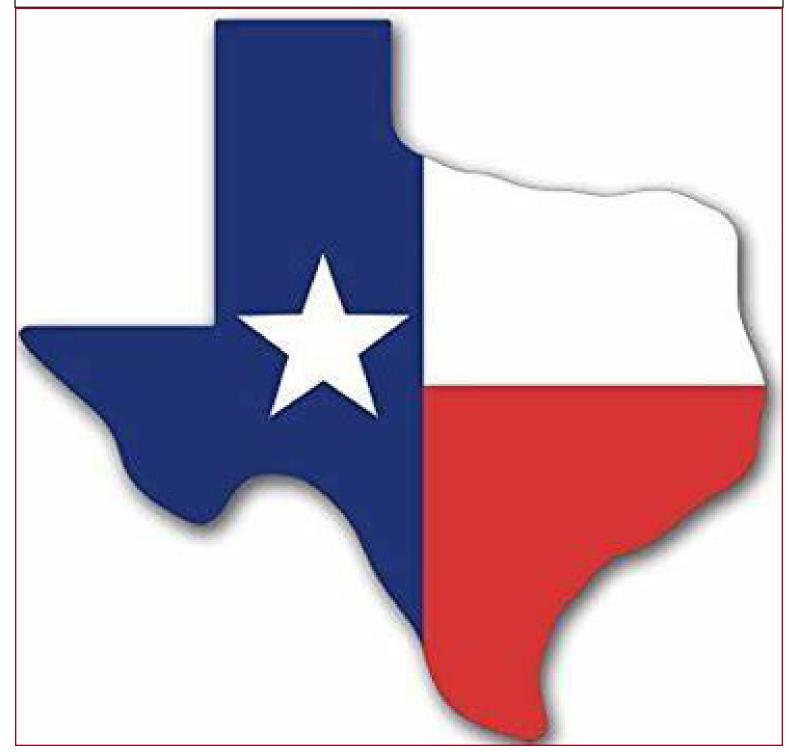


May 2023





Texas Chapter

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A Message from our President





Texas Chapter

Hello to all my PVA brothers and sisters,

Now that hopefully our weather is trying to stabilize, we can get out and have some fun. I just ask that you be safe in all that you do this summer, but the best part is having fun. For upcoming events we have the national veteran wheelchair games with a team of eight plus a coach departing on 3 July, wishing them the best of luck coming home with lots of stories and pictures. The other thing I want to put on your calendar is the Jack Sanders banquet which is set for Saturday October 7th, 2023. please RSVP with the office, it will give us a place to start for a head count the Jack Sanders banquet will be at Moody gardens on Saturday October 7th more details to follow in the to follow months, we have national sporting clays in San Antonio that will be October 21st through the 29th, Thank you Bruce for managing the team. The first week in September brings us to Dove season. The 10th anniversary of the Pat Poole Memorial Dove hunt which was started by one of our members Frank Ellis. This event has brought a lot of veterans together for the camaraderie that we all miss from when we were in service. With a heartfelt thank you to Mr. Jimmy Poole (Dad) and all the help and helpers that have come together every year for the past 10 years to make this event happen I just can't say it enough thank you. The following weekend which is the second weekend of September is the Mason dove hunt in Mason TX if you are interested in either of these events, please contact the office and leave a message or by e-mail or by fax just whatever way you can get hold of us please let us know that you'd like to go and you're looking for more details. The last event on my list that I want to share with you is November 17th and 18th are BBQ cook off. This year's event is going to be held in Waller TX at the Texas Thunder saloon. If you know any BBQ teams that would love to come join us for the cook off, please put them in touch with the chapter office. I pray that everyone has a safe and joyful summer. I hope to see lots of PVA faces in all the upcoming events.

Frank R Daebelliehn PVA /Texas Chapter President



U.S. Department of Veterans Affairs

Veterans Health Administration South Texas Veterans Health Care System

SENT ON BEHALF OF SOUTH TEXAS VETERANS HEALTH CARE SYSTEM

As you know, the PACT Act is the largest expansion of Veteran health care and benefits in decades. Millions of Veterans, their families, and their survivors could be positively impacted by this landmark legislation, and we at VA want to make sure that every one of them gets the benefits and health care they deserve.

To that end, South Texas Veterans Health Care System is hosting a PACT Act Week of Action event to inform Veterans, their families, caregivers, and survivors about the PACT Act and encourage them to apply for the toxic exposure-related health care and benefits they have earned. This is one of 80+ Week of Action events at VA facilities nationwide between December 10th and 17th. Our event will feature a 30-minute speaking program and overview of PACT Act. VA staff will also be present to help Veterans to apply for benefits, complete toxic exposure screenings, and enroll in VA health care.

The PACT Act event for the San Antonio Northwest Health Care Center scheduled for Monday, December 12 is cancelled. The Audie L. Murphy Memorial Veterans Hospital scheduled for December 14 remains. There is a time change on the event, which is 2-6 p.m.

You are a tireless advocate for Veterans, and we at VA so appreciate your partnership in serving Veterans, their families, caregivers, and survivors as well as they have served our country.

Thank you for all you do. I hope you can join us to spread the word about this historic expansion of Veteran benefits and care. For additional information, please contact the Office of Public Affairs at (210) 617-5274.

ALS Medical Research Article:

Recently the FDA approved a small molecule drug for ALS. The drug slowed functional decline by 2 pts in 6 months. On the 48-point functional scale, two points is the difference between being able to walk vs using a wheelchair, feeding or bathing yourself, or breathing without a bipap. Furthermore, when analyzing the OLE data, it improved ALS survival by an average of 10 months in comparison with placebo & natural history. In approving this new drug with just one Phase II trial, the #FDA acknowledged it would exercise the "broadest of regulatory flexibility" for the "urgent unmet need" in #ALS.

QuickSubmit

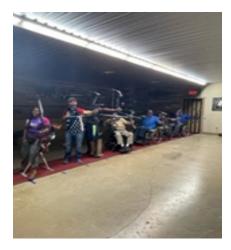
By Deontre Williams NSO

Effective June 2023, VBA has made a complete transition from the use of Direct Upload to QuickSubmit system. QuickSubmit is now the accepted way to uploaded correspondence directly from Veterans, claimants, and representatives, including external Veterans Service Organizations (VSO). The documents are converted and routed to the VA's Digital Mail Handling system (DMHS) work queues. The QuickSubmit application replaces Direct Upload to provide Veteran Business Partners, Veterans, Veteran Family Members, and VA Employee/Contractors, with the ability to upload Veteran evidence electronically, making it the fastest and most proficient way to submit Veteran evidence to the VBA Claims Intake Center.

QuickSubmit provides an efficient alternative to faxing or mailing documents to the Claims Intake Center. QuickSubmit also provides an audit history of all material uploaded to Digitized Mail Handling Service (DMHS) improving both Veteran and employee experiences by enabling claim evidence materials to be electronically accessible for immediate processing. The QuickSubmit application is a modernized, flexible platform. It uses the latest technologies and human centered design to improve the user experience, facilitate the submission of Veteran evidence, reduce upload errors, and improve processing time. To access QuickSubmit go to: https://eauth.va.gov/accessva/?cspSelectFor=quicksubmit

NOTE: To login with external authentication, select the type of authentication applicable and follow the instructions. If you select "Sign in with ID.me" and do not have an ID.me account, the system will guide you through the process to create one. After the authentication process is complete, if you have an active QuickSubmit account, you are directed to the QuickSubmit landing page. Otherwise, you are directed to the User Registration page to select your user type and enter your registration information. As a new user, you are required to register during your first sign-on attempt. Registration is a one-time event and future logins will automatically take you to the QuickSubmit landing page. To register, select the appropriate User Type on the User Identification screen: Veteran, Veteran Family Member, VA Business Partner (e.g., officer, private attorney, or agent), or VA Employee/Contractor. The VA Employee/Contractor option is only available for a VA PIV sign in. Once you complete this step, you will have access to upload documents; also ensure that the populated information reflects your personal information. One exciting thing regarding QuickSubmit, is that your documents are uploaded immediately for processing!

Archery Day







Volunteers helping mail out ballots.







Daniel Castillo won the Blue Valley Mid West Regional Boccia Tournament!













VA WHOLE HEALTH

Reiki

At the VA, Reiki is recognized as a complementary integrative health modality. It is not intended as treatment for any specific diagnosis or condition. Rather, it can be paired with conventional forms of treatment to improve health outcomes. Reiki can also be provided to people looking to enhance their overall wellbeing.

Reiki is offered in a variety of healthcare settings including hospitals and medical clinics. Reiki ("Rei"- universal and "ki"- life energy) is a biofield energy modality in which the practitioner accesses healing energy from the universe and transfers this energy to the individual receiving Reiki. This facilitates activation of the person's own healing response. This can be attributed to achieving a state of full relaxation. Reiki is also used to promote balancing of a person's energy.

Evidence supports Reiki's use in reducing pain, stress, and fatigue and can be helpful to improve treatments for people with cancer, arthritis, musculoskeletal injuries, migraines/headaches, stroke, Alzheimer's, and depression/anxiety. Reiki is safe and no serious side effects have been reported.

What to expect during a Reiki session

Reiki is a gentle healing practice that is used for stress reduction and relaxation. The practitioner will place their hands lightly on or above the person's body to evoke a healing response. Clients may experience a deep state of relaxation during a Reiki session. They might also feel warm, tingly, sleepy, or refreshed.

A Reiki session can last 30–60 minutes and is tailored to each person's needs and preferences. Depending on the underlying reason a person is seeking Reiki care, multiple sessions may be recommended.



You are your greatest healer





WELCOME NEW MEMBERS

Gilberto Quinones William Latham Jr. Fred King Jason Gutshall Justin Simon David Dillon Danny Vichensont John Crawford Clayborne Harris Kevin Wagner



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Olen Taylor Daniel Ross



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Paralyzed Veterans of America

Michael E. DeBakey Launches Inaugural ALS Clinic By: Greg Treacy, SNSO

It is my pleasure to report that the Houston Michael E. DeBakey VA Medical Center conducted its inaugural ALS Clinic this past Monday.

Pitchaiah Mandava M.D. is the Director of Clinic, with James Orengo M.D. the ALS Physician/Neurologist, and NP Richel Aliboso as the ALS Clinic Coordinator. The other disciplines included in the ALS Clinic are Social Worker, Respiratory Therapy, OT/PT, Dietician, Mental Health, Prosthetics, ALSA, and yours truly from PVA.

With the help of the PVA, the multi-disciplinary ALS Clinic's "Soft Open" on 12 September was a success. Dr. Mandava requested that only 3 Veterans be invited. Only 2 were able to make it, but the Team made it well worth their visit.

A Ribbon-Cutting Ceremony was conducted with the VAMC Chief of Staff Mark Kobelja, MD, Chief of Neurology, SCI Chief Sally Holmes, and ALS Veteran Ernest Henderson and his spouse Susan. Once I get the pictures from Public Relations, I'll forward them to you. It should make VA Headlines as well. One would think so.

They will begin seeing 3-4 Veterans every week on Mondays from 1:00-4:00 pm in the SCI Outpatient Clinic. For Veterans in the Houston VAMC catchment area interested in being scheduled for the clinic, contact me.

This is the reality of a plan that has been coming together for 8 years for me, and 2 years for Dr. Mandava at the VA since his appointment as the Director of the Clinic.

The Clinic Staff and I are confident the ALS Veterans in our area will find the Clinic as not only a medical resource, but a support resource as well.

Veterans when you sign up the tickets that you request will be at will call the day of event. This is all over the country and they have events like Disney on ice, monster trucks, nba, nfl, mlb, college sports, comedy shows, you name it.

Website: https://www.vettix.org/tixer/my-account/login

VA LIFE (Veterans Affairs Life Insurance)

By Deontre Williams, NSO II, Houston VARO

VA LIFE is the new VA Life Insurance Program, replacing the former Service Disabled Veteran Insurance (SDVI). The new insurance program will take effect on January 2023, and is applicable for all Veterans with service connected disabilities at ages 80 and below. Some Veterans over 81 could possibly be eligible as well, as long as they applied for disability compensation before age 81, and they received a new service connected disability after 81. The key feature of the new program is that a Veteran can be service connected from anywhere between 0% and 100% disabled with no time limit to apply. This would be beneficial for Veterans who have not been able to receive a rating above 0 percent service connection. No other insurance policy in the world is giving Veterans additional insurance coverage based on the fact that they have a service connected disability.

This program, created by Public Law 116-315, will have guaranteed acceptance, and will offer whole life policies that will not require medical exams or any kind of health care questionnaires. As long as premiums are paid, one could have insurance coverage for their entire life. And, fortunately, DOES NOT have a two-year window in which a Veteran can apply. Veterans would be able to sign up at any time for VA LIFE and would never have to worry about increases in premiums as the policy holder ages. Approvals would be instant with VA LIFE and coverages come in increments of \$10,000 up to a maximum of \$40,000. Similar to what SDVI offered, but the supplemental life insurance coverage would take longer to be approved. Premiums are also expected to beat policies from private sector insurance plans which gives VA LIFE a great advantage to flourish. Rates will be better the earlier a Veteran applies and the policy would produce cash value that builds over the life of the policy after the first two years of enrollment. And again, premiums would never increase! Life Insurance is foundational in family financial planning, as 63% of adults have coverage to protect their spouse, children, or other beneficiaries.

Veterans currently possessing S-DVI policies remain in force until the full coverage of VA LIFE begins, as long as a Veteran's application for VA LIFE is received between Jan 1, 2023 and Dec 31, 2025. Afterwards, SDVI will close to new enrollment. Therefore, interested Veterans should apply by this date. With this being said, the Veteran would still be able to have life insurance coverage while waiting on the VA LIFE policy to become available.

The premium for VALIFE are fixed and based on your age and when you enroll. Monthly rates can be located at the table located at https://www.benefits.va.gov/insurance/valife.asp. The rates are proposed based on current estimates and may change prior to implementation of VA Life on January 1, 2023. Under the new program there are no premium waivers.

VA Insurance services is making the application process easier for Veterans by improving their automation system for the "ultimate customer experience" through DocuSign. DocuSign was made available on the VA's Life Insurance website. DocuSign is a cloud-based software solution for sending and signing digital documents. This allows beneficiaries to have the option to electronically sign and submit forms to claim the proceeds of VA-issued life insurance policies.

