

understanding



post-traumatic
stress disorder

Understanding post-traumatic stress disorder

This booklet is for anyone who experiences post-traumatic stress disorder (PTSD). It explains what PTSD is and the different types of treatment available. It also suggests ways you can help yourself, and what friends and family can do to help.

Contents

What is post-traumatic stress disorder (PTSD)?	4
What causes PTSD?	6
How can I help myself?	8
What treatments are available?	10
How can friends and family help?	14
Useful contacts	16

What is post-traumatic stress disorder (PTSD)?

If you are involved in or witness a traumatic event, it is common to experience upsetting, distressing or confusing feelings afterwards. The feelings of distress may not emerge straight away – you may just feel emotionally numb at first. After a while you may develop emotional and physical reactions, such as feeling easily upset or not being able to sleep.

This is understandable, and many people find that these symptoms disappear in a relatively short period of time. But if your problems last for longer than a month, or are very extreme, you may be given a diagnosis of post-traumatic stress disorder (PTSD).

There's no time limit on distress, and some people may not develop post-traumatic symptoms until many years after the event. Additionally, not everyone who has experienced a traumatic event develops PTSD.

Other terms for PTSD

The diagnosis 'PTSD' was first used by veterans of the Vietnam War, but the problem has existed for a lot longer and has had a variety of names, including:

- shell shock
- soldier's heart
- battle fatigue
- combat stress
- post-traumatic stress syndrome (PTSS)

Today, the term PTSD can be used to describe the psychological problems resulting from any traumatic event.

What are the symptoms?

The symptoms of PTSD can vary from person to person, although you may experience some of the following.

Reliving aspects of the trauma:

- vivid flashbacks (feeling that the trauma is happening all over again)
- intrusive thoughts and images
- nightmares
- intense distress at real or symbolic reminders of the trauma
- physical sensations, such as pain, sweating, nausea or trembling.

●● *I feel like I'm straddling a timeline where the past is pulling me in one direction and the present another. I see flashes of images and noises burst through, fear comes out of nowhere... my heart races and my breathing is loud and I no longer know where I am.* ●●

Alertness or feeling on edge:

- panicking when reminded of the trauma
- being easily upset or angry
- extreme alertness
- a lack of or disturbed sleep
- irritability and aggressive behaviour
- lack of concentration
- being easily startled
- self-destructive behaviour or recklessness.

●● *I'm always left shaking violently afterwards and drenched in sweat. I feel so ashamed of myself, yet I'm still too scared to look up for fear of what's there.* ●●

Avoiding feelings or memories:

- keeping busy
- avoiding situations that remind you of the trauma
- repressing memories (being unable to remember aspects of the event)
- feeling detached, cut off and emotionally numb
- being unable to express affection
- using alcohol or drugs to avoid memories.

●● *I started experiencing symptoms of PTSD after my boyfriend died. I suffered extremely vivid flashbacks that could happen at any time, anywhere, and were deeply distressing... I threw myself into another relationship very quickly to try and avoid how I was feeling, but then also would not express much affection to my new partner.* ●●

You may also develop other mental health problems, such as:

- severe anxiety
- a phobia
- depression
- a dissociative disorder
- suicidal feelings.

●● *I was also deeply depressed and experiencing huge amounts of anxiety, refusing to go anywhere alone or go near any men that I didn't know... [I] would lock my bedroom windows and barricade my bedroom door at night.* ●●

(See Mind's booklets *Understanding anxiety and panic attacks*, *Understanding phobias*, *Understanding depression*, *Understanding dissociative disorders* and *How to cope with suicidal feelings* for more information on these problems.)

What causes PTSD?

The situations we find traumatic can vary from person to person and different events can lead to PTSD. It may be that your responses have been bottled up for a long time after the traumatic event has passed. Your problems may only emerge months or sometimes years after a traumatic experience, affecting your ability to lead your life as you'd like to.

A traumatic event could include:

- a serious accident, for example a car crash
- an event where you fear for your life
- being physically assaulted
- being raped or sexually assaulted
- abuse in childhood
- a traumatic childbirth, either as a mother or a partner witnessing a traumatic birth
- extreme violence or war
- military combat
- seeing people hurt or killed
- a natural disaster, such as flooding or an earthquake
- losing someone close to you in disturbing circumstances.

👉👉 *I was mugged and then about a year later I was on the Tube when the police were trying to arrest someone who had a gun. In neither experience was I physically injured – although in the second one I thought I was going to die and that I was going to see lots of other people die.* 👉👉

The following factors may also make you more vulnerable to developing PTSD after experiencing a traumatic event, or might make the problems you experience more severe:

- experiencing repeated trauma
- getting physically hurt or feeling pain
- having little or no support from friends, family or professionals
- dealing with extra stress at the same time, such as bereavement or loss
- previously experiencing anxiety or depression.

Anyone can experience a traumatic event, but you may be more likely to have experienced one if you:

- work in a high risk occupation, such as the police or military
- are a refugee or asylum seeker
- have suffered childhood abuse.

Different types of trauma can have different types of impact. If you experienced trauma at an early age or if the trauma went on for a long time then you may be diagnosed with 'complex PTSD'. Treating 'complex PTSD' usually requires more long-term, intensive help than supporting you to recover from a one-off traumatic event.

●● *I was [...] having uncontrollable flashbacks, regularly felt suicidal. I was emotionally numb, kept people distant and was prone to drastic loss of self control and anger.* ●●

How can I help myself?

●● *I worried that I would never be able to go back to the job I loved. I worried that I would be stuck like this forever. Had I not been through it, I think I would find it hard to believe how real the whole thing was at the time. Having got through it, it has made me more hopeful about my ability to get through anything difficult – I got through PTSD, so I can get through anything!* ●●

After a traumatic event you may feel numb, dazed and disorientated. Many people find it hard to accