



Coping With a Traumatic Event: Information for Health Professionals

What Is a Traumatic Event?

An event, or series of events, that causes moderate to severe stress reactions, is called a traumatic event. Traumatic events are characterized by a sense of horror, helplessness, serious injury, or the threat of serious injury or death. Traumatic events affect survivors, rescue workers, and friends and relatives of victims who have been directly involved. In addition to potentially affecting those who suffer injuries or loss. They may also affect people who have witnessed the event either firsthand or on television. Stress reactions immediately following a traumatic event are very common, however, most of the reactions will resolve within ten days.

Common Responses to a Traumatic Event

Cognitive

- poor concentration
- confusion
- disorientation
- indecisiveness
- shortened attention span
- memory loss
- unwanted memories
- difficulty making decisions

Emotional

- shock
- numbness
- feeling overwhelmed
- depression
- feeling lost
- fear of harm to self and/or loved ones
- feeling nothing
- feeling abandoned
- uncertainty of feelings
- volatile emotions

Physical

- nausea
- lightheadedness
- dizziness
- gastro-intestinal problems
- rapid heart rate
- tremors
- headaches
- grinding of teeth
- fatigue
- poor sleep
- pain
- hyperarousal
- jumpiness

Behavioral

- suspicion
- irritability
- arguments with friends and loved ones
- withdrawal
- excessive silence
- inappropriate humor
- increased/decreased eating
- change in sexual desire or functioning
- increased smoking
- increased substance use or abuse

How Do You Interact with Patients after a Traumatic Event?

The clinician should be alert to the various needs of the traumatized person.

- Listen and encourage patients to talk about their reactions when they feel ready.
- Validate the emotional reactions of the person. Intense, painful reactions are common responses to a traumatic event.
- De-emphasize clinical, diagnostic, and pathological language.
- Communicate, person to person rather than "expert" to "victim," using straightforward terms.

What Can You Do to Help Patients Cope with a Traumatic Event?

Explain that their symptoms may be normal, especially right after the traumatic event, and then encourage patients to:

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- Identify concrete needs and attempt to help. Traumatized persons are often preoccupied with concrete needs (e.g., How do I know if my friends made it to the hospital?).
- Keep to their usual routine.
- Help identify ways to relax.
- Face situations, people and places that remind them of the traumatic event— not to shy away.
- Take the time to resolve day-to-day conflicts so they do not build up and add to their stress.
- Identify sources of support including family and friends. Encourage talking about their experiences and feelings with friends, family, or other support networks (e.g. clergy and community centers).

Who Is at Risk for Severe and Longer Lasting Reactions to Trauma?

Some people are at greater risk than others for developing sustained and long-term reactions to a traumatic event including disorders such as post traumatic stress disorder (PTSD), depression, and generalized anxiety. Factors that contribute to the risk of long-term impairment such as PTSD are listed.

- Proximity to the event. Closer exposure to actual event leads to greater risk (dose-response phenomenon).
- Multiple stressors. More stress or an accumulation of stressors may create more difficulty.
- History of trauma.
- Meaning of the event in relation to past stressors. A traumatic event may activate unresolved fears or frightening memories.
- Persons with chronic medical illness or psychological disorders.

What Can You Do to Treat Patients in Response to a Traumatic Event?

Helping survivors of traumatic events, their family members, and emergency rescue personnel requires preparation, sensitivity, assertiveness, flexibility and common sense.

- Refer patients to a mental health professional in your area who has experience treating the needs of survivors of traumatic events.
- Provide education to help people identify symptoms of anxiety, depression, and PTSD (see resources).
- Offer clinical follow-up when appropriate, including referrals to mental health professionals.

For more information, visit www.bt.cdc.gov/masscasualties,
or call CDC at 800-CDC-INFO (English and Spanish) or 888-232-6348 (TTY).