If you are interested in applying for or learning more about VA Life (Veterans Affairs Life Insurance), you may visits https://www.benefits.va.gov/insurance/valife.asp Once the program is open, the application will be available online at https://www.benefits.va.gov/insurance/VALife.asp. Additionally, Veterans can receive email updates about VA LIFE by registering here: https://public.govdelivery.com/accounts/USVAVALI/subscriber/new. VA Life Insurance Call Center: 800-669-8477 (Monday-Friday 8:30 a.m. to 6 p.m. EST). Also, you may contact your National Service Officer (NSO) if there are additional questions.

Donate your gently used clothing and household items to help support our chapter. Please be sure to mention you'd like your donation to benefit the TEXAS PARALYZED VETERANS. All donations are tax deductible. To schedule a pickup please call:

346-319-2222



Remove hangers, check the pockets and wash if possible. Don't forget we need shoes, purses, and accessories.

Even towels and bedding that are threadbare can have a second life as they are used for cleaning up, and recycling.

Indego[®] Gets Paralyzed Veterans Walking Again



NEW VA Program offers eligible veterans an Indego[®] exoskeleton at NO COST!

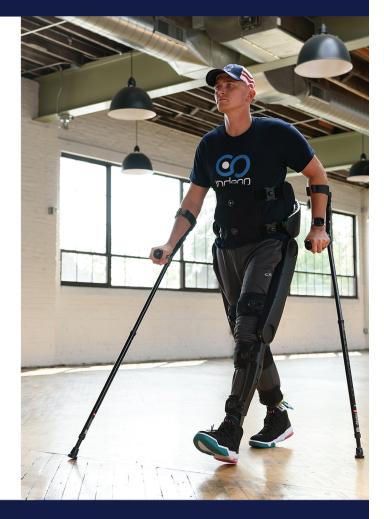
What's the Indego exoskeleton?

It's an FDA-approved robotic device that enables spinal cord injury patients (level T3-L5) to walk again.

- ✓ Regain your independence
- ✓ Improve your cardio & bone density
- \checkmark Enjoy eye-level conversations again



Scan with your mobile phone to receive more information or schedule a demonstration.



Contact us today to find out if you are eligible to receive an Indego exoskeleton at no cost.

Phone: 844-846-3346 Email: support.indego@parker.com



We continue to offer free, In Person, mental health counseling for military veterans and their families. We practice social distancing guidelines and have hand sanitizer available. We can also help with transportation needs with weekly bus passes.

Charles Jackson MA LPC Licensed Professional Counselor Healthy Minds, Healthy Heroes

American GI Forum – National Veterans Outreach Program 210-248-9933 Phone cjackson@nvop-sa.org 206 San Pedro, Suite 201, San Antonio, TX 78205

San Antonio membership forums will take place on the 1st Thursday of each month at 2 pm

April & May Birthdays

Seth McGraw Vincente Turrubiates **Jason** Gutshall Robert Trevino Thomas Sagpao Ryan Cano Jose Zelaya Kristen Reyna Hashinto Takeshi **Jennifer Sexton** Scott Graham Zachary Jones Wesley Howard Edgar Machado Peter Shaver Alicia Santiago Christopher Sullivan Clayton Monroe Daniel Ross Mario Rodriguez Scott McDonald Daniel Thornhill Chad Stuart David Pruitt Alex Benoit <u>Kiera Chapai</u> Eric Cameron **Robert Lefeve** Svend Svendsen Terrence Young Maurice Bullard Troy Tallent

Toai Nolan Calvin Greene Ierome Iones Juan Reves Gerald Gates William Neuls Richard Uzzel Edward Sterner Iuan Banda Lloyd Ford Bruce Rodgers William Sutherland David Bradshaw <u>Daniel Burney</u> Jesse Vasquez, Jr. James Burkes Anne Collins Peter Garner Ja<u>y Travis</u> Mary Beard Robin Willis Marcus Montieth Thomas Powell Frank Daebelliehn Johnny Beamon Philip Stewart Carl Butler John Collins Iames Ward David Haslock Debbie Williams Daniel Barton Rebecca Johnson

Herman Norton Willie Gadison Linda Neiberger Norman Benson Everett Voortman Dorothy McGary Peter Simmons Iohnie Stewart Larry Cherry Jonathon Smith Charles Jones Cruz Rivas Joe Cruz George Williams Leroy Johnson John Shores Paul Colver Charles Garcia David McCreery Claudie White John Murray Paul Smith Roger McDowell William Spivey Steven Webster Robert Beenev Clarence Green Frederick Garraway <u>George Kawanami</u>



Houston parks and recreation-adaptive division scheduled events West Gray weekly schedule

Monday 1pm 2pm Boccia 5pm-7pm developmental wheelchair rugby 7pm-9pm wheelchair basketball

Tuesday 1pm-2pm tabata Tuesday (adaptive fitness) 5pm-6pm beep baseball team fitness 6pm-8pm beep baseball practice 6pm-7pm prep wheelchair basketball skills and drills 7pm-9pm juniors wheelchair basketball

Wednesday 6pm-9pm wheelchair basketball

Thursday 10am-12pm cycling 1pm-2pm dance fitness 5pm-7pm VI fit 7pm-9pm wheelchair rugby

Friday 7pm-9pm wheelchair tennis 6pm-8pm wheelchair lacrosse

Saturday 9am-11am wheelchair rugby 11am-2pm power chair soccer 2pm-4pm deaf basketball You can sign-up to get future emails about events at: Veterans Health Administration (govdelivery.com)

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2023 Community Mental Health & Wellness Summit



PPROVED

BLIC AFFAIR

About This Summit

Join us to learn how the creative arts can be used to help Veterans improve their mental health, connect with their community, and thrive in their recovery. Hear how Veterans have used creative arts for their own healing. Get the latest updates on VA mental health services. Plus music, poetry, and a guided arts activity!

For more info: **Dr. Betsy Davis, 210-740-8149**



U.S. Department of Veterans Affairs Veterans Health Administration South Texas Veterans Health Care System

Partnered with:







Event Details:

Where: Virtual Event on WebEx

Audience: Veterans and family members,

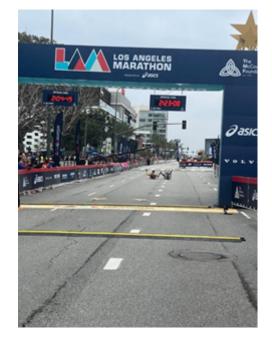
Register at: <u>qrco.de/2023STXMHSummit</u>

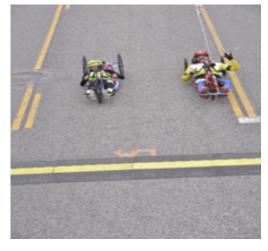
mental health providers, and other

I was racing with my marathon team the Achilles Freedom Team in the handcycle division. I had 2 mechanical issues then decided to just tour and take pictures. Had a slower veteran catch up with me so we stayed together and took pictures and crossed the finish line together. All thar said I still came in 16th with a time of 2 hours 29 minutes. In 3 weeks I'll be in Boston to race the Boston Marathon. Jim Madison

















Sports & Recreation

2023 CALENDAR OF EVENTS



- Florida Gulf Coast Bass Tournament, March 24-26, 2023 | Kissimmee, FL
- Kentucky-Indiana Bass Tournament, April 21-23, 2023 | Kuttawa, KY
- Bayou Brawl Bass Tournament, April 28-30, 2023 | Doyline, LA
- Southeastern Challenge, June 2-4, 2023 | Evans, GA
- Capital Clash, June 9-11, 2023 | Waldorf, MD

