

Post-Traumatic Stress Disorder (PTSD)

Introduction

Post-Traumatic Stress Disorder, or PTSD, is a common disorder in which a person experiences disabling anxiety after a traumatic event. People with PTSD cannot stop thinking about the traumatic event and, in many cases, relive the event repeatedly.

PTSD can lead to other problems, such as depression and alcoholism. It can also get in the way of work, daily activities and relationships. This reference summary explains PTSD, its symptoms, potential causes and treatment options.

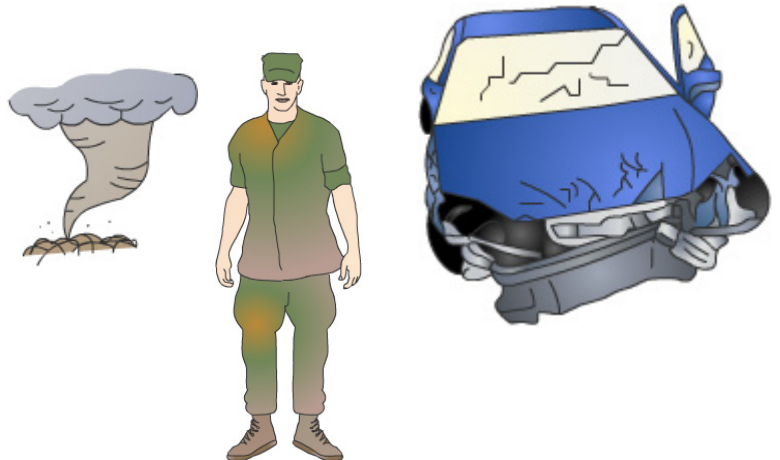


What is PTSD?

PTSD is an anxiety disorder that can develop after a traumatic event that involved physical harm or the threat of physical harm.

You might develop PTSD after experiencing traumatic events such as:

- Military combat
- Rape or sexual abuse
- Kidnapping or torture
- A car accident or plane crash
- A natural disaster such as a flood, earthquake or hurricane



You might develop PTSD even if the traumatic event happened to someone else, such as a loved one.

Sometimes just witnessing a traumatic event that happened to a stranger, as in the case of rescue and recovery workers, can lead to PTSD.

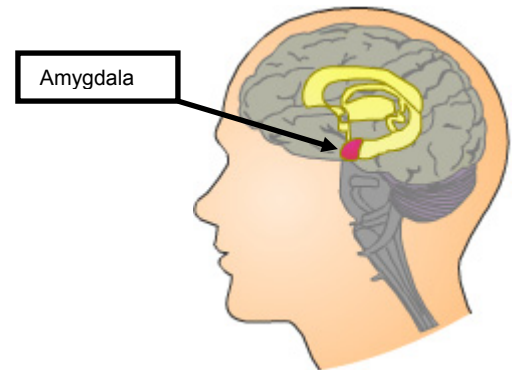
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If you have PTSD, you can't stop thinking about the traumatic event. You experience the emotions you had during the event, like fear or anger. These emotions get in the way of your daily life, work and relationships.

PTSD affects about 7.7 million American adults, but it can occur at any age, including childhood.

Women are more likely to develop PTSD than men are. People who suffer childhood abuse or have other traumatic experiences are also more likely to develop PTSD. Susceptibility to PTSD may be genetic.

Research continually finds new possible causes of PTSD. A small area of the brain called the amygdala, which may regulate fear, seems to work overtime in people with PTSD. Research has found that the fear response comes from the amygdala. The amygdala, although small, is a very complicated structure that also helps process memory.



People with PTSD tend to have abnormal levels of the hormones that respond to stress. The abnormal levels could cause extremely strong memories during a traumatic event. Later, these memories become flashbacks, or a reliving of the traumatic event.

Symptoms

If you have PTSD, you may startle easily, feel emotionally numb (especially toward people you used to be close to), act irritable, lose interest in things you used to enjoy, or become aggressive or even violent.

Other symptoms of PTSD may include:

- Feelings of guilt for having survived an accident where other people died
- Sleeping difficulties and nightmares
- Jumpiness and constant alertness
- Difficulty trusting others
- Avoiding people, places or things that remind you of the incident, as well as anniversaries of the incident



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Symptoms usually begin within 3 months of the incident but can also show up years afterward.

You may feel as if you're living the trauma over and over again. This is called having a flashback. In the daytime you may think about the trauma. At night, you may relive the trauma through nightmares. Images, sounds, smells or feelings can trigger a flashback.

