

# Healing Warriors

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**The Ronald A. Katz Center for Collaborative Military Medicine at UCLA is the first university-based military medicine center on the West Coast. It is a nexus for research projects and services designed to help U.S. soldiers, a UCLA tradition that stretches back more than half a century.**



Army Sergeant Jason March took a sniper's bullet in the back of his head while leading a platoon near Fallujah, Iraq, in 2006. Today, after several surgeries, March can finally smile on both sides of his face. *Photo by Eric Mencher.*

When Army specialist Joey Paulk turned down free tickets to a San Diego Chargers football game in January 2009, it was a red flag. When the self-professed baseball fanatic told friends he wouldn't be joining them on a road trip to Arizona for spring training, it was time for an intervention.

The normally outgoing Paulk had become a recluse since the July 2007 incident that nearly killed him shortly after he deployed to Afghanistan. Three anti-tank mines had hit his tactical vehicle, flipping it over and igniting the fuel tank. Paulk suffered burns to 40 percent of his body and face. Three weeks later, he awoke from a

medically induced coma at Brooke Army Medical Center in San Antonio wearing a full-body bandage. All 10 of his fingers had been amputated.

It would be several weeks before Paulk could bring himself to look in the mirror to see what had become of his face — and then he instantly regretted the decision. “I looked like a scene out of *The Terminator*,” he says. He had scar bands across his face from the skin grafts. His lower left eyelid drooped down toward his cheekbone. His nostrils were squeezed together. His upper lip folded upward, his lower lip turned down and melted to his chin. He couldn’t open his mouth wide enough to eat a cheeseburger, or purse his lips to pronounce the “P” in his last name.

## Critical Care

The novel partnership between the military and [UCLA Health](#) to bring physical and psychological healing to Paulk and others injured and disfigured in Iraq and Afghanistan can be traced to a 2006 segment on CNN. Host Lou Dobbs interviewed a young marine whose ears, nose and mouth were severely burned after his 26-ton amphibious assault vehicle rolled over an improvised explosive device in Iraq and shot 10 feet in the air. When Dobbs asked Marine Corporal Aaron P. Mankin what was next for him, the soldier replied in a voice still raspy from inhaling fire, “I have some surgeries planned to fix the beautiful part.”

Ronald A. Katz ’58 and his wife, Maddie (who died in 2009), were watching. They had been looking for an opportunity to contribute to the well-being of service members. The U.S. had been fighting with an all-volunteer force for five years, and many soldiers who had returned for multiple deployments were coming home with grievous wounds. The Katzes felt that these warriors deserved the best possible care, and they knew that Ronald Reagan UCLA Medical Center — where Katz was a board member — might be able to help. Katz brought his philanthropic vision to the hospital leadership, which found a willing partner in Brooke Army Medical Center. “The military has outstanding trauma surgeons who save the lives of these young men and women,” says Katz. “But then there’s a life to live, and UCLA could contribute some specialized services.” In 2007, Katz’s \$1-million initial gift established [Operation Mend](#). Mankin was its first patient.



March enjoys dinner at a local sushi restaurant with former Marine Albert Valenzuela, a health, safety and environment manager at PCL Construction who is part of Operation Mend’s Buddy Family Program. *Photo by Eric Mencher.*

## The Good to Come

What started with a focus on bringing UCLA’s plastic and reconstructive surgery expertise to post-9/11 war veterans now extends across large swaths of the UCLA community. Last November, UCLA launched the first university-based military medicine center on the West Coast, thanks to a donation from the families of Katz’s sons, Todd ’83 and Randy, in honor of their father. The Ronald A. Katz Center for Collaborative Military Medicine at UCLA will work with the U.S. military to address the unique challenges of healing and caring for the nation’s most critically wounded warriors. Peter Chiarelli, the retired four-star general who served as vice chief of staff of the U.S. Army from 2008 to 2012, serves as the center’s executive adviser.

To date, Operation Mend has provided reconstructive surgery to more than 100 active and retired U.S. military personnel who served in Iraq and Afghanistan, some of whom have had as many as 30 operations. More than providing free care from some of the world's top plastic surgeons, the program does everything from picking up the service members and their loved ones at the airport and handling all appointment logistics to providing lodging at UCLA Tiverton House and connecting them with a handpicked "buddy family" for companionship and fun activities during their stay.

At the hospital, UCLA surgeons performed a nerve transplant on a man whose face was partially paralyzed after he was shot in the jaw during combat; after the complex procedure, he was able to smile for the first time in five years. A woman with severe burns on her hands and face wanted to be able to wear her wedding ring again, and finally got her wish. After more than six years and dozens of surgeries as an Operation Mend patient, Aaron Mankin can recognize himself again, "the beautiful part" restored.

Despite countless surgeries with the Army, Joey Paulk had seen no improvement and would hide behind hooded sweatshirts, dark glasses and baseball caps any time he had to venture out in public. That all changed after he was convinced to accept the Operation Mend services. "The mental success has been even more important than the physical," Paulk says. "When I was hurting, everyone around me was hurting. Now I'm feeling better than ever, and it's made everyone around me happier."



April Sabin, assistant coordinator of Operation Mend, picks up March at LAX. *Photo by Eric Mencher.*

## Healing Invisible Wounds

The injuries to those involved in the nearly 13 years of combat in Iraq and Afghanistan are not all visible. Changes in the nature of war have produced signature wounds and enormous challenges. Since the advent of the improvised explosive device as a major weapon of combat, high rates of personnel have returned with traumatic brain injuries from the blasts. With the new rules of engagement putting all who are deployed in danger of being rocketed or otherwise attacked at any moment, the diagnosis of post-traumatic stress has soared. "The sheer number of people who are affected has overwhelmed the system," says Chiarelli. "There's help for the visible wounds, but we need to advance the research and understanding of the invisible wounds, which is why I'm attracted to what UCLA is doing."

A meeting that involved Chiarelli and David Hovda, professor of neurosurgery and director of the [UCLA Brain Injury Research Center](#), set the wheels in motion for fundamental changes in how the military evaluates and treats traumatic brain injury. Hovda was instrumental in alerting the Department of Defense to the setbacks

soldiers can suffer if not immediately removed from the battlefield and treated for mild TBIs (concussions). Now his program is part of the widening net cast by Operation Mend and under the umbrella of the new Katz center. “There is still no treatment for recovery of function after a traumatic brain injury,” says Hovda, who received the Army’s Strength of the Nation Award in 2011, as Katz had a year earlier. “By giving us access to these personnel for treatment and research, we can make a big difference so that they don’t have to suffer these long-term problems.”



March stands in the offices of Operation Mend. *Photo by Eric Mencher.*

Post-traumatic stress is also adding to the already difficult burdens carried by service members’ families. Members of today’s all-volunteer force are generally older than those who served in past conflicts — more than 40 percent of them have children — and the unusually long period of war makes multiple deployments commonplace. “These long periods of separation in the context of danger are not something you see in a civilian population,” says Patricia Lester, a UCLA psychiatrist and director of the Nathanson Family Resilience Center. There is both stress and anxiety for the spouse and children left behind, and “when the military parent returns, coping with mental-health issues, it may be difficult to fully engage in family activities, and some of these behavior changes may be confusing to a child,” says Lester.

Since 2006, the Nathanson center has partnered with the military to provide [FOCUS Family Resilience Training](#), an evidence-informed intervention that has touched the lives of thousands of military families. The programs aim to build on strengths and reduce stress through communication, problem-solving skills and proactive strategies that include learning how to recognize and cope with emotional triggers.

For Debbie and Brandon Sanford, part of the resiliency training was teaching their young son that he could no longer surprise his father by hugging him from behind, or that spontaneous family outings to Disneyland were a thing of the past. An 11-year U.S. Army veteran, Brandon Sanford’s exposure to IED roadside bomb blasts during his Iraq deployment left him with traumatic brain injury and seizures, as well as post-traumatic stress. Established by the Nathanson center and now also offered as part of Operation Mend, FOCUS — the first program of its kind — enabled the couple to work through unspoken tensions. “It was humbling to come home and realize I needed help with my emotional distress,” Sanford says. “It’s not easy for soldiers to come forward and admit that.”



March hugs Jo Sornborger, director of Operation Mend's FOCUS Psychological Health Program, while his mother looks on. *Photo by Eric Mencher.*

### **A 70-Year Commitment**

UCLA's dedication to veterans' concerns can be traced to the end of World War II. Under the federally funded GI bill, vets flocked to the campus, which dedicated housing and services to help them with their transition from military to college life. Today, the Bruin Resource Center's Veterans Resource Office provides one-on-one support to student veterans as they make that transition. A partnership with the U.S. Department of Veterans Affairs continues to thrive after nearly 70 years, supporting research, teaching and patient care in the VA medical system.

In January 2013, Chancellor Gene Block launched the UCLA Veterans Initiative to build on- and off-campus awareness of UCLA programs, research projects and services that benefit veterans. At the UCLA Anderson School of Management, the Entrepreneurship Bootcamp for Veterans with Disabilities program provides free training in small-business management for disabled post-9/11 veterans. UCLA is one of seven sites offering the boot camp, funded through private donations. "There was an instant connection through our shared military experience," says Daniel Suklja, a disabled Marine Corps veteran of the Iraq war who says that beyond teaching basics like how to create a business plan, the program gave him a network that continues to help him. Suklja has opened two Postal Annex franchises in Menifee, Calif., and recently purchased a dry-cleaning business.



UCLA surgeons Reza Jarrahy (with beard) and Christopher Crisera greet their patient before his exam. *Photo by Eric Mencher.*

The Ronald A. Katz Center for Collaborative Military Medicine aims to serve as a nexus for UCLA's many health-related research projects and services, fostering collaborations both within the university and between UCLA and the military on behalf of wounded veterans. In its first year, the center has paved the way for a collaborative project between [UCLA's Jonsson Comprehensive Cancer Center](#) and [Walter Reed National Military Medical Center](#) that, among other things, will give military personnel access to Jonsson Center clinical trials. The Katz center is also working with the Army to establish specialized EEG monitoring at Landstuhl Regional Medical Center in Germany for service personnel pulled from the battlefield because of traumatic brain injury. With consultation from UCLA neurologists, a new device will help to detect low-level seizures so that appropriate medication can be administered.

Chiarelli was in his first week as vice chief of staff of the U.S. Army when he learned about Katz and the life-changing work of Operation Mend, and he has worked closely with UCLA ever since. "Military medicine can't solve these problems alone," he says. "Through partnerships with great institutions like UCLA, we can learn from each other and be much more successful."

Paulk not only pronounces his name again, but he now also speaks publicly on behalf of other wounded warriors. "A lot of us are stubborn — that's kind of how we're trained," he says. "There are a lot more people like me who can use some help. My message is that it's not a weakness to accept it."