PVA Billiards Tournament Series

- Mid-Atlantic Billiards Tournament, March 17-19, 2023 | Richmond, VA
- **Mid-America Billiards Tournament,** May 5-6, 2023 | Oklahoma City, OK
- Buckeye Billiards Tournament, June 24-26, 2023 | Columbus, OH

Air Rifle and Pistol Program

• Wisconsin Air Gun Tournament, March 11-12, 2023 | Milwaukee, WI

PVA Bowling Tournament Series

- Mid-America Bowling Tournament, March 31- April 1, 2023 | Oklahoma City, OK
- Vaughan Bowling Tournament, May 5-6, 2023 | Romeoville, IL

PVA National Shooting Sports Circuit

- Nevada Trapshoot, March 31-April 2, 2023 | Las Vegas, Nevada
- Wisconsin Trapshoot, May 19-21, 2023 | Green Bay, WI
- Vaughan Trapshoot, May 26-28, 2023 | Elburn, IL
- Iowa Trapshoot (Year-End Tournament), June 16-18, 2023 | Cedar Rapids, IA

Boccia

• Gateway Boccia Tournament, March 17-19, 2023 | St. Louis, MO

Handcycling

- Pocahontas Off-Road Spring Camp, April 12-17, 2023 | Chesterfield, VA
- PVA High Performance Off-Road Camp, August 12-21, 2023 | Crested Butte, CO
- Off-Road Handcycling Championship, August 18-20, 2023 | Crested Butte, CO
- Pocahontas Off-Road Fall Camp, September 13-18, 2023 | Chesterfield, VA

Additional Programs

- Wisconsin Pickleball Camp, April 29-30, 2023 | Milwaukee, WI
- Southeastern Pickleball Camp, May 11-12, 2023 | TBD
- Mountain States Disc Golf Camp, June 3-4, 2023 | TBD
- Mountain States Pickleball Camp, August 2023 | TBD
- Lakeshore Basketball Camp, August 28-30, 2023 | Alabama
- Gateway Disc Golf Camp,
 September 15-16, 2023 | Potosi, MO
- Rugby Camp, September 29-30, 2023 | Phoenix, AZ
- Great Plains Disc Golf Camp, September 23, 2023 | TBD

National Veterans Wheelchair Games

July 4-9, 2023
 Portland, Oregon





The PACT Act Fact Sheet

To ensure Veterans can receive high-quality health care screenings and services related to potential toxic exposures, the PACT Act expands access to VA health care services for Veterans exposed during their military service. For post-9/11 combat Veterans, the bill extends the period of time they have to enroll in VA health care from five to ten years post-discharge. For those combat Veterans who do not fall within that window, the bill also creates a one-year open enrollment period. These expansions mean that more Veterans can enroll in VA health care without having to demonstrate a service connected disability.

The PACT Act codifies VA's new process for evaluating and determining presumption of exposure and service connection for various chronic conditions when the evidence of a military environmental exposure and the associated health risks are strong in the aggregate but hard to prove on an individual basis. PACT requires VA to seek independent evaluation of this process as well as external input on the conditions it will review using this framework. The new process is evidence-based, transparent, and allows VA to make faster policy decisions on crucial exposure issues. This new process has already fundamentally changed how VA makes decisions on environmental exposures and ensures more Veterans have access to the care they need.

The legislation removes the need for certain Veterans and their survivors to prove service connection if they are diagnosed with one of 23 specific conditions. This greatly reduces the amount of paperwork and need for exams that Veterans diagnosed with one of these conditions must complete before being granted access to health care and disability compensation, thereby speeding up their receipt of the benefits they have earned. This list includes 11 respiratory related conditions, along with several forms of cancer, including reproductive cancers, melanoma, pancreatic cancer, kidney cancer, and brain cancers such as glioblastoma. Survivors of Veterans who died due to one of these conditions may now also be eligible for benefits.

To better understand the impact of toxic exposures, the PACT Act requires VA to conduct new studies of Veterans who served in Southwest Asia during the Gulf War and analyses of post-9/11 Veterans' health trends. The new law also directs the Secretary of Veterans Affairs to convene a new interagency working group to develop a five-year strategic plan on toxic exposure research.

Ensuring Veterans get the care they need includes ensuring that they are screened for toxic exposure and that VA personnel have the appropriate education and training. The PACT Act requires that Veterans enrolled in VA health care be screened regularly for toxic exposure related concerns. This new law also requires VA to establish an outreach program for Veterans regarding toxic exposure related benefits and supports, and to require additional toxic exposure related education and training for VA personnel.

This bill also delivers critical resources to VA to ensure it can deliver timely access to services and benefits for all Veterans eligible – including those already enrolled. The PACT Act provides VA with mechanisms to enhance claims processing and to increase the workforce. The bill also invests in VA health care facilities by authorizing 31 major medical health clinics and research facilities in 19 states.

Requiring Training for VA and Non-VA Providers: Health care providers and compensation and pension examiners sometimes do not have the training to understand or treat Veterans' exposure concerns. To address this challenge, VA directed compensation and pension providers and Veterans Health Administration clinicians to complete a training module on assessing deployment related to environmental exposures. VA is also encouraging all providers who care for Veterans outside of VA through the Community Care Network contract to complete training on the TRAIN Learning Network, VA's publicly available training site. Furthermore, VA employees and community care providers have been directed to utilize the Exposure Ed App to help providers provide information to Veterans on health effects associated with certain exposures during military service.

Implementing a Network of Specialized Providers and Call Center: Veterans with concerns about the health outcomes of military exposures experience inconsistent care to address these specific issues, especially outside of VA. Earlier this year, VA launched VET-HOME, The Veterans Exposure Team-Health Outcomes of Military Exposures. VA plans to hire health professionals, including physicians, nurse practitioners, and physician assistants who will specialize in conducting patient assessments regarding the health effects of military exposures. By January 2023, VA expects to have a fully operational call center and network of experts to help Veterans concerned about environmental exposure and provide consultative services to Veterans in primary care clinics.

The PACT Act Fact Sheet

What changes will the PACT Act bring?

While some ailments caused by toxic exposure can present quickly, other illnesses can take years to manifest. This left many Veterans outside their eligibility window to enroll in Department of Veterans Affairs (VA) health care and others struggling to prove a service connection because of the time that had lapsed. To address this, the PACT Act makes significant changes to the timeline Veterans have to enroll in VA health care. The PACT Act:

Increases the period of time Veterans have to enroll in VA health care from five to 10 years following discharge for post-9/11 combat Veterans.

Establishes a one-year open enrollment period.

Additionally, the legislation codifies VA's new process for evaluating and determining presumption of exposure and service connection — removing the burden of proof from the Veteran.

How do I know if I've been exposed to burn pits?

If you served in any of these locations and time periods, VA has determined you have a presumption of exposure to burn pits or other toxins.

On or after Sept. 11, 2001, in any of these locations:

Afghanistan, Djibouti, Egypt, Jordan, Lebanon, Syria, Uzbekistan, Yemen, and the airspace above any of these locations.

On or after Aug. 2, 1990, in any of these locations:

<mark>Bahrain, Iraq, Kuwait, Oman, Qatar, Saudi Arabia, Somalia, The United Arab Emirates, and t</mark>he airspace above any of these locations

What new presumptive conditions were added for burn pit exposure?

The PACT Act added more than 20 new condition, including a dozen cancers, which are now presumed to be caused by exposure to burn pits and other toxins. This change impacts Gulf War era and post-9/11 Veterans.

Brain cancer, Gastrointestinal cancer of any type, Glioblastoma, Head cancer of any type, Kidney cancer, Lymphatic cancer of any type, Lymphoma of any type, Melanoma, Neck cancer, Pancreatic cancer, Reproductive cancer of any type, Respiratory (breathing-related) cancer of any type,

Additionally, these illnesses are also now considered presumptive:

Asthma that was diagnosed after service, Chronic bronchitis, Chronic obstructive pulmonary disease, Chronic rhinitis, Chronic sinusitis, Constrictive bronchiolitis or obliterative bronchiolitis, Emphysema, Granulomatous disease, Interstitial lung disease, Pleuritis, Pulmonary fibrosis, Sarcoidosis

What changes were made for Vietnam-era Veterans?

The PACT Act added two additional Agent Orange presumptive conditions:

High blood pressure (hypertension) and Monoclonal gammopathy of undetermined significance (MGUS)

Additionally, **five new presumptive locations** were added for Vietnam-era Veterans:

Any U.S. or Royal Thai military base in Thailand from Jan. 9, 1962, through June 30, 1976

The PACT Act Fact Sheet

Laos from Dec. 1, 1965, through Sept. 30, 1969

Cambodia at Mimot or Krek, Kampong Cham Province from April 16, 1969, through April 30, 1969

Guam or American Samoa or in the territorial waters off of Guam or American Samoa from Jan. 9, 1962, through July 30, 1980

Johnston Atoll or on a ship that called at Johnston Atoll from Jan. 1, 1972, through Sept. 30, 1977

What new radiation presumptive locations were added?

VA added three new response efforts to the list of presumptive locations:

Cleanup of Enewetak Atoll, from Jan. 1, 1977, through Dec. 31, 1980

Cleanup of the **Air Force B-52** bomber carrying nuclear weapons off the coast of **Palomares, Spain**, from Jan. 17, 1966, through March 31, 1967

Response to the fire onboard an **Air Force B-52** bomber carrying nuclear weapons near **Thule Air Force Base** in Greenland from Jan. 21, 1968, to Sept. 25, 1968

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All submissions for the Classified Section of the SPEEDY GAZETTE must be submitted to the TPVA Office no later than the 1st of the month. The charge is \$15.00 for 15 words (each additional word is \$.25 cents). Payment must accompany the ad. If you are a member in good standing with TPVA, you may place a 15-word ad for FREE! An incentive of a 10% discount applies on ANNUAL commitments. Display Advertisements: to offset some of the cost of printing and mailing the SPEEDY GAZETTE, the following ad rates apply:

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Business Card	\$20.00	\$120.00 less 10% = \$108.00
1⁄4 Page	\$30.00	\$180.00 less 10% = \$162.00
½ Page	\$55.00	\$330.00 less 10% = \$297.00
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- UNINTERRUPTED SLEEP



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Annual contributions for 2022-2023 will be as follows:

 Platinum Donor
 \$1,000 or more

 Titanium Donor
 \$500 - \$999

 Gold Donor
 \$250 - \$499

 Silver Donor
 \$100 - \$249

 Bronze Donor
 \$5 - \$99



2022-2023 DONOR CLUB as of May 2023

Platinum:Martha Joan Russell Estate, Wayne & Joann Moore Charitable Foundation, Onion CreekAmerican Legion Post 326, Ken H Sharp, Mrs. M. L. (Laura) Berry, Kinghts of the Inferno, Sonora Bank,Anonymous Donors, Amazon Smiles, American Online Giving Foundation, John & Jill Lay, Alamo Safari Club,Paxton Arms LLC.

<u>Titanium</u>: Johnny Godwin, Dan McNeil, Debbie Smith, CFC TASC, Alvin Guerrero, Mr. & Mrs. Philip B Green, Robert Waite, Mobius Mobility LLC, Mark Vrataric, Richard Carson, Area Real Estate, LLC, Willard Allen, Image Craft, Joel Hoots, Jim Gieptner, Alamo Retriever Club, Thomas A West, United Access LLC, White Flyer, Karen C Jackson, John E Jones Jr., Syamal K Poddar.

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A family caregiver is a person who provides any type of physical and/or emotional care for an ill or disabled loved one at home. Loved ones in need of care include those suffering from a physical or mental illness, disability, or other condition. In most cases, the primary caregiver is a spouse, partner, parent or adult child. Caregivers often take on the responsibilities of the patient while still providing for themselves and other family members.

The **Program of Comprehensive Assistance for Family Caregivers**, allows Family Caregivers provide crucial support in caring for Veterans to enhance the health and well-being of veterans in a home environment.

To be eligible for the Program of Comprehensive Assistance for Family Caregivers, Veterans must first be enrolled for VA health services, if not enrolled previously. The veteran must need personal care services because of an inability to perform one or more activities of daily living and/or need supervision or protection based on symptoms or residuals of neurological impairment or injury, traumatic brain injury, psychological trauma or other mental disorder-incurred or aggravated in the line of duty. As of October 1, 2022, this program is now open to family caregivers of eligible Veterans of all eras. This includes eligible Veterans who served after May 7, 1975, and before September 11, 2001. So, Family caregivers of eligible Veterans of all eras can now apply.

The Veteran can appoint 1 Primary Family Caregiver (the main caregiver), and up to 2 Secondary Family Caregivers (people who serve as backup support to the primary caregiver when needed) Eligible Primary and Secondary Family Caregivers can receive Caregiver education and training, Mental health counseling, Travel, lodging, and financial assistance when traveling with the Veteran to receive care. Eligible Primary Family Caregivers may also receive a monthly stipend (payment), Access to health care benefits through the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA)—if you don't already qualify for care or services under another health care plan, and Respite Care (not less than 30 days per year).

Eligibility requirements for the family caregiver:

- You must be at least 18 years old. And at least one of these must be true for you:
- You're a spouse, son, daughter, parent, stepfamily member, or extended family member of the Veteran, or
- You live full time with the Veteran, or you're willing to live full time with the Veteran if we designate you as a family caregiver

Eligibility requirements for the Veteran All of these must be true for the Veteran you're caring for:

- The Veteran has a VA disability rating (individual or combined) of 70% or higher, and
- The Veteran was discharged from the U.S. military or has a date of medical discharge, and
- The Veteran needs at least 6 months of continuous, in-person personal care services

If you think you meet the requirements for this benefit. The veteran and caregiver will need to apply together and participate in an application process to determine the Veterans eligibility for the Program of Comprehensive Assistance for Family Caregivers. You'll both need to sign and date the application, and answer all questions for your role. Each time the Veteran wants to add a new family caregiver, the Veteran and the new caregiver will need to submit a new application. Remember, there can only be 1 Primary and up to 2 Secondary Family Caregivers designated at any one time. You may online or complete a VAF 10-10G and mail to Health Eligibility Center **or carry the completed form to your local** VA medical center's Caregiver Support Coordinator.

Additional application assistance can be found via phone at 1-877-222 VETS (8387).

FDA Approves First ALS Treatment Via Accelerated Approval ALS Association Funded Antisense Technology Behind Tofersen

Washington, D.C. (April 25. 2023) – The ALS Association commends the FDA for approving tofersen under the agency's accelerated approval pathway for the treatment of people living with ALS connected to mutations in the SOD1 gene. This marks the first time the FDA has approved a treatment for ALS under accelerated approval and serves as a promising endorsement of the antisense technology that underlies tofersen.