If you have a flashback, you may lose touch with reality and believe that the traumatic incident is happening all over again.

With PTSD, you might have physical symptoms such as headaches, gastrointestinal distress, immune system problems, dizziness, chest pain or discomfort in other parts of your body.



Some people with PTSD recover within 6 months, while others have symptoms that last much longer. For some people, the condition never goes away. However, not everyone develops PTSD after a traumatic event.

Depression, substance abuse and other anxiety disorders often accompany PTSD. When accompanied by depression, PTSD may lead to suicidal thoughts. This is why it is extremely important to seek medical attention early on.

Diagnosis

Your symptoms must last more than one month to be considered PTSD. In order to find out if you have PTSD, you should talk to your doctor or health care provider.

You may have a hard time talking about your symptoms because you fear what others will think of you. For example, a study found that only 40% of soldiers coming home from Iraq with trauma-related symptoms said they would get help. Many were afraid that talking to a doctor would damage their military careers.

You may not want to talk to a doctor, but remember, PTSD is very common. You're not alone, "weak" or "crazy." Let your doctor know so that he or she can help you.

In some cases, trauma survivors experience PTSD symptoms between two days and four weeks after a traumatic event. This is called Acute Stress Disorder, or ASD. ASD usually goes away by the fourth week after a traumatic event. If symptoms continue for more than four weeks, you may have PTSD.

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Since some symptoms of PTSD are physical - like headaches, chest pain or dizziness - a doctor might treat them without being aware that they stem from an anxiety disorder. That's why it's important to ask your doctor about PTSD. If your doctor has experience in treating PTSD, then he or she may be able to help you. Otherwise, he or she may refer you to a mental health professional.

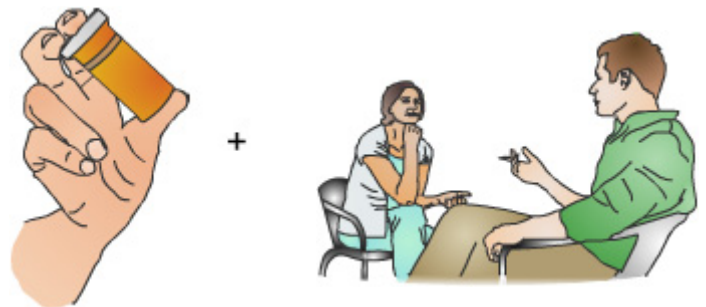


With PTSD, you may also have other mental health problems, such as alcoholism or drug dependence. Some symptoms of these other disorders are the same as PTSD. Effective treatment for PTSD may have to address all of these issues. Luckily, there are a number of treatment options available.

Treatment

Treatment for PTSD may involve medications and psychotherapy. Studies have found that medications called antidepressants can help relieve the symptoms of PTSD.

Antidepressants are a group of medications often taken to decrease the symptoms of depression. Even though they are called antidepressants, they are also used to treat anxiety disorders.



Talking to a specially trained doctor or counselor helps many people with PTSD. This is called therapy. Therapy can help you work through your traumatic experience.

There is no single best treatment, but some treatments are very promising. One of them is cognitive-behavioral therapy, or CBT. CBT includes a number of techniques such as cognitive restructuring, exposure therapy and desensitization.



Cognitive Restructuring

Cognitive restructuring is based on the idea that thoughts and feelings are connected. The goal of cognitive restructuring is to help you identify and change problematic thinking patterns. For example, a soldier who shot civilians at a checkpoint might feel

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guilty because he believes "it is my fault." Through cognitive restructuring, he would challenge the belief that it was his fault and replace it with a more accurate one, such as "firing my weapon was a last resort."

Exposure Therapy

Exposure therapy is another form of CBT. It is based on the idea that during the traumatic event, you learned to be afraid of thoughts, feelings and situations that now remind you of the traumatic event.

Exposure therapy involves repeated, detailed imagining of the trauma in a safe, controlled setting. This helps you face and gain control of the fear that was overwhelming during the trauma. For example, someone who survived a flood may be asked to describe what happened to him or her over and over again until they learn not to fear the memory.



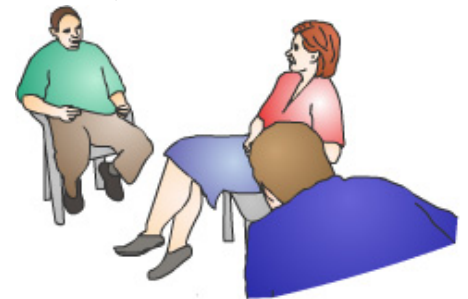
Desensitization

For some people, it is best to gradually work up to their most severe trauma. Desensitization is where you confront your trauma one piece at a time, usually starting with the least upsetting parts. Relaxation techniques help you progress through more upsetting parts.



