

The Other Breakfast Club

Source: Courtesy of the National Road Safety Foundation

Video Link: <http://www.brainline.org/content/multimedia.php?id=2367>

Kelley Syverson: Aaah, what do I want to say about traumatic brain injury? Traumatic brain injury is the most misunderstood injury, I think, that's out there. It can be small or big and then the aftermath that one encounters after the injury is just amazing because it's watching each system shut down and then restart again if you're so lucky.

Jan Harpe (Speech-Language Pathologist): Amber, Amber probably struggled the most with memory challenges. She, too, had very severe memory challenges. She was a college student at the time of her injury and she couldn't remember lectures. She'd read materials over and over and over and still have no idea what she read. It was very frustrating to her.

David's Mother (Cindy Thee): When David was a little boy, he was the most cautious child I have ever seen. I mean, very cautious. Even when he was starting to walk, he would crawl and just hang on to things and very... He didn't really wanna do anything that was risky.

Amy's Mother (Rhoda Tromp): We have a lot to be thankful for because she has done very, very well. I feel like God answered those prayers. I give Amy back to him for whatever he wants to do with her life. I think he has special plans for her.

Cynthia Hall (Physical Therapist): Kelly is an exception in a lot of ways. Her attitude from the very beginning was one of good humor and courage. There was nothing that I ever suggested that Kelly pooh-poohed or said I won't try.

Olivia Julius (Physical Therapist): For Adora (ph.), she believed she would be a month. She said, "I just needed to go home. I'll be fine in just one month and I'll be out of here. I'll be walking, I'll be returning to my former life and I'll be able to take care of my cats". That was her main goal, is to take care of her cat again.

Female Speaker: The whole thing in the beginning is that they need to survive, they need to get past that critical stage.

David's Mother (Cindy Thee): I remember just before his accident he took me to the Martin (ph.) Raceway and we went around the S-curve in Grand Rapids and were clipping (ph.) right along. And I'm sort of hanging on and I'm... We made it to the raceway and I said to him, "David", I said, "make sure your heart's right with the Lord", I says, "because you're gonna die in this car if you keep up like this". And three weeks later I got the call.

David Tubergen: I think I was going around the corner probably too fast. I really don't remember the accident all that well. It was the start of a three month coma.

Amber Hora: Basically, I woke up in the hospital and I was like, "What"! I thought it was a dream totally.

[Crash Noise]

Amy's Mother (Rhoda Tromp): I was rounding a little curve on the expressway so I couldn't see, I couldn't see the traffic backed up and I came right upon stopped traffic.

[Crash Noise]

Eric Horton: I'd always speed on the road right before I got home and just getting going like 80.

[Crash Noise]

Eric Horton: Apparently I lost control, which was bound to happen, and I hit a tree with the passenger side of the car. I was the only one inside.

Kelley's Father: The third time that she called, the Sheriff answered the phone and the Kent County Sheriff saying that the girls had been in a very bad accident and both girls were unconscious.

Adora Trostle: A semi stopped in front of me and I knew I couldn't stop. In hindsight, it would have been better to hit the guy in front of me but avoid hitting him I went to the side and a truck hit me from the side, and....

[Traffic Noises]

David Tubergen: I think I was just in a car just screwing around, going too fast, and the passenger side wheels went into the ditch. Sucked me—sucked me in. I went into a fish tail and it shot me out and I flipped front end over back end five times. And I was airborne. I hit the ground five times within an eighth of a mile. So you do the math.

Dr. Jacobus Donders (Psychologist): This is a model of the brain, about life size. It's fairly easy to take it apart. It's gonna be a lot harder to put it together after you've had an injury to the brain.

Female Speaker (Nurse): With working with the traumatic brain injury population, not everyone will survive. A lot of the injuries we see are because of risk-taking behavior, drinking and driving being one of the biggest ones which leads you down to things like racing cars at high rates of speed and not having good judgment.

Some are the result of things that are purely accidental – bad road conditions; people driving too fast; slick, icy roads; not being able to stop in time; being sidetracked; talking on cell phone and eating and drinking and doing other things other than just driving the car like they should be doing.

Cynthia Hall (Physical Therapist): I wish that like driver's ed courses, that part of that was going into a Mary Freebeter (ph.), a hope network, and seeing that it isn't just an accident that you're sick for a while and you get up and you're done. It's not like breaking a leg or breaking an arm. You... When you get done with this, you are not the same person you were before it happened. And I don't know if you can understand that at 16 or 17 years old, how it changes absolutely everything.

