



DEPARTMENT OF VETERANS AFFAIRS
Under Secretary for Health
Washington DC 20420

June 25, 2015

The Honorable Walter Jones
U.S. House of Representatives
Washington, DC 20515

Dear Congressman Jones:

Thank you for your co-signed letter to the Department of Veterans Affairs (VA) expressing support for the use of hyperbaric oxygen therapy (HBo2) for Veterans with Traumatic Brain Injury (TBI) and Posttraumatic Stress (PTS). I am responding on behalf of the Department.

We are committed to providing the best proven treatments and technologies to assist in the care of our Nation's Veterans. HBo2 therapy uses increased pressure to attempt to provide oxygen into injured or diseased tissue to improve tissue functioning. At this time, it is approved by the U.S. Food and Drug Administration only for limited uses, such as wound care, decompression sickness and carbon monoxide poisoning. In addition, while HBo2 is not a prescription medication that may have related side-effects or addictive qualities, there are still associated risks when using the therapy at higher pressures, including middle and inner ear injury, lung injury, and central nervous system toxicity (confusion, seizures, brain damage).

The Department of Defense (DoD) sponsored the first ever placebo-controlled studies in this line of research to provide objective scientific data that is missing from earlier studies and anecdotal reports. This rigorous line of DoD research, with participation from the Veterans Health Administration (VHA), included three randomized, blinded, placebo-controlled trials that examined the effect of HBo2 on Servicemembers with symptomatic mild TBI. All three of the DoD funded trials have been completed and published, including summary commentary. None of these investigations were able to demonstrate any positive effects attributable to the HBo2 therapy.

Clinical support for using HBo2 for neurological conditions is primarily based on anecdotal case data. There is currently no objective empirical evidence indicating that HBo2 is effective or of benefit to Veterans with TBI or PTS. Given the current lack of medical evidence, HBo2 is considered a treatment where the risks of the procedure outweigh possible benefits, and cannot be endorsed by VHA for Veterans at this time.

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If you require additional information, please have a member of your staff contact Ms. Susan E. Kelly, Congressional Relations Officer, at (202) 461-6408 or by email at Susan.Kelly3@va.gov. A similar response letter has been sent to the cosigners of the letter.

Thank you for your continued support of our mission.

Sincerely,

A handwritten signature in blue ink, appearing to read "Carolyn M. Clancy MD". The signature is fluid and cursive, with the initials "MD" written in a smaller font at the end.

Carolyn M. Clancy, MD
Interim Under Secretary for Health