Group Treatment

In group treatment you share your traumatic experience with a safe, close and understanding group of other survivors. As you achieve greater understanding of your trauma, you'll probably feel more confident and trusting. As you discuss how you cope with shame, guilt, rage, fear, doubt and depression, you'll start to focus on the present rather than the past. Telling your story and facing the feelings related to your trauma allows you to cope with your symptoms.



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Brief Psychodynamic Psychotherapy

Brief psychodynamic psychotherapy focuses on the emotional conflicts caused by the traumatic event. By explaining the traumatic event to a calm, understanding and nonjudgmental therapist, you develop ways to cope with strong PTSD emotions. The therapist helps you figure out current life situations that set off traumatic memories and make PTSD symptoms worse.



Eye movement desensitization and reprocessing (EMDR)

EMDR is a fairly new therapy for PTSD. Like other kinds of counseling, it can help change how you react to memories of your trauma.

While talking about your memories, you'll focus on distractions like eye movements, hand taps, and sounds. For example, your therapist will move his or her hand near your face, and you'll follow this movement with your eyes.

Experts are still learning how EMDR works. Studies have shown that it may help you have fewer PTSD symptoms. But, research also suggests that the eye movements are not a necessary part of the treatment.

Treatment for PTSD usually lasts 3 to 6 months. People who also have other psychiatric problems may need professional counseling, medicines and stress management. In these cases, treatment for PTSD could last 1 to 2 years or longer.

It is very common to have other disorders at the same time as PTSD. Psychiatric disorders that commonly occur along with PTSD include depression, alcohol/substance abuse, panic disorder and other anxiety disorders. In these cases, it is best to treat both PTSD and the other disorder(s) together rather than one at a time. The PTSD treatments described above also help with other disorders.

Therapists

Therapy is not easy. Talking about your traumatic experience or your symptoms can be difficult. Picking a therapist that you feel comfortable with is important. The first therapist you meet may not be right for you; do not hesitate to shop around.

Find a therapist who:

- respects you and your opinions.

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- does not get upset if you disagree with what he or she says, but instead encourages you to express yourself.
- never minimizes your experiences and always respects your feelings.
- does not push you to talk about things before you are ready.

When you start psychotherapy, you and your therapist together should decide what goals you hope to reach. Your therapist should also explain why he or she is choosing a specific treatment for you, how long he or she expects the therapy to last and how he or she will evaluate its effectiveness.



If you have any questions about your treatment, your therapist should be able to answer them. Do not forget that you and your therapist should work as a team to tackle your problems. There is no individual or quick “cure” for PTSD. Together, you and your therapist can use strategies that improve your quality of life.

Coping with PTSD

Recovery from PTSD is an ongoing, gradual process. Since PTSD symptoms don't always completely disappear, it is usually a continuing challenge to cope with PTSD symptoms. You will learn how to cope more effectively through treatment.

You can help yourself by:

- learning about trauma and PTSD. This will help you recognize that you are not alone, “weak” or “crazy.”
- talking to family, friends and doctors about your feelings and symptoms.
- using relaxation techniques, such as meditation, yoga, exercise and prayer.

You can also get more involved in your work or community. This can help take your mind off the traumatic event that triggered PTSD.



You should not turn to alcohol or drugs to escape the memory of a trauma. You need to remember that you are more prone to anger and try to avoid anger-triggering situations.

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You and your family members should be aware that PTSD or the depressive disorders that might come with it may lead to suicidal thoughts. You or your loved ones should tell healthcare professionals about even the smallest sign of such thoughts.

You should follow up with your healthcare providers regularly. If a coping strategy no longer helps you, a healthcare provider may be able to suggest a more effective one. Keeping in touch with healthcare providers goes a long way in finding a coping strategy that works best.

Conclusion

PTSD is a very common anxiety disorder that can develop after a traumatic event involving physical harm or the threat of physical harm.

People with PTSD cannot stop thinking about the traumatic event. They also experience emotions associated with the event, such as fear or anger. In many cases, people with PTSD relive the event repeatedly, have difficulty sleeping and are unable to trust others or enjoy activities that brought them pleasure before the event.

Luckily, treatment options are available to help you cope with PTSD. Finding a therapist that is right for you is important. Working as a team, you and your therapist can find coping strategies that allow you to have a productive and happy life.



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