

POSTTRAUMATIC STRESS DISORDER (PTSD)

Traumatic events—such as an accident, assault, military combat or natural disaster—can have lasting effects on a person’s mental health. While many people will have short term responses to these life-threatening events, some will develop longer term symptoms that can lead to a diagnosis of Posttraumatic Stress Disorder (PTSD).

A diagnosis of PTSD requires a discussion with a trained professional. Symptoms of PTSD generally fall into these broad categories:

- **Re-experiencing type symptoms**, such as recurring, involuntary, and intrusive distressing memories, which can include flashbacks of the trauma, bad dreams, and intrusive thoughts.
- **Avoidance**, which can include staying away from certain places or objects that are reminders of the traumatic event. A person might actively avoid a place or person that might activate overwhelming symptoms.
- **Cognitive and mood symptoms**, which can include trouble recalling the event and negative thoughts about oneself. A person may also feel numb, guilty, worried, or depressed.

Arousal symptoms, such as hypervigilance. Examples might include being intensely startled by sounds, smells or situations that resemble the original trauma, and trouble sleeping or outbursts of anger.

PTSD can occur at any age and is directly associated with exposure to trauma. Most people who are exposed to trauma will not experience PTSD. There are risk factors that can increase a person’s likelihood to develop PTSD including prior experiences of trauma, and limited social support. Young children can also develop PTSD, and the symptoms are different from those of adults. Behaviors (e.g. clinging to parents) are often a better clue than words, and developmental achievements might slip back (e.g. toileting accidents for a child who previously mastered that skill). It is essential that a child be assessed by a professional who is skilled in the developmental responses to stressful events. A pediatrician or child mental health clinician can be a good start.

For some, our “fight-or-flight” biological instincts, which can be lifesaving during a crisis, continue after the traumatic event has ended and all our physical resources and energy remain focused on getting out of harm’s way. PTSD is a consequence of our body’s inability to effectively return to “normal” in the months after the initial traumatic event.

Diagnosis: Symptoms of PTSD usually begin within three months after experiencing or being exposed to a traumatic event. Occasionally, symptoms may emerge years afterward. For a diagnosis of PTSD, symptoms must last more than one month. Symptoms of depression, anxiety or substance use often accompany PTSD.

Treatment: Though PTSD cannot be cured, it can be treated and managed in several ways including individual or group therapy, medications, calming practices and prayer, and the use of service animals, especially dogs.

DEAR GOD, SPEAK GENTLY IN MY
SILENCE. WHEN THE LOUD OUTER
NOISES OF MY SURROUNDINGS AND
THE LOUD INNER NOISES OF MY FEARS
KEEP PULLING ME AWAY FROM YOU,
HELP ME TO TRUST THAT YOU ARE
STILL THERE EVEN WHEN I AM UNABLE
TO HEAR YOU.

Henni Y. M. Nouwen