



Post Traumatic Stress Disorder (PTSD)

Teresita McCarty		

Definition and Introduction

A trauma is a wound to the body or the spirit. Traumatic events are those that are injurious, dangerous, shocking, frightening or emotionally overwhelming. Physical and emotional reactions to traumatic events can vary widely in severity and may appear immediately or may be delayed for years. Post traumatic stress disorder (PTSD) is only one of the many emotional reactions associated with traumatic events but it is the one many people have heard about.

Traumatic Events

Natural disasters (such as earthquakes, forest fires, hurricanes, and floods) war, violent crimes, accidental injury, a sudden death, and physical, sexual and emotional abuse are all traumatic events. The impact of any one event varies widely depending on the affected person's developmental stage, coping skills, support system and prior exposure to traumatic events. The developmentally disabled are more likely to experience traumatic events than the general population. They are particularly vulnerable since they may be more dependent on others for their basic needs and they may have more limits on their ability to communicate their experiences.

Symptoms

Both physical and emotional symptoms may appear after traumatic events. Common physical symptoms include difficulty sleeping, feeling tired, headaches and stomachaches. Common emotional symptoms may include: intrusive thoughts and images about the traumatic events, efforts to avoid reminders of the events, feeling worried, jumpy, anxious, or disconnected from the ordinary world, and memory gaps.

Diagnosis

There are many illnesses that have their start or get worse after traumatic events. People who have been doing very well in life may experience a major change in functioning after a traumatic event. People who ordinarily tend toward worry or sadness may develop anxiety or depression that would benefit from treatment after exposure to trauma. Acute stress disorder appears immediately after a traumatic event and PTSD appears somewhat to much later. PTSD symptoms may include nightmares or flashbacks to the traumatic events, and feeling numb with decreased responsiveness to ordinary life situations. The person may be on edge, seem excessively watchful, have angry outbursts, and difficulty sleeping. PTSD symptoms are particularly confusing to observers since the person who is suffering seems too calm at some times and too upset at others.

Treatment

There are many treatment options for traumatic stress disorders. The major treatment categories are various types of psychotherapy and medication. Expressive and activity therapies such as art, dance and music therapy allow meaningful emotional expression and symptom transformation. Behavior therapy focuses on finding and changing negative thought patterns and distorted beliefs that may reinforce fears or behavior that are not appropriate when the trauma has ended. Other verbal therapies such as psychoeducation and discussion groups can be very helpful for those who are able to participate.

Medication can help control the fear, sadness, hypervigilance and numbing that may result from trauma. Antidepressant medications are often particularly helpful in controlling the depression and anxiety symptoms.





What might you do to help?

- Immediately report any ongoing abuse
- Always provide respectful treatment and extend common courtesy
- Alert client before loud noises, sudden movements or unexpected touch
- Make extra efforts to identify, explain and prepare client for painful, intrusive or intimate touch
- Intermix quiet, relaxing intervals, such as listening to music, with dynamic focused activities like walking or doing a chore
- Provide non-threatening touch activities like swimming, folk dancing
- Encourage creative projects that commemorate and transform the trauma
- Request a medication evaluation

References and Links

American Psychiatric Association 1400 K Street, N.W. Washington, DC 20005 202-682-6000 http://www.psych.org/public_info/PTSD~1.HTM

Anxiety Disorders Association of America, Inc. 11900 Parklawn Drive, Suite 100 Rockville, MD 20852-2624 301-231-9350

The Arc
National Headquarters
1010 Wayne Ave., Suite 650
Silver Spring, MD 20910
301-565-3842
301-565-5342 (fax)
info@thearc.org (e-mail)

info@thearc.org (e-mail)

International Society for Traumatic Stress Studies 60 Revere Drive, Suite 500 Northbrook, IL 60062 847-480-9028

National Center for PTSD VA Medical Center (116D) White River Junction, VT 05009 802-296-5132

National Institute of Medical Health – Public Inquiries 6001 Executive Blvd., Room 8184 MSC 9663 Bethesda, MD 20892-9663 301-443-4513 FACTS ON DEMAND: 301-443-5158

National Organization for Victim Assistance 1757 Park Road, N.W.





Washington, DC 20010 202-232-6682

	National	Resource	Center on	Child	Maltreatment
--	----------	----------	-----------	-------	--------------

1349 W. Peachtree Street, NE, Suite 900

Atlanta, GA 30309

404-881-0707

The National Task Force on Abuse and Disabilities

P.O. Box "T"

Culver City, CA 90230

310-391-2420

abuses@soca.com

The National Committee to Prevent Child Abuse

332 S. Michigan, Ave., Ste. 1600

Chicago, IL 60604

800-555-3748

Teresita McCarty