



Defense and Veterans Brain Injury Center “The TBI Family” Podcast
“Irritability and Anger”
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Host: Dr. Scott Livingston

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Cynthia Boyd: It usually manifests with subtle personality changes with a general type of irritability, which may play out like the patient tends to be more impatient than they used to be in the past. Or have low tolerance and a low-frustration level. Recognizing that this is an organic change in a person, it's not a personal attack against a spouse or loved one.

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Scott Livingston: Hello. And welcome to the TBI Family. The podcast where caregivers of service members and veterans who've experienced traumatic brain injuries. This program is produced by the Defense and Veterans Brain Injury Center, otherwise known as DVBIC. And I'm your host, Dr. Scott Livingston. Most of us are no strangers to anger and irritability. Stress from daily life can be tough to manage and sometimes it can creep into our behavior in ways that we'd prefer it didn't. Service members and veterans who've experienced a traumatic brain injury may find it especially challenging to control their anger following an injury. The TBI Family's Sidney Hinds spoke with experts in the field to discover what caregivers should know about helping a loved one who may be struggling to manage their anger.

Sidney Hinds: Anger is just one among many symptoms which can manifest following a traumatic brain injury. But it can have a profound and negative impact on a patient and on their loved ones. Anger and irritability can manifest very shortly following a TBI, as Jason Bailie, the senior clinical research director for the Defense and Veterans Brain Injury Center, explains.

Jason Bailie: When we're dealing with someone who has a mild traumatic brain injury, or a moderate or severe traumatic brain injury, we can have irritability be emerging as the very common symptom. It's one of the most common symptoms that people report. We tend to see that earliest as with all symptoms of mild traumatic brain injury soon after the injury.

Hinds: Anger post-TBI can stem from many sources. Headaches and issues with concentration or memory can become major frustrations in their own right. Those living with the TBI may also have trouble with patience. All these factors can cause service members or veterans with TBI to have a short fuse. Cynthia Boyd, a forensic neuropsychologist and former senior scientific director with DVBIC, describes how day-to-day life can change with a TBI.

Boyd: They often had chronic and intractable migraines. So you can imagine that having migraines that are not being treated efficiently how that changes one's mood in everyday functioning. That along with cognitive changes which can be very frustrating to a patient. Things like, "Where are my keys?" "I can't remember what I'm doing." And the caregiver thinking, "Gosh, I just told him this story earlier." "I told him about the appointment." So there's the cognitive changes that really lead to frustration and it can be a dance between couples of creating irritability and arguments.

Hinds: Sensitivity to noise and other stimulus can trigger anger or irritability in someone with a TBI. Plan to avoid gatherings or other over-stimulating events, if possible, while your loved one is recovering. If an event is unavoidable, consider planning ahead in case your service member or veteran becomes overwhelmed. And try to let others present know ahead of time your loved one is dealing with a TBI and that anger issues may come into play.

Boyd: If you're in a situation where you know there's going to be a gathering of friends and family that you explain ahead of time to those people that there's been some subtle changes in the patient since the brain injury and that these are normal and that these are time-limited and this is part of the recovery process. Just as if the patient had a broken leg, we would expect a cast for a certain period of time and then the cast would be removed, and then they would start getting that leg strong again. Let people know that changes in temperament are not directed personally at anyone. This is just part of the organic recovery process.

Hinds: Try to create a quiet home environment for your service member or veteran, reducing any unnecessary noise or stimulus. You may also try identifying ideal quiet times when they can be alone to rest and not worry about confronting triggering stimuli.

Boyd: Another thing that helps is relaxation techniques. Those can foster good coping skills. Even something as simple as when the patient feels the irritability mounting or the impatience growing and the caregiver recognizes that, it could be good to introduce a time for a mantra, just a time of sitting alone and having some sort of phrase or word that's calming like we would do in meditation.

Bailie: Where we're trying to give the patient tools that they can use, such as deep breathing or ways to manage their anger. If we need to, we can supplement that with medication, to help them from a chemical standpoint, to help them control those anger issues. And then, from an environment management perspective, so we can control, try to modulate things that we know are going to make them angry or are going to escalate them, especially when we see those early signs when this person's getting agitated. Everyone gets more irritable when they're tired, right? And so if it's the end of the day and you recognize that your service member is typically angry at 7 p.m. and is more likely to kind of fly off the handle or be reactive, don't schedule things during that time. I mean, try to do things earlier in the day and leave that evening time for rest.

Hinds: Feelings of helplessness can increase the irritation your loved one experiences. Helping them to identify areas where they can reassert control over their day-to-day life can help manage their anger.

Boyd: Structure and predictability are really important things in the acute phases of healing. Structure because, if there are cognitive problems, if there are attention problems, and memory problems, it helps to have a plan, to have a structure of what days are going to look like. Are there therapies? Are there classes? Are there activities that are going to be done day-to-day? And because one thing that happens when someone is in recovery is they feel, at times, like they've lost control over aspects of their life, perhaps their pain level, perhaps their memory, perhaps their mood. So structure really helps give them a safe format to operate in.

Hinds: While these sorts of guidelines are good in general, anger and irritability does not necessarily look the same in different people. Likewise, what helps a person best cope with anger can change from person to person. It's best to consult your service member or veteran to find out what specifically will help them cope with their anger during recovery.

Bailie: The best solutions will always be something that if the patient has the ability, if they have that ability to be introspective and they recognize what is causing their irritability, their solutions will be the best ones because they're more likely to them. And they will know themselves better. But in some cases, that's not possible and you have to remind the caregiver or family member to do it. And that's OK. But yeah, it has to be patient specific.

Hinds: While caregivers absolutely should consult their service member or veteran when determining plans for managing anger and irritability, it's important to remember that planning for self-care can be difficult while dealing with a TBI. So be prepared to help your service member or veteran put their anger management plans into effect.

Bailie: What makes you irritable is going to be different than what makes me irritable. If I am having problems controlling my anger, I've really got to think about my environment and what's causing me to have these problems.

And it's the same thing when you have a TBI, only their person insight may be limited so we might have to help them identify what is causing their irritability and their ability to manage those symptoms is impaired. So we might have to help them manage their environment and control things. Go for a walk, take deep breathes. Give them the tools and remind them to use the tools when they're feeling angry.

Hinds: Beware of the ways anger and irritability can get in the way of recovery from TBI. Your loved ones may be less likely to follow proper treatment if they're easily frustrated by their interactions with health care providers. Frustrations with the treatment itself can also negatively impact willingness to take the necessary actions for recovery.

Baillie: You can have all the best treatments in the world. But if the patient's not willing to do them or doesn't have the ability to manage them, I mean, they won't work, right? So we see this a lot in physical therapy, vestibular therapy, or occupational therapy where someone needs to be rehabbing their injured knee, for example. And that requires a lot of time and commitment. They have to go home. They have to do all these exercises on their own. And if they're not able to tolerate that because of their anger issues, they're not going to do it. And so then you have this exacerbation of the medical issues because they're not doing the treatments. I think a common story that I've heard from patients is I can't get my service member-- I can't get my veteran to see their doctor because the doctor makes them so angry, right? So we have this kind of situation where this person has irritability, has anger issues, but they're so frustrated with their medical system and their condition, and when they go see the doctor, the doctor is trying to do their best to give them treatments, but sometimes it can be frustrating being at the doctor's office working within the demands of the medical system. And again, if this patient is prone to irritability, they don't want to deal with that, right? So they'll get angry and they'll yell at their doctors sometimes, because they don't like what the doctor is recommending or what they have to say, because sometimes those recommendations are hard.

Hinds: Overcoming frustrations with the recovery process can require the same sort of introspection needed for general anger management. Identifying what parts of treatment trigger a service member or veteran's anger and determining ideal times to visit with physicians can ease this process for you and your loved one. Perhaps most importantly, be aware your service member will recover. And be aware that treatment does work. Acknowledge your service member or veteran's frustrations and help them understand this anger and irritability is an expected part of the healing process.

Boyd: What the patient's going through is normal in the course of recovery and to have that discussion with the patient to both be on the same playing field. I know there are changes for you right now. I know that you are more irritable than you used to be. I know there's frustrations for you that are greater than they used to be.

Hinds: Always bear your own safety and well-being in mind. Anger issues can manifest in violent ways, which can be draining or even dangerous to caregivers. While short-temperedness and outbursts can be expected, you are not obligated to deal with abuse or similar behaviors beyond your comfort level. If your friend or loved one with a TBI is behaving in a way that makes you feel at all unsafe, take steps to protect yourself. And if necessary, remove yourself from the situation entirely.

Boyd: A caregiver needs to have firm boundaries. And it starts with a discussion of, "I acknowledge that you're more irritable and you're more angry, and that's OK and we can handle that. But what is not acceptable is for this to turn into violence. So it's not acceptable to break objects. It's not acceptable to put your hands on me." Those kind of things. And if it does feel like it's going to that point, the caregiver must pull themselves out of the situation immediately. That means leaving the area. It may go as far as calling another family member or in extreme situations, certainly calling the police.

Hinds: As always, the TBI family reminds you that as a caregiver, your own well-being is just as important as the health of your loved one. Always take the appropriate steps to safe guard your own health and practice self-care as much as your circumstances allow.

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Livingston: If your care recipient is experiencing irritability or anger problems or other issues and doesn't seem to be improving, you should seek professional help. Begin with your primary care provider and ask if a referral to a

behavior health specialist is appropriate. If you've been assigned to a case manager, they can also point you toward help. We'll also post some links to serve as specific resources in the podcast description below.

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This episode of TBI family was produced and edited by Sidney Hinds and is hosted by me, Dr. Scott Livingston. It's a product of the Defense and Veterans Brain Injury Center led by acting director Kathy Helmick and the Defense Health Agency's Research and Development Directorate commanded by Rear Adm. Mary Riggs. Thanks for listening.

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