

PTSD

Post-traumatic stress disorder is a condition that is triggered by a terrifying, or traumatic, event and involves intense, disturbing thoughts and feelings related to the traumatic event, long after the traumatic event has ended. A diagnosis of PTSD requires both *exposure* to a traumatic event and *symptoms* in response to that event.

Exposure

- Direct exposure to the trauma
- Witnessing a traumatic event that is happening to someone else
- Learning that a close family member or friend has had traumatic experience
- Repeated or extreme exposure to details of traumatic events in person or via work-related information (e.g., paramedics viewing violent injuries, trauma workers repeatedly hearing details of abuse)

Symptoms

- **Intrusion Symptoms (at least one of the following)**
 - Recurrent, involuntary, distressing memories of the trauma
 - Recurrent, distressing dreams related to the trauma
 - Flashbacks of the trauma or other dissociative reactions
 - Intense or prolonged distress in response to trauma reminders
 - Marked physiological reactions to trauma reminders
- **Avoidance Symptoms (at least one of the following)**
 - Avoidance of or attempts to avoid internal trauma reminders (e.g., memories, thoughts)
 - Avoidance of or attempts to avoid distressing external trauma reminders (e.g., people, places, activities)
- **Negative Cognition/Mood Symptoms (at least 2 of the following)**
 - Amnesia for important parts of the trauma event
 - Persistent, exaggerated negative beliefs about self, others, or the world

- Persistent, distorted trauma-related thoughts leading to inappropriate blame of self or others
- Persistent negative emotional state (e.g., fear, horror, anger, guilt, shame)
- Loss of interest or participation in significant activities
- Detached/feeling distant from others
- Persistent loss of positive emotions (e.g., happiness, love)
- Hyperarousal Symptoms (at least two of the following)
 - Irritability and anger outbursts with little or no provocation
 - Reckless or self-destructive behavior
 - Hypervigilance or being on guard
 - Exaggerated startle response
 - Concentration problems
 - Sleep difficulties

Symptoms must be present for more than one month, must cause significant distress, and must negatively impact social, occupational, or other functioning.

Things to Consider

We all respond differently to traumatic events. Some individuals show symptoms of PTSD immediately after an event, but symptoms resolve quickly and are no longer present after a few months. Some individuals may seem to show no difficulties after a traumatic experience but develop symptoms of PTSD months or even years later. Developing PTSD after a trauma is *not* a sign of weakness; it is your brain and body responding to something that happened to you.

Factors that increase the risk of developing PTSD include: experiencing intense or long-lasting trauma, having experienced trauma early in life (e.g., abuse in childhood), having a job that increases exposure to traumatic events, not having a healthy support system of family and friends, and having a family history of PTSD.

Individuals who experience PTSD often also experience other conditions, including depression, generalized anxiety, and substance use disorders. For many people, treating the PTSD can lead to significant improvement in these other areas as well.

While PTSD symptoms can be chronic, even lasting years, many individuals with PTSD return to full functioning in their daily activities, including their employment.

Treatment

There are effective treatments for PTSD, including medication and therapy. Because PTSD is complex, and each person's experience with PTSD is different, research regarding whether medication or therapy is best for treating PTSD has been unclear. While medication can be helpful, and at times is absolutely necessary, it appears that trauma-based therapy can yield longer-lasting results for many people; certainly, treatment that combines both medication and trauma-based therapy is likely to be important. Trauma-based therapy helps an individual understand their trauma and how it impacts their physical, mental, and emotional well-being; it also helps them learn strategies for coping with

Unfortunately, the very nature of PTSD (overwhelming emotional and physical responses to memories and thoughts about an event) makes it difficult for many people to seek help. It is not uncommon for people with PTSD to rely heavily on avoidant strategies for coping; they hope that avoiding anything related to the trauma, including talking about it, will bring them relief. It is true that talking about traumatic experiences can be very upsetting, and it is not pleasant to relive those memories; but avoidant strategies do not work long-term and can lead to more severe and more chronic symptoms. Trauma-based therapy can help them manage memories, thoughts and feelings so that they are less disruptive to daily life.

If you struggle with troubling behavior, thoughts, or feelings related to experiencing a trauma, please know that there is hope. If available, talk to your physician, contact your local community mental health clinic, or seek a therapist; if you do not have access to these things, continue seeking information from reliable sources on the internet or via books on Amazon or from your local library.

If you are experiencing suicidal ideations, DIAL 988 (the National Suicide Prevention Lifeline) to call, text, or chat with a trained counselor.