



# Patient Information

## Confronting Posttraumatic Stress Disorder

**W**hen a person experiences a traumatic event that causes or threatens to cause serious physical harm and that makes the person feel extremely afraid, helpless, or horrified, effects can linger even after the danger has passed. While most people are able to recover from these events, physically and emotionally, in a relatively short time, some experience more lasting problems. This is known as posttraumatic stress disorder, or PTSD.

Many types of trauma can trigger PTSD, including military combat, serious accidents, rape, physical or sexual abuse or assault, natural disasters, and terrorist incidents. People who develop PTSD experience significant distress—at home, in social situations, or at work—and are unable to function normally in their daily lives for an extended period of time. The disorder is believed to affect more than five million American adults each year and almost one third of adults who have spent time in war zones.

Although the symptoms of what is now called PTSD have been observed in combat veterans for hundreds of years, there was little research into the disorder until after the Vietnam War. As a result, many questions about PTSD remain unanswered. For example, while the disorder is known to alter brain functions related to fear and stress, researchers continue to investigate the ways in which it does so.

### How do I know if I'm at risk?

Certain kinds of trauma situations—such as those that are particularly severe or

long lasting, that involve sexuality or betrayal, or for which you feel you are at least partly responsible—may be particularly likely to result in PTSD. Therefore, if you have been exposed to such a trauma, your risk of developing the disorder is greater. In addition, you may be more likely to develop PTSD if you have been diagnosed with another mental health condition (such as anxiety disorder), if a family member has had PTSD or another mental health condition, if you drink a lot of alcohol or take drugs, if you have experienced physical or sexual abuse in the past, or if you don't have people close to you who can support you.

Although PTSD can affect a person of any gender, age, or cultural group who has experienced a traumatic event, it is about twice as common in women as in men.

### What are the warning signs?

The signs and symptoms of PTSD usually begin within three months after a trauma, but they sometimes begin years later. They fall into one of three categories: intrusion, avoidance, and arousal.

Intrusion symptoms are ways in which a past trauma intrudes on your current life. These symptoms include nightmares, repeated and distressing thoughts, and flashbacks (which are intense and vivid images of a trauma that are sometimes mistaken for reality). They also include the intense psychological reactions (fear, sadness, and anxiety) and physical reactions (rapid heartbeat, headache, and dizziness) that can be triggered by reminders of a trauma, such as the place where the

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trauma occurred or the anniversary of its occurrence.

Signs of avoidance include staying away from conversations, activities, places, or people that trigger memories of a trauma. Avoiding the trauma, either consciously or unconsciously, can lead to a loss of interest in activities that used to bring enjoyment, a feeling of separation from friends and loved ones, difficulty in feeling emotions (such as love), and sometimes, an inability to remember an important aspect of a trauma experience.

Arousal symptoms have to do with a constant feeling of being threatened or provoked. This aroused state can cause you to feel irritable, angry, and jumpy and to have difficulty concentrating and sleeping.

Children with PTSD may show signs of delayed development, such as a slow progression of language skills or the skills involved with toilet training. Older children might reenact the trauma or have frightening dreams that they do not understand.

### What tests do I need?

Your doctor will ask you about your symptoms, including how often they occur and how long you have been having them, and your past trauma experiences. He or she also may perform a physical exam or other tests to rule out other possible causes of your symptoms.

### How can I avoid the problem?

Talking with a mental health professional soon after a trauma can help you deal with the extra stress caused by the event and possibly prevent PTSD from developing. Talking with friends and family about the trauma also may help. People who have strong social support systems are believed to be less likely to develop PTSD.

### How is it treated?

Education about PTSD, for both you and your family members, is considered an important part of treatment. After this step, your doctor may recommend talk therapy with a mental health professional (or counselor), medication, or both.

Several types of talk therapy are used to treat PTSD—many of which fall under the category of *cognitive-behavioral (cog-nut-ihv-bih-hay-vyur-al)* therapy, or CBT. The goal of CBT is to help you change your thought patterns and, thus, the emotions and behaviors connected with a trauma. Some experts recommend a form of CBT called exposure therapy, in which a counselor encourages you to reimagine your trauma repeatedly under controlled conditions as a way of learning to cope with it. Group therapy enables you to discuss your trauma with others who have had similar experiences, and family therapy can help you and your loved ones cope with PTSD as a family unit.

The main type of drug used to control many of the symptoms of PTSD is a class of antidepressants called selective *serotonin (sir-uh-toe-nun)* reuptake inhibitors. Other drugs might be prescribed to help you sleep or to ease excessive anxiety. Your doctor will monitor you closely for unwanted effects of these medications.

For more information about the disorder, visit the VA National Center for PTSD web site ([www.ncptsd.va.gov](http://www.ncptsd.va.gov)). ●

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7 Century Drive, Suite 302  
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