

Posttraumatic Stress Disorder

By Jeff Dwarshuis LMSW, ACSW

Posttraumatic Stress Disorder (PTSD) is a severe mental health problem that can happen to anyone at any age at any time. The origin of PTSD starts with an individual either witnessing or enduring something that is horrific beyond what is typically experienced by a person. Common examples of people with PTSD are war vets, firefighters, victims of domestic violence, people who have been robbed, abducted and children who have been abused. In the workplace, PTSD can happen in many ways but commonly will occur through witnessing an accident or being a part of an accident.

PTSD and Integrated Memory

In order for a negative memory to pass it must go through a process called integration. This means that the mind fully internalizes the memory and makes it an old memory. For example, if someone goes through a typical negative experience it initially will impact the person's feelings, self concept and related body sensation. Once the memory is integrated, those negative associations disappear and the memory is simply an old memory. If someone experiences a traumatic memory, the mind is not able to fully integrate the memory leaving the person to constantly reexperience the negative thoughts, feelings and body sensations. It is as if people were not made to take experiences that are too negative. This is the beginning of the development of PTSD. Without treatment, this problem could remain for a lifetime.

Symptoms of PTSD

The following symptoms are taken from the DSM (The Diagnostic and Statistical Manual of Mental Disorders.) Only a limited number of symptoms need to exist to make the diagnosis.

1. Exposure to or witnessing an event that is horrific beyond what is typically endured by a person. (All PTSD cases have this symptom.)
2. The person experiences intrusive thoughts or flashbacks of the event(s).
3. The person has nightmares about the event(s).
4. The person feels as if the event(s) is continuing to happen.
5. The person has emotional overwhelm when reminded of the event(s).

6. The person has physical reactions when reminded of the event(s).
7. The person avoids thoughts and feelings about the event(s).
8. The person cannot recall all of the event(s).
9. The person withdraws from others.
10. The person does not experience the peaks of good or bad emotions.
11. The person believes they will not live long or have a good and productive life.
12. The person has sleep disturbance, hyper vigilance and extreme anger.

For the outside observer, symptoms of PTSD are not very obvious. Many of the symptoms listed above can be recognized if the individual discusses the trauma. However, the person with PTSD generally wants to avoid the thoughts and feelings related to the trauma(s) and does not discuss the memories or seek therapy. The individual will, however show distinct negative behaviors. First, the person will almost always show symptoms of depression and anxiety. Second, people with PTSD tend to want to be alone and will withdraw from others. Third, the person has extreme outbursts of anger and can be set off by only very minor things. Lastly, people with PTSD often times will abuse substances. In fact, more people will actually seek treatment for the substance abuse than for PTSD.

Treatment for PTSD

Only in the past 15 years has psychotherapy been able to fully embrace and effectively treat PTSD. Studies have shown that group debriefing can be an effective way for people to become aware of the possibility of PTSD and it may decrease some minor symptoms. Cognitive Behavioral Therapy (CBT) also has been effective in treating PTSD. Eye Movement Desensitization and Reprocessing (EMDR) is a neurobiological intervention which integrates traumatic memory. Both CBT and EMDR have been shown to effectively treat PTSD. However EMDR is cited as being more effective in reducing symptoms for a greater amount of cases and in a significantly shorter amount of time.

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