

3900 West Brown Deer Road, Suite 200
Brown Deer, WI 53209
Phone: 414.540.2170 • Fax: 414.540.2171
www.shorehavenbhi.com

POST-TRAUMATIC STRESS DISORDER



PTSD

Posttraumatic Stress Disorder (PTSD) is a reaction which often occurs when a person has been exposed to extreme stress, trauma, or painful experiences. In other words, the person has experienced or witnessed actual or threatened bodily injury or some other extreme situation.

The reaction includes these major features:

- Re-living or re-experiencing the event, often so vividly that it seems to have happened just yesterday. Perhaps the re-experiencing comes as a flashback, so real it feels as if it were happening now.
- ✓ Intrusive images of the event invade the mind often at unexpected moments, or when the person wants to rest. The images may come a dreams or nightmares.
- ✓ Hyper-vigilance, meaning the person is jumpy, startles easily, or is on the alert for danger, as if the event were going to happen again. The person may feel unsafe and expect to be harms again.

STRESSORS

The stressor may be a one-time event, such as an assault, a car accident, a natural disaster, such as a tornado, or being witness to a horrific event.

Or the stressor may be a long-term repeated series of events, such as being raised in a home where there is physical, sexual, or emotional abuse.

Any such events may intrusively flood the mind years later.

Some common PTSD stressors include:

- Serious motor vehicle, airplane, or boating accident
- 2. Industrial accidents
- Disasters (tornadoes, hurricanes, flood, fires)
- 4. Robbery, mugging, or a shooting
- 5. Military combat (in fact, PTSD was formerly known as "shell shock" or "war neurosis")
- 6. Rape, incest, child sexual abuse, verbal abuse, physical abuse, or neglect
- Being a refugee from a war area
- Assault and rape are the most common traumata in women.
- ✓ Women with substance abuse problems have a high rate of PTSD.



- ✓ Avoidance of reminders of the event or situations such as the one where the event took place. The person may try to avoid thinking about the event or having any feelings.
- ✓ Numbing of emotions, feeling distant.

PTSD can occur rapidly after the trauma. It can be DELAYED, meaning the symptoms do not occur until some reminder of the trauma occurs, sometimes years later!

COMPLEX PTSD occurs when the traumata are numerous, permanently change what a person thinks of herself, and create prolonged depressed mood.

PTSD is associated with an increased risk of depression, panic attacks, phobia, and substance abuse.

At any one time, an estimated 1 percent to 3 percent of all Americans suffer from full-fledged PTSD, with an additional 5 percent to 15 percent having milder forms of the illness.

Although PTSD can develop in trauma victims of any age, the disorder tends to strike young adults more often than any other group. PTSD is common in people who use drugs or drink excessively because they are more often in troubling or dangerous situations.



Untreated PTSD can be a chronic condition which gets more severe or less severe at different times over the years. It is not unusual for a rape victim, for example, still to feel emotional pain 2-3 decades after the event.

People with PTSD are at high risk for other emotional and behavioral problems, including substance abuse, anxiety disorders, and depression.



If you experience a distressing event, talking to a therapist afterwards may prevent the development of PTSD. For that reason, trauma and grief counselors are sent to the site of industrial accidents, school shootings, and other such events. Critical Incident Stress Debriefing [CISD] is a form of prevention counseling which occurs at the site of a trauma which affects a large number of people. The goals of CISD is to prevent the development of PTSD.

<u>Does Medication Help?</u> Medication can reduce the severity of the symptoms. We no longer sedate people after a trauma. Certain antidepressants which increase the brain chemical serotonin may reduce symptoms of PTSD. These include sertraline (Zoloft), which is approved for PTSD, paroxetine (Paxil), fluoxetine (Prozac), and citalopram (Celexa). Antianxiety drugs, such as buspirone (BuSpar), diazepam (Valium), alprazolam (Xanax), clonazepam (Klonopin), and lorazepam (Ativan), *may* relieve the anxiety component of PTSD. Drugs do not cure PTSD.

<u>Psychotherapy.</u> Psychotherapy can help you see how reliving the trauma is structuring your life. It can help restore a sense of control in your life. You can learn new coping skills. You can change the thoughts and beliefs which are shaped by the trauma.

Psychological procedures can help desensitize stimuli that were reminding you of the trauma so you won't be sensitive to them anymore. Because the trauma can alter one's identity and self-worth, it may take considerable time to repair the psychic damage, including any associated depression.

But often, the effects of a single traumatic event can be resolved quickly using a therapy known as EMDR (eye-movement desensitization and re-processing) or a CBT (cognitive behavioral therapy) procedure known as "prolonged exposure." Due to extensive research and high levels of effectiveness, EMDR and CBT are two approaches which approved for treating trauma.

The psychotherapies for PTSD include:

Behavior Therapy - changing the symptoms by using Relaxation therapy to reduce anxiety, Breath Training to prevent arousal of anxiety, and Thought Stopping to interrupt the disturbing thoughts.

Cognitive Behavioral Therapy - changing the thought patterns which have been produced by coping with the trauma. Cognitive Behavioral Prolonged Exposure Therapy - Concentrating on the memories and stimuli associated with the trauma until the anxiety is reduced.

Eye Movement
Desensitization and
Reprocessing [EMDR] - The
memories, thoughts, and
emotions associated with the
trauma are brought to mind,
and, while you concentrate on
the experience, the therapist will
stimulate the left and right sides
of your brain by having you



move your eyes. This activity stimulates the brain to change the emotions associated with the memory, so that the distress connected with it stops. In the photo, a woman is watching lights go back and forth on the bar while she listens to tones which are synchronized with the lights.

Outcome. EMDR resolves symptoms of PTSD nearly completely in 80 to 85% of patients in about 2-8 weeks. Although they may take longer, other therapies reduce symptoms completely or to a mild level in 70% of patients. Sertraline (Zoloft) reduces symptoms by about 50% in 3 months, and many symptoms are resolved by 9 months.

<u>Children.</u> Children do very well in treatment for trauma. Because they are vulnerable and young, trauma can affect them deeply and for many years. Many traumas of childhood, including abuse, neglect, rape or sexual abuse at an early age, and verbal abuse, shape



children's lives forever,. Sometimes, experiences with an alcoholic parent can trigger PTSD-like reactions. Sadly, early experiences can undermine a child's sense of self-worth. On the other hand, children respond well to EMDR, to Art Therapy, and to Family Therapy. Children do best when they feel their parents protect them from harm, listen and believe them, and provide comfort for their anxieties and fears.

PROTECTIVE FACTORS

Not everyone exposed to a 'traumatic' experience will develop PTSD. A simple rule of thumb is 1/3 of people will be relatively unscathed by such an event. About 1/3 will develop PTSD or some of its symptoms. About 1/3 will be in the middle, with mild effects. Looking at factors which cause people to be more resilient in the face of a traumatic event, we see a few factors which protect against PTSD:

- ✓ previous, effective experiences coping with difficult circumstances
- preparation and rehearsal for managing a difficult event
- a community which comes together to support victims of trauma, with people working together to overcome the impact
- ✓ feeling one is protected from further harm and is safe, since loss of safety is common in trauma

First responders and military veterans often develop PTSD despite their training. Despite protective factors, some traumatic experiences are so severe that they could cause anyone to develop PTSD.

The key points are

- ★ Anyone could develop PTSD. There is no shame in that.
- ★ PTSD can mask itself as substance abuse, anxiety, phobia, or depression.
- ★ PTSD is treatable. You can improve.
- ★ Find a therapist with specialized training in traumatic disorders, such as therapists who know EMDR or prolonged exposure or traumafocused cognitive behavioral therapy.

Shorehaven

BEHAVIORAL HEALTH, INC. Phone: 1-414-540-2170

Fax: 1-414-540-2171 3900 W. Brown Deer Road

3900 W. Brown Deer Road Brown Deer, Wisconsin 53209 3 Milwaukee area locations

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