"Every opportunity to make a new treatment available that can stop or slow down this disease is a win for the whole community," said Larry Falivena, a member of The ALS Association's Board of Trustees who is living with SOD1-ALS and who has participated in the tofersen trials.

The FDA's Central and Peripheral Nervous System Drugs Advisory Committee voted unanimously in March to support accelerated approval of tofersen.

"The FDA's decision marks a significant step in our effort to make ALS livable for everyone, everywhere, until we can cure it," said Calaneet Balas, president and CEO of The ALS Association. "This is the second time in less than a year our community gets to celebrate the approval of a new drug to treat ALS and we have great hope for the future of antisense technology."

Tofersen is the third drug approved to treat ALS in the last six years. Balas added: "We thank the FDA and Biogen for working together to bring tofersen to people living with ALS as quickly as possible."

Tofersen is an antisense oligonucleotide therapy, a small string of DNA letters that are designed to bind to specific molecules of RNA and stop the production of toxic proteins. Tofersen was developed to specifically target the RNA produced from mutated a SOD1 gene to stop toxic SOD1 proteins from being made.

Mutations in the SOD1 gene are found in about 10-20 percent of cases of familial ALS, as well as 1-2 percent of sporadic ALS cases.

In approving the first antisense oligonucleotide for the treatment of ALS, the FDA also created hope for other antisense therapies currently in development to treat other forms of ALS. Antisense technology stems from very long investments made by The ALS Association, the NIH, and the companies IONIS and Biogen. Tofersen is a direct result of the donations from supporters of the ALS Association, the strong advocacy work of the ALS community, the scientists and clinicians carrying out this work, and most importantly, the many people living with ALS who volunteered to participate in this research.

Approval of tofersen also shows promise for the use of secondary, or surrogate endpoints to show effectiveness of a treatment for ALS. Tofersen effectively reduced the production of a chemical known as neurofilament light (NfL) in the blood and spinal fluid. High levels of NfL are indicators of damage to motor neurons.

The FDA's advisory committee found that the neurofilament light levels indicate a change in the course of disease for people receiving the treatment which translates into benefits such as longer life, increased muscle function and reduced disease progression -- some months after neurofilament levels go down. Tofersen is currently being tested in clinical trials to determine whether it can be effective in preventing the onset of ALS in people with SOD1 mutations.

"Tofersen could be the opportunity to break the cycle of genetic ALS for families who have been devastated by ALS for generations," Falivena said.

ABOUT ALS

Amyotrophic lateral sclerosis (ALS) is a progressive neurodegenerative disease that affects nerve cells in the brain and spinal cord. Over the course of the disease, people lose the ability to move, to speak, and eventually, to breathe. On average, it takes about a year before a final ALS diagnosis is made. The disease is always fatal, usually within five years of diagnosis. There is no cure.

ABOUT THE ALS ASSOCIATION

The ALS Association is the largest philanthropic funder of ALS research in the world. The Association funds global research collaborations, assists people with ALS and their families through its nationwide network of care and certified clinical care centers, and advocates for better public policies for people with ALS. The ALS Association is working to make ALS a livable disease while urgently searching for new treatments and a cure. For more information about The ALS Association, visit our website at www.als.org

FOR MORE INFORMATION, CONTACT: Brian Frederick The ALS Association Brian.Frederick@als.org (202) 464-8612 We are excited to announce that the Texas Chapter of Paralyzed Veterans of America is now featured on the new Roll Mobility app! Roll Mobility is a community-driven accessibility tool designed to make life easier for people with disabilities who use wheelchairs or have mobility issues. The app provides reliable information on the accessibility of restaurants, public spaces, businesses, trails, and parking spaces.

With Roll Mobility, you can easily find and share detailed information on features such as wheelchair ramps, elevators, and accessible restrooms.

If a business/location you've visited is not yet listed- just follow the simple questions and leave your first review!

<u>Download the app</u> now and start exploring the world around you with ease. Share Roll Mobility with a friend today!



Texas PVA San Antonio Members,

We've been having a delay with wheelchair evaluations here at the San Antonio VAMC. I've address this with the SCI Chief, and we've reached out the PM&R Wheelchair Clinic for assistance on the delay for evaluations. Currently, our veterans are being scheduled 3-4 months for an evaluation once their manual/ power chair has been condemned.

We were informed, the wheelchair clinic currently has one APT Therapist addressing all veterans' wheelchair consults, but to notify them if there are any veterans that have any delays.

If there are any delays with wheelchair evaluations, please send me an email and I can address with the SCI Chief and Chief of PM&R (Wheelchair Clinic).

Armando De La Rosa Central-Central Area Manager Sr. Benefits Advocate O: (210) 617-5275

Are you interested in helping those new to SCI/D adjust to their new reality?

We are looking to start a pilot peer mentoring program virtually to connect new SCI/D veterans with other veterans who have personal experience with SCI/D. With Covid restrictions, it's difficult for new patients to meet others who have faced similar circumstances. Communication would be via phone, text or zoom. If interested in helping others who are adjusting, please provide your SCI/D condition, sex, age or other demographics. Your information will only be given to veterans who wish to reach out regarding your experience with SCI/D and other questions pertaining to their condition.

ARE YOU A VETERAN WITH A DISABILITY? DO YOU NEED HOME REPAIRS OR



MODIFICATIONS?

SBP CAN HELP!



SBP is a disaster recovery organization that is looking for disabled veterans who need repairs or modifications to make their home more accessible.

To be eligible for our services you must meet the following requirements: I Have a DD214 or VA Card Income must be at or below 80% AMI Recipients must occupy the home as a primary residence Must not own multiple properties Be within service area Not located in a floodway or the 100 yr floodplain

Services provided:

Physical handicap accessibility
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 with veterans
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O,

I work for the Texas Health and Human Services Commission as the Director of Veterans Mental Health Services. I oversee a couple of mental health programs for active duty, veterans and their families. We can provide you contact information for these programs, which are statewide and free of charge. The programs are:

The Texas Veterans + Family Alliance (TV+FA) Grant Program

Program improves the quality of life of veterans and their families by expanding the availability of and access to, mental health treatment and services. Grant are awarded to community collaboratives to implement new or existing mental health services and provide linkage to support services that increase response to mental health treatment such as employment services. TV+FA grants support a range of clinical mental health and non-clinical supportive services for veterans and their families that include:

- Evidence-based therapies and treatment;
- Individual, group, and family peer support services;
- Individual and family counseling;
- Treatment of substance use disorders;
- Suicide prevention initiatives to help veterans and their families develop skills in recognizing, assisting, and referring to mental health services; and
- Case-management and referral services.

Mental Health Program for Veterans (MHPV)

Providers deliver peer counseling services to veterans and their immediate family members through contracts with local mental health authorities, and local behavioral health authorities. Individuals enrolled in the program receive peer services from trained and certified peer service coordinators (PSCs) and volunteer peers. Peer services are informal and include: one-on-one peer support, peer support groups, and referrals to health and community-based support organizations at no charge.

PSCs are also trained to identify and engage with veterans who are justice-involved at different entry points into the mental health and criminal justice systems. Additionally, there is also a veterans counselor project in which licensed mental health professionals are trained in military informed care and provide mental health services. This project is implemented at six areas that serve rural communities.

We co-administer the MHPV program with the Texas Veterans Commission (TVC). We can provide contact information for all of these mental health providers and other resources. I've included Dr. Blake Harris on this email, who runs the mental health department at TVC. Please let me know if we can provide this information.



George McEntyre Director, Veterans Mental Health Services Office of Mental Health Coordination 8317 Cross Park Dr, Ste 350, Mail Code-1155 Austin, TX 78754 (building # 1410) Office: (512) 380-4335 |Cell: (512)-660-3136 Email: george.mcentyre@hhs.texas.gov www.MentalHealthTX.org

Challenged Athletes Foundation Application Is Now Open





Southeastern Chapter

CAF ANNUAL GRANT PROGRAM

CAF's flagship grant program aims to remove the barriers that exist between adaptive athletes and their pursuit of sport and fitness.

ELIGIBILITY

Individuals worldwide with permanent physical disabilities are eligible to apply for the CAF grant. Teams, organizations, etc. are not eligible to apply. Hearing impairments, Intellectual and developmental disabilities do not qualify for support through CAF. Medical Verification of Disability is required.

GRANT REQUEST OPTIONS

Applicants may request one of the following grant types:

- Sports Expenses Grant
- Equipment Grant

APPLICATION WINDOW

The 2023 CAF Annual Grant application opens on September 1, 2022. If you are a 2022 CAF grant recipient, click here for information about grant receipts and FAQs.

2023 ANNUAL GRANT PERIOD TIMELINE

The 2023 CAF Grant Period runs from September 1, 2022 – January 31, 2022

Sept 1, 2022: 2023 Grant application opens

Nov 4, 2022: 2023 Grant Application closes

March 22-31, 2023: Grant Award notifications sent out

March 22, 2023 - May 31, 2023: Grant Award Acceptance & Distribution period

May 31, 2023: Deadline to accept the 2023 grant

January 31st, 2024: 2023 Grant Period closes. Monetary grants must be spent, and receipts uploaded

TPVA Athlete Takes Boccia Title

The Blue Valley Mid-West Regional Boccia Tournament was recently held 6-7 May in Overland Kansas. Boccia players from around the country competed in this tournament which was one of two USA Boccia Regionals held this year.

The San Antonio BC3 Ramp Team of Daniel Castillo and Operator Angie Randez were Gold Medalists. They are competing against fellow Boccia Elite BC3 Ramp players Kalvin Blauert and his Ramp Operator Tony Blauert were 3rd Bronze Medalist, and Austin Hanson and his Ramp Operator Connor Metzger were Silver Medalists and returning Sean Lewis and his Ramp Operator Kyle Miller placed 4th!

Daniel and Angie are both members of the 2023 National Boccia Developmental Team USA, it was a great achievement for the San Antonio duo to defeat 2 of the best BC3 Boccia Ramp Players in the USA.

Daniel, a TPVA/PVA Life Member began playing Boccia under the guidance of Coach Jose Laguna at Audie L. Murphy VAMC Recreation Room in 2012! Daniel did not play from 2016 and most of 2017 due to health issues and again from 2020-2021 due to Covid19.

A big "Thank You" to Boccia USA, USA Paralympic Boccia Team Coach Kathy Brinker, North Blue Valley High School volunteers, referees, line judges, score keepers, Coach Jose Laguna TPVA, Coach Brooke Matula STRAPS, supportive family members, caregivers, and friends!

Congratulations to all who participated and medaled, please encourage others to stay active in any activity!













Want To Improve Your Bowel Function?

Recently published research reveals between 50 and 80% of participants reported improvements in bowel function and/or management after walking in an exoskeleton*

Did you know Paralyzed US Veterans May be Eligible for a ReWalk Personal Exoskeleton? Contact ReWalk for more Information: rewalk.com/contact or 508.251.1154 option 2

O f Y

*Chun A, et al. Changes in bowel function following exoskeletal-assisted walking in persons with spinal cord injury: an observational pilot study. Spinal Cord. 2020;58(4):459-466.

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Membership Rewards Program

Hello Texas Paralyzed Veterans of America Members! Your BOD just implemented a new membership rewards program. It's a very simple program. **During your birth month**, just contact the Chapter Office or one of your Board of Directors and let them know you want to participate. At the end of each month a drawing will be held and five lucky members will each receive a gift card worth \$200 to spend however you wish.

As long as you're on the phone with us, let us know how you're doing. Get an update on the latest Chapter news and events. You can also make sure your phone number and address are up to date. Remember we're an organization made up of members trying to help other members. We need to know who you are, where you are and what kind of concerns or ideas you may have. Plus you may be able to volunteer some time with us.

Remember if it's your **Birthday Month**, all that it takes for a chance at a \$200 Birthday gift is just a phone call. If you don't call in, you won't be entered.

Catherine Webster 713-520-8782 admin@texas.pva.org Frank Daebelliehn 281-256-5652 frankd@texaspva.org Bruce Kuker 210-632-0495 bwkuker@gmail.com

We have venison available for members

We have venison available in San Antonio and the Houston area for members. Please call 713-520-8782 or email info@texaspva.org to coordinate a time to pickup. 2023 SPRING PVA OFF ROAD MTN Cycling Pocahontas State Park

This Years 2023 Spring PVA Off Road MTN Camp attracted PVA members from multiple Chapters/ States and throughout the local Adaptive Cycling Community.

Off Road Hand Cyclist, Recumbents and 2 Wheel Cyclist geared up and merged together in order to shred some gnarly trails. Organizers made good use of the 90 miles of trails at the Pocahontas State Park in Virginia. This Park prides itself on offering Hand Cyclist Accessibility Trails that can be used by all Skill Levels. Off Road Cycling requires preparation, sound equipment and a Battle Buddy.

Cyclists were treated to the addition of the 1st PVA Off Road Racing Classic at Pocahontas State Park. * Open to All Adaptive Cyclist.

Athletes mounted their Heavy-duty Trikes all w/ Power Access which made this Race one for the Record Books. Volunteer Trail Riders (SAG) and Race Directors soon learned that "we were there to tear it up". The trails were loaded with various switchbacks, drop ins, ruts, cross country routes and a downhill run. This Race definitely tested everyone's machines and their Off-Road skills.

*A Big Thanks to PVA Paracycling and all the Volunteers, Lashers Venders & Mechanics, Park Staff & Volunteer Groups that provided "Hands on" support of our Adaptive Off Road Cycling program.

*Interested in Participating in any of the PVA Para Cycling Events? Visit our page to learn more and register for any of our events. <u>Https://pva.org/adaptive-sports/paracycling</u>. Peter Park peterp@pya.org Program Mgr, Sports and Recreation





Powerlifting

Ivan is training under coach Tyler (Power Lifter).

Ivan is competing in Powerlifting at the games.







Regional Games











Murphy's Law invalids Texas State Shoot.

PVA Shooters braved Texas sized Thunderstorms, by -passed numerous mechanical and medical situations to attend the 2023 Texas State Sporting Clay Championship in San Antonio Texas. Lighting took out power during the first day of shooting and also several Fireing Lanes were unpassable by water and mud. PVAT Team members David, Joel, Dennis, Bruce, Eric, Frank and Willard Loaded, Aimed and Shoot their best while navigating through the saturated Complex.

Thank You Paralyzed Veterans of America Texas Chapter, Rino and the National Shooting Complex for your Support.





Softball Practices at Morgan's Wonderland













For sale: 2017 Toyota Sienna Handicap Accessible Van 28125 miles Excellent Condition \$47,000. Please text me 361-293-8490 if interested





W

6.7PHXS



San Antonio 9-Ball

PVA Members that attended.

Bruce K, Danny C. John S, Patrick O, Gill G, Marco, Jose L, and 1 Guest player, 2 Asst

Fast Eddie's

SA Texas

The Texas PVA had their first of many 9 Ball Pool Tournaments! We played at Fast Eddie's off 1604 and Braun Road and we had 7 Wheelchair players. Patrick Osborne won the Seated Manual Wheelchair Division, and I won the Adaptive Division! I encourage more wheelchair adaptive athletes to get out the pool cue and get busy playing! Never limit yourself, my pool cue is spring loaded, but it takes me working out to hold the pool cue. It's fun to play and cheer each other on! Next tournament will be in Corpus Christi, Texas on June 13th!

























FDA Approves Briumvi[™] for the Treatment of Relapsing Forms of MS Latest News December 28, 2022 Reviewed by MSAA Chief Medical Officer Barry A. Hendin, MD

TG Therapeutics has announced that the United States Food and Drug Administration (FDA) approved Briumvi[™] (ublituximab-xiiy) for the treatment of relapsing forms of multiple sclerosis (MS) in adults – including clinically isolated syndrome, relapsing-remitting MS, and active secondary-progressive MS. This medication is a monoclonal antibody that targets CD20, a protein found on the surface of B cells, and induces B-cell depletion within 24 hours. B cells are white blood cells shown to play a role in MS.

Briumvi is given by infusion, with two initial doses administered 14 days apart, followed by infusions every 24 weeks. In studies, Briumvi met its primary end point of reducing annualized relapse rates when compared to individuals taking the oral medication, Aubagio[®] (teriflunomide). It also met certain secondary endpoints, including the reduction of gadolinium-enhancing lesions as seen on magnetic resonance imaging (MRI), compared to individuals taking Aubagio.

The most common side effect was infusion-related reactions. This new therapy is expected to be available in early 2023.

Study Design and Findings

The Phase III ULTIMATE I and ULTIMATE II trials were identical, double-blind, and double-dummy (placebo) studies taking place at 104 sites throughout 10 countries. Enrolled participants were between the ages of 18 and 55, were diagnosed with relapsing MS, were limited to the use and timing of certain disease-modifying treatments, and had an Expanded Disability Status Scale (EDSS) score of 0 to 5.5 (with greater scores indicating more significant disability).

Between September 2017 and October 2018, the ULTIMATE I trial enrolled 549 individuals and the ULTIMATE II trial enrolled 545. Participants were randomized and the numbers were split in half to receive either Briumvi with an oral placebo or Aubagio with an intravenous placebo. The median follow-up of these studies was 95 weeks (a little less than two years) and some of the results were determined through a pooled analysis of both trials.

Results of these two studies include the following:

In the ULTIMATE I trial, the annualized relapse rate was 0.08 in the Briumvi group versus 0.19 in the Aubagio group. In the ULTI-MATE II trial, the annualized relapse rate was 0.09 and 0.18, respectively. Generally speaking, individuals taking Briumvi experienced about half the relapses than those taking Aubagio.

In the ULTIMATE I trial, the mean number of gadolinium-enhancing lesions (per T1-weighted MRI scan) was 0.02 in the Briumvi group versus 0.49 in the Aubagio group. In the ULTIMATE II trial, the mean number of gadolinium-enhancing lesions was 0.01 and 0.25, respectively.

In the ULTIMATE I trial, the mean number of new or enlarging hypointense lesions (per T2-weighted MRI scan) was 0.21 in the Briumvi group versus 2.79 in the Aubagio group. In the ULTIMATE II trial, the mean number of new or enlarging hypointense lesions was 0.28 and 2.83, respectively.

In the ULTIMATE I trial, "no evidence of disease activity" (NEDA) was seen in 44.6% of those treated with Briumvi versus 15.0% of those receiving Aubagio. In the ULTIMATE II trial, NEDA was seen in 43.0% of those treated with Briumvi versus 11.4% of those receiving Aubagio.

Side Effects, Adverse Events, and Screenings Required

Among those taking Briumvi, the most common adverse event was infusion-related reactions (47.7%). Fever, headache, chills, and flu-like symptoms were the most commonly reported symptoms when experiencing an infusion-related reaction. Other side effects included headache (34.3%), nasopharyngitis [cold symptoms] (18.3%), pyrexia [fever] (13.9%), and nausea (10.6%). These were compared to side effects experienced by the Aubagio group, whose most common adverse events included headache (26.6%), nasopharyngitis (17.9%), alopecia [hair loss] (15.3%), infusion-related reactions [to the placebo given intravenously] (12.2%), and diarrhea (10.6%).

Looking at both trials combined, just over half of each treatment group experienced infections – 304 participants or 55.8% of the Briumvi group and 298 or 54.4% of the Aubagio group. Most of these were related to the respiratory tract. Urinary tract infections and herpes virus infections also were seen in smaller percentages of participants.

Serious and life-threatening infections were seen in 5% of study participants taking Briumvi, compared to 3% of those taking Aubagio. Three infection-related deaths occurred with Briumvi-treated patients. Administration of Briumvi should be delayed in patients experiencing active infection.

IAlso in these trials, one participant taking Briumvi experienced Hepatitis B Virus (HBV) reactivation. All patients should be screened for HBV prior to starting Briumvi and anyone with active HBV should not be given Briumvi.

Although cases of progressive multifocal leukoencephalopathy (PML) have been reported in patients taking other anti-CD20 antibodies, no cases of PML occurred during the 96-week period. Additionally, no opportunistic infections were reported.

Results of animal studies suggest that Briumvi may harm the fetus if given to a pregnant woman. For this reason, women who could become pregnant should be given a pregnancy test prior to starting Briumvi as well as prior to each infusion. Effective contraception is recommended during treatment with Briumvi and for six months after discontinuing treatment.

For More Information

For more information, please visit www.briumvi.com, or go to TG Therapeutics' dedicated patient support website at www.brium-vipatientsupport.com. This latter website will be available to access within a few days following this approval. Interested individuals may also call 1-833-BRIUMVI, or 1-833-274-8684.

Whether connecting online or via phone, patient support representatives can provide information about financial assistance programs. Representatives can also assist individuals with locating their nearest infusion site. As noted earlier, Briumvi is expected to be available in early 2023.

For general information or to speak with one of MSAA's trained Client Services Specialists, please contact us in one of the following ways:

Call (800) 532-7667, extension 154 or email MSquestions@mymsaa.org. Helpline hours are Monday through Friday, 8:30 AM to 8:00 PM, Eastern Time. To reach a Spanish-speaking Client Services Specialist, please call (800) 532-7667, extension 131. Para comunicarse con un Especialista de Servicios al Cliente que habla español, llame al (800) 532-7667, extensión 131 o envíe un correo electrónico a MSquestions@mymsaa.org. El horario de la línea de ayuda es de lunes a viernes, de 8:30 AM a 8:00 PM, hora del este.

Alamo Safari Club Clay Shoot and Crawfish Boil

We attended the Alamo Safari Club (Branch of Safari International) Clay Shoot and Crawfish Boil on May 18th, 2023, at the San Antonio Gun Club.

Members of the TPVA were present for the shoot and dinner. Our host and board member Trae Willoughby was gracious enough to extend the invite to members of our shooting team. The Willoughbys hosted a dove hunt last year at their ranch in Uvalde and are inviting us to come back for another dove hunt in the fall of 2023.



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