Amber Hora: I obviously don't think I could even speak. I was like, "Blah, blah, blah" and nobody really knew what I was saying. So I didn't know I could not walk. Just all those little things that you think you know how to do, then when it comes down to em, when you try to do them, you can't.

Scott Truskowski (Occupational Therapist): There's a recognition that the things that we work on with people are things that, you know, four and five year olds are learning to do developmentally that 18 to 35, sometimes older than that, those people are having to relearn to do it.

David Tubergen: Had to learn how to walk, swallow, tie my shoes. My grandmother showed me how to tie my shoes.

Kelley Syverson: To me it's like a constant struggle because you take two steps forward, three steps forward, then three steps forward, two steps back and it's a constant juggling act to get my life back.

Adora Trostle: My voice was my best friend. It meant more to me than anything. And then, of all things, when the wreck happened, my voice was the one thing that was dear to me. It was the one thing that got taken away. I can't tell you how much I cried about it.

Laurie Gastineau (Speech-Language Pathologist): And it's a struggle. It usually takes longer to recover than people expect. There are usually more issues involved than they expect, for example, having to go retake a driving test. It's hard for people to recognize sometimes that they have more impairments than they think they do and they have to go through more hoops to regain independence that they are used to.

Scott Truskowski (Occupational Therapist): I think the most difficult thing would be having them gain an awareness of their deficits and how it's gonna tie into their former lives and whether or not they can resume some of the roles that they had previously.

Out of the population that we work with are young people generally aged 18 to about 35, and a majority of them are male, just based on males in that category take more risks. And a lot of the times people that we work with have varying levels of brain injury, whether it's a concussion, whether it's a truly traumatic brain injury or whether it's something—somewhere in between on that continuum.

[B-Roll]

David Tubergen: I don't know where it comes from cause—you know, why I have this urge to go fast. I always have.

[Racing Noises]

David Tubergen: It's just a inner hormone-like thing where you guys gotta go fast, fast...

[Racing Noises]

David Tubergen: Yeah, at the end of those commercials when they're saying this was done by a professional driver on a closed course, I always thought I was a really professional driver but I just—I was never on the closed course. Instead, I was rolling end over end through a hayfield.

Scott Truskowski (Occupational Therapist): One of the guys that I've worked with in the past is Dave Tuberdin (ph.). He's a young guy that had a pretty significant injury following a multiple rollover accident and his injury was severe enough that he needed to be airlifted to a hospital.

David's Mother (Cindy Thee): It was his best friend who called me and he was just hysterical. And he said, "They're airlifting David" and I said... No, no, the first thing I said probably was just crying and crying. And I said—I knew—I said, "Is he dead" and Paulie said, "I don't think so but they're airlifting him now".

Dr. Mark Greenwood (Flight Physician): The majority of patients who are transported with traumatic brain injury are young men who are involved in car accidents. The way I look at it is we provide an opportunity to save a life. There is only so much we can do. We... The aero-med (ph.) team and the helicopter is just one link in a chain.

Anthony Berrosa (Helicopter Pilot): You know, I know they talk about the golden hour. I fly as fast as I

can every time. I fly as fast as I can going, coming and as safely that we can primarily (ph.). That's the most important thing.

David's Mother (Cindy Thee): I remember when he was first injured and they allowed me to put music in his room. I put Nora Jones on. I loved Nora Jones.

[Music]

David's Mother (Cindy Thee): And it's the most beautiful song and if you listen to it, it's almost like—it's almost like a mother's prayer to a kid to come back.

David Tubergen: I'm sure most parents have said it's not you usually, it's the other drivers and, boy, is that a true statement. And a lot of the times I was that other driver that people had to watch out for.

I had a speaker box coming from the back of my car and when the speaker box... I had the backseats folded down. When the speaker box came, it put a hole probably about this big in my head and they had to wait like two years for much bone to... Your bone kind of forms layer over layer and I had a hole and they wanted to see how much that hole would close up before they went and put a plate in.

And so they just put a piece of titanium in, ABS plastic in my head a couple months ago. So...

