

Post Traumatic Stress Disorder

Post Traumatic Stress Disorder (PTSD) is the only popular mental health disorder that is diagnosed by how the victim acquires it, not by just the symptoms. This makes the disorder relatively easy to diagnose, but it remains difficult to treat. PTSD symptoms are acquired by a person being exposed to a horrific event, where they feel intense fear. Next, the person experiences memories of the horror that affect them intensely either sometimes or all the time. PTSD is a serious mental health concern born out of subjective perception; it depends on how the person experiences, or internalizes the horrific event that leads to the degree of severity. Approximately 9% of the general population are diagnosed with PTSD, with females being diagnosed slightly more than males due to assaults.

If you have not heard of PTSD, you will as time goes on. U.S. military research suggests that the current wars are creating a new generation of veterans with PTSD. PTSD is a relatively newly recognized mental health disorder; it has been officially recognized for only two recent decades. But PTSD certainly not a new concept. For nearly 100 years it was referred to as shell shock, war neurosis, battle fatigue, and combat exhaustion, to name a few. For nearly 80 years, PTSD symptoms were not officially recognized as a medical problem. Today, approximately 15% of the veterans returning from the Afghan and Iraq wars meet the criteria for PTSD, and the government and medical communities are taking it very seriously.

Some of the basic, popular symptoms of PTSD include *avoidance*, *numbing*, *re-experiencing*, and *hyperarousal*. Avoidance, or avoiding the issue, is a traumatized person's way of ineffectively dealing with the horrific event. They attempt to ward off remembering the trauma by not speaking of it and trying not to remember it. Popular ways of avoidance include alcoholism and other substance abuse issues. Numbing is a common symptom where the person becomes emotionally numb to most life issues, especially any issues that remind them of the trauma. This is typically an unconscious, ineffective way of protecting their feelings from any further trauma. Re-experiencing is a negative symptom where the person, as much as they might try not to, re-lives the trauma mentally through unwanted negative thoughts, feelings, or dreams. These people may never feel safe in their lives. Lastly, hyperarousal is an extreme alertness of imagined fear. Some other symptoms that come from hyperarousal are irritability, insomnia, poor concentration, and always "on-guard".

Military personnel are the most at-risk populations for exposure to traumatic events and for the development of PTSD. But PTSD is a

condition that more civilians get than military personnel, because there are significantly more civilians in the U.S. Many people are exposed to traumatic events, like combat, natural disasters, sexual assault, and other physical abuses. But only some people develop PTSD. Research suggests that a person is at more risk for PTSD due to the circumstances of the horrifying event, and the length of the horrifying event. For example, a car crash can be horrifying, but there are degrees of seriousness in car crashes. A fender bender can strike fear in our hearts. But a car crash where a person is seriously injured and awake during the whole crash and rescue can lead to PTSD more readily.

The loss of a car is one thing, the loss of a home or entire community, as in hurricane Katrina disasters, are much more potentially damaging to the mind and soul. Fear, guilt, disgust, anger, and sadness are normal emotions that come as a result of a horrifying event. In fact, some therapists argue that many negative reactions to trauma are normal, and the development of PTSD is simply a *failure to recover*. But some horrifying events, such as witnessing murder or becoming sexually abused may never allow a person to feel safe again. Getting a traumatized person back to functioning may take a very long time, involving much patience and professional help. Sometimes, the person with PTSD feels guilty as a survivor of the trauma. The mother that survives a car crash may feel enormous guilt for surviving while her child did not, even though the crash was not her fault.

In addition to the severity of the trauma and time exposed to the trauma, researchers have found other risk factors that contribute to the development of PTSD. A popular risk factor for developing PTSD is lack of social support; traumatized people who believe they are alone and don't reach out to loved ones and/or professionals are much more likely to develop symptoms. Current life stressors are also a major factor in the development of PTSD; because both good and bad things continue to occur in traumatized people's lives, negative events can be big contributors to PTSD. A person who experiences a trauma, then experiences a loss such as a divorce, is more likely to develop PTSD. A last popular contributor is previous child abuse; a woman is much more likely to experience negative symptoms of PTSD if she was abused as a child.

There is much more to PTSD, but it is not all bad. The good news is PTSD can be successfully treated by an experienced therapist. Cognitive behavioral therapy is the preferred choice of therapy by most experts in the field, and results have been proven quite effective. With the assistance of a therapist, clients can understand and come to terms with their PTSD symptoms. Later, a plan can be designed on how to change the client's life

for the better. Sometimes, medications are recommended because they can help with the process of recovery. The most popular medications for treatment of PTSD symptoms are antidepressants.

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