

## Understanding Posttraumatic Stress Disorder

Posttraumatic stress disorder (PTSD) is a major psychiatric disorder that may occur when a person experiences or witnesses a traumatic, often life-threatening event. Examples of common traumatic events that may cause PTSD are combat, sexual abuse, assault or rape, accidents, natural disasters, and the sudden, unexpected death of a loved one. People with PTSD experience high levels of anxiety, arousal, and avoidance due to recurrent memories of the traumatic event.

It is not clear why some people develop PTSD after a trauma and others do not. Theories suggest that both learning and biological factors may contribute to the cause of PTSD. The number of traumas a person experiences is also important. The effects of repeated traumas may be cumulative and result in increased severity of symptoms. From 1% to 10% of people develop PTSD at some point in their lives.

PTSD may develop anytime in a person's life, after experiencing a traumatic event. For some people, the symptoms of PTSD gradually disappear over weeks or months, but for other people they may get worse over time. With treatment a person may fully recover from PTSD, although some people may continue to experience symptoms after treatment.

PTSD is diagnosed with a clinical interview. The interviewer checks to see whether the person has experienced specific symptoms for more than a month.

PTSD is a major psychiatric illness  
that is diagnosed with a clinical interview.  
PTSD occurs in 1–10% of people at some point in their lives.

### SYMPTOMS OF PTSD

PTSD is diagnosed based on the presence of three types of symptoms: reexperiencing the trauma, avoidance of stimuli associated with the trauma, and increased arousal. People do not have to have all of the following symptoms to be diagnosed with PTSD, but they need to have at least some of each type of symptom.

#### Reexperiencing the Trauma

- Recurrent nightmares of the event
- Recurrent and intrusive memories of the event
- Distress at events that are reminders of the trauma
- Suddenly acting or feeling as if the event were recurring

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### Avoidance of the Stimuli Associated with the Trauma

- Efforts to avoid thoughts, feelings, situations, or activities that trigger memories of the trauma
- Feeling detached or estranged from others
- A sense of foreshortened future
- Inability to recall an important aspect of the trauma
- Diminished interest in significant activities

### Increased Arousal

- Hypervigilance (e.g., always “looking over one’s shoulder”)
- Increased arousal in situations that remind the person of the trauma
- Difficulty sleeping
- Difficulty concentrating
- Exaggerated startle response
- Irritability or anger outbursts

Common symptoms of PTSD include:

- Reexperiencing the trauma
- Avoidance of stimuli associated with the trauma
- Feeling emotionally numb
- Overarousal

### FREQUENTLY ASSOCIATED SYMPTOMS

People with PTSD often experience other psychiatric symptoms, although these are not among the symptoms used to diagnose PTSD. Depression is a very common problem. Some people may experience *hallucinations* (hearing, seeing, feeling, or smelling things that aren’t there) or *delusions* (unusual beliefs that other people don’t have—for example, persecutory delusions) related to their traumatic experience.

### SIMILAR PSYCHIATRIC DISORDERS

PTSD shares some symptoms with other psychiatric disorders. The anxiety, anger, and overarousal of PTSD may seem like the mania of bipolar disorder. Some of the symptoms of PTSD may overlap with those of schizophrenia or schizoaffective disorder. For example, people with PTSD may reexperience the trauma to the point of hallucinations. Their avoidance of people who remind them of their trauma may lead to social withdrawal, and their emotional numbing may resemble the blunted (or flattened) affect often present in schizophrenia or schizoaffective disorder. People with PTSD may also experience symptoms of major depression or obsessive-compulsive disorder. A person may have PTSD and also one of these other disorders, or the symptoms may only be related to the traumatic event.

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## TREATMENT

Several different treatments are effective for people with PTSD. *Behavior therapy* is a very effective treatment approach for PTSD. Two types of behavior therapy are used to treat PTSD: *exposure therapy* (also called *flooding*) and *cognitive restructuring* (also called *cognitive therapy* or *cognitive processing therapy*). In exposure therapy, the client is helped to confront feared memories and safe situations that remind him or her of the trauma, rather than avoiding them, in order to learn that feared memories and situations cannot hurt him or her. In cognitive restructuring, the client is helped to challenge distorted beliefs about him- or herself and the world that are related to the trauma in order to develop more realistic and cognitive beliefs. Behavior therapy for PTSD may involve exposure therapy, cognitive restructuring, or a combination of the two.

In addition to behavior therapy, medication and supportive counseling may improve the symptoms of PTSD. Antidepressant and antipsychotic medications can decrease symptoms. Supportive counseling, in which the person can talk about feelings and get help resolving problems, can also be helpful.

There are several treatments for PTSD, which include:

- Behavior therapy
- Supportive counseling
- Medication

## FURTHER READING

- Foa, E. B., Keane, T. M., & Friedman, M. J. (Eds.). (2000). *Effective Treatments for PTSD*. New York: Guilford Press.
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- Schiraldi, G. R. (2000). *The Post-Traumatic Stress Disorder Sourcebook: A Guide to Healing, Recovery, and Growth*. Los Angeles, CA: Lowell House.