David's Mother (Cindy Thee): And sometimes I get a little miffed because I'll say to David now that he's with us again and can really understand what I say to him, I say, "Do you remember—do you remember crawling on the floor or trying to drop a ball and you couldn't even make your hand grab the ball?"

I said, "Do you remember all that?" "No." I said, "Do you remember anything out of the hospital?" "No." And I thought, "Well, I do and your father does and your sisters and your grandparents". So it was hard.

[Crying]

Stephanie Peper (Speech-Language Pathologist): I like to look at cognition as much like the universe and language as like the earth. It's a very important part of that universe but it's not all of it.

[B-Roll]

Stephanie Peper (Speech-Language Pathologist): For example, someone learning to eat again. We take for granted how easy it is for us to pick up a spoon, scoop the ice cream and take that bite.

But if you think about all of the components of that, what—what it—what the spoon feels like in your hand, the movement from the ice cream to your mouth, what that ice cream feels like in your mouth, we take for granted—and where it needs to be in your mouth to swallow...

[B-Roll]

Stephanie Peper (Speech-Language Pathologist): Part of what I do is connect the language part of cognition with the action part of cognition and bring it together to make it a functional—a functional activity such as eating.

Kelley Syverson: Before my crash I was 24 living in Chicago. I'd moved to Chicago right after I had graduated from college with a Bachelors in Communication and lived there on my own in a studio apartment in the city. One of the most frustrating things for me has been myself, because I've probably

sabotaged myself, not being aware of it but fighting against the idea that there is anything wrong with me. Well, obviously there is or I wouldn't be here.

Cynthia Hall (Physical Therapist): When we first met, Kelly was barely able to sit on a mat table. In fact, when she did sit on it, she'd have to hold on for balance. She didn't have any kind of protective reaction so if she started to fall, she couldn't even begin to catch herself. She could walk but it took her – let me remember – about 35 minutes to walk 170 feet.

Kelly used to get lost. She had what we call problems with topographical orientation. So she'd go down the hallway and all of a sudden we'd hear this big laugh and, "I'm lost again. Somebody get me". Simple things she couldn't find her way around. She couldn't roll over. She couldn't scoot up and down in a bed. Even simple movements that we take for granted, like turning or twisting, were enough to knock her over.

Kelley Syverson: I... That's a double-edge sword because, yes, one has to—at least I have had to readjust, but is it good or bad? No. It just is what it is.

[Singing/Music/ B-Roll]

Kelley Syverson: I love what I am doing now. I love the people that I work with now.

[B-Roll]

Kelley Syverson: I'm working for a preschool in Grand Rapids.

So I'm working with little three and four year and some five year olds. I'm just one of them. I'm down at their level and they don't see it as any different, which is great because you just can't imagine how powerful it is to be able to expose these young children to the differences that are out there in the world and have them be at ease with it.

Cynthia Hall (Physical Therapist): You don't want one person giving their opinion; you want a team of em.

Dr. Jacobus Donders (Psychologist): It often takes a—a dedicated group of people working closely together, checking their own egos at the door and making sure that the welfare of the patient comes first. That means working together, agreeing what the goals are and involve the patient and the family in that process.

Make sure that you work on what's important for them, not what's just interesting for you.

[B-Roll]

Carolyn Decker (Occupational Therapist): It's been estimated that over 50% of patients that have suffered a neurological condition have disturbances in their vision.

[B-Roll]

Carolyn Decker (Occupational Therapist): Problems with their vision can significantly impact balance, coordination, decision-making. It's like asking somebody to summarize a novel if they've only read page 20 and 82.

[B-Roll]

Carolyn Decker (Occupational Therapist): Being involved with the patient's family is huge. We do most of our family education, really intense family education, within the first two or three weeks that the patient's here.

[B-Roll]

Carolyn Decker (Occupational Therapist): We keep them as involved in their therapy as possible.

Laurie Gastineau (Speech-Language Pathologist): It's amazing how the human brain works. Sometimes even with a lot of injuries seen inside the head they recover really quickly and it surprises us how well they think and recognize deficits and get back to a level of independence that we wouldn't have expected.

[B-Roll]

Laurie Gastineau (Speech-Language Pathologist): How do you help a person that's lost a lot and still let them feel like they have a say in their lives and allow them to be their own person?

[B-Roll]

Laurie Gastineau (Speech-Language Pathologist): In therapy all patients struggle with the same issues. They are fighting loss of independence, they're fighting loss of thinking skills, and it's a struggle. It usually takes longer to recover than people expect.

[B-Roll]

[Singing]

Amy's Mother (Rhoda Tromp): Well, the first real key to me that she was hurt as critically as she was was that I was assigned a chaplain who stood by me. So I knew at that time it was extremely serious. And I just kept praying that Amy would be all right, that somehow she would pull through.

And one day when I walked in the hospital room... She had not come out of her coma yet but when I walked in the room, she said, "Hi, Mom", and it was the most precious words I had ever heard in my life.

[Piano]

Amy's Mother (Rhoda Tromp): Well, pretty much she had to start all over again learning to hold a toothbrush even to brush her teeth, learning to comb her hair, learning to dress herself. Those were all things that she no longer could do.

Amy Tromp: And even things like writing, I didn't remember how to form my hand to make the letters and things. I wasn't able to write.

Amy's Mother (Rhoda Tromp): And because her balance was off... She had a fracture near the inner ear, so that caused her to feel like she was on a ship on water. And if you watched her walk, you know, everything, all the walls moved because her balance was all off.

Sanjeev Thamman (Occupational Therapist): Making a cup of tea seems like a very common, very easy job, but if you try to sequence it, you, as a person, have to have a physical control to be able to move and pick up that cup, warm up the water, pour water, mix milk, sugar, whatever you need to. It

seems very simple but if you cannot think that what are you doing, what is the sequence, how to organize the sequence, how to execute the sequence, I think it's a very hard job. Occupational therapy is a segment of rehab and we use occupation for therapy.

[B-Roll]

Sanjeev Thamman (Occupational Therapist): Now your occupation could be like getting dressed, making a sandwich for yourself. Your occupation could be playing golf, your occupation could be, you know, taking a shower.

So anything that you do from the time you wake up til the time you go back to bed is occupation.

[B-Roll]

Sanjeev Thamman (Occupational Therapist): You are dealing with people who are suffering from pain, people with no memory, maybe no sequencing, they cannot even understand where they are. And you start from there and you bring them back to life and they can go back to work. I think that's a very rewarding job.

[B-Roll]

Amber Hora: I actually really enjoyed both my boyfriends that I had at that time. One boyfriend was definitely one that him and I went skydiving, as you could say. We went on skiing trips, we went on all these different adventurous kind of a lifestyle together. And then my other boyfriend was more like a serious deal.

My friends in high school, we did a lot of rebellious things, you know. We partied and all this stuff but that was then, this is now, you know.

[B-Roll]

Olivia Julius (Physical Therapist): I am very tough on my clients. I believe that 50% is their own effort but 50% or even more is really what the therapist brings to it and what you put into them. And I believe input equals output. So much as I can drive them and put into them and not just pampering but really pushing them is how I've gotten the results I've gotten over the years.

Amber Hora: I'm very thankful that this happened because I—I—I can continue on from this point knowing where I'm gonna be going, what I'm gonna be doing. I have a better idea of what I wanna do and that would never have been possible...

[Squeaking Noises]

Becky Reed (Physical Therapist): Young men especially find it very difficult if they have problems with their walking, in being able to make that trust factor of relying on somebody else to assist them.

[B-Roll]

Becky Reed (Physical Therapist): We look for the best long-term outcomes. We address all kinds of mobility, including their access to the bathroom.

Being able to transfer to the toilet is a huge issue dealing with independence. Patients wanna take themselves to the bathroom. They don't wanna have to rely on somebody else to be able to assist them.

One of the hardest things that we have to tell a lot of our patients is they're not safe to go by themselves.

They have to call and ask for help.

[B-Roll]

Becky Reed (Physical Therapist): People usually overestimate their abilities in the early stages and they don't wanna rely on somebody else to assist them.

[Drums]

Olivia Julius (Physical Therapist): I like to say to my client it's a muscle and a bone and if you work them, you will see the progress or it will change. I worked a long time with Adora because of her severe car accident. A big part of the problem was that she had movement problems. She couldn't move. She was very uncoordinated.

Adora Trostle: My name is Adora and I had a brain injury four years ago. Now my voice, what you hear, that's disabled.

Jan Harpe (Speech-Language Pathologist): Adora, the voice, a lot of voice therapy with Adora.

Adora Trostle: Before I sang and my voice was my voice. Now my voice things like this. My voice is my art. My art is how I sing now.

Jan Harpe (Speech-Language Pathologist): Before her accident in high school, she was a member of the choral group. She was working with the vocal coach. Singing was a large part of her life before her injury.

[Singing]

Adora Trostle: My boyfriend at the time listened to a tape of me singing from back then, and he had the headphones on – he was likeAnd then at that point I knew, to him especially, I was my voice. So without my voice I felt I wasn't a person anymore.

[Piano/Applause]

Adora Trostle: This is an example of something I did after my wreck. And it's a perfect example of the work I do now. You can tell what's there but it's distorted and kind of fun and disorganized messy like my place. But people said that my paintings capture so much personality of the person and that reflects another thing about my wreck. My wreck made me more intune with what's going on inside people.

Olivia Julius (Physical Therapist): It took a long time to gain trust in us and to develop a relationship. Well, she was—just wanted to get out of here, didn't want to go initialize. We have close relationships but for her it was just a temporary move.

Adora Trostle: The big start of it all was when was when I wanted to get out to my van and earth. So they had a harness on me to tie me down to my wheelchair because I would try to get out. So it takes an hour trying to untie this thing, and then I quietly wheeled down the hall to the doors that lead outside. And got up to run, to everything outside, and then I must've taken one or two steps and then I fell.

[B-Roll]

Kelley Syverson: The Break Fast Club is a group of 20-somethings that have been going through rehab around the same time. And so we've had different struggles...

David Tubergen: I got my driver's license back finally and then I went on and I got my chauffeur's license and now I can cart people around. But they really don't feel too easy riding with me, which I don't understand why.

Amy Tromp: I don't know. I don't know what career I have in mind, but preferably something in like the management field.

Kelley Syverson: Just kind of an opportunity for a group of us to get together and talk about our situations, our feelings and our frustrations, to kind of have a voice.

Jan Harpe (Speech-Language Pathologist): And it's wonderful that they can talk with one another because, like so many illnesses or disabilities, when you have it, you're the only one you know that's ever had that before and you're struggling with this. And it's wonderful to be able to talk with other people who have been there and can offer you some insight, and not just from a clinician that maybe has ideas, but these people have really been through it.

And they can say, "Yeah, I struggle with that too and this worked for me. Or you might try that". It really helps when it comes from their peers.

Kelley Syverson: In this situation it takes a very, very long time to feel like you have a voice and you're being heard.

Amy Tromp: This brain was given to me after my injury and what is so relevant to me and what's amazing is that the brain controls absolutely every area. And when you damage one part of it, it affects everything you do.

Amy's Mother (Rhoda Tromp): I did have to deal with severe guilt after the accident, though, cause I was the one driving. It wasn't even my young, teenage daughter where usually it's the teenager that has that. And I had never had an accident before. This was the first one. I should have paid more attention.

Amy and I were talking and visiting in the car. Did I have my eyes off the road? Was I not paying attention like I should? Could I have done something differently? I mean, you go through all the scenarios. But it was, you know, an accident that really could not be prevented.

Kelley Syverson: I was finally one of the regular 2-somethings and then all of a sudden, coooo, crash comes and it changes my life. And I don't know if there's any rhyme or reason and I can't change history, so it is what it is.

David Tubergen: Now I can really drive slow and it's okay with me if somebody has to pass me. I can just let em go. I don't have any more of that "I need to get there now for no real reason" and drive like I used to.

David's Mother (Cindy Thee): I think he had his epiphany and I think he realizes that he can die.

Adora Trostle: I had a wonderful therapist at the time who knew there was a reason to work hard. She told me that laughter and work go hand in hand.

Amber Hora: I really was angry with God but I think it was a good thing. I think God allowed it to happen because my life was going this way and all of a sudden, after my injury, I was going this way. So...

Kelley Syverson: The “why me”. And, you know, in my—in my mind there isn’t an answer for that. It’s... It is what it is and guess what? You have to deal with it. If you wanna live in this life, you have to deal with it.

Adora Trostle: Practice. Even I’ve – like, young teachers will ask you to do homework and people think it’s a joke. But homework prepares you to learn. Practicing driving teaches you about how to drive correctly. Don’t blow practice off, because without practice you won’t know what you’re doing. I got my license with like two hours of practice. I didn’t understand the looking thing and it’s because I didn’t practice. Not because it was a joke, but because I didn’t know how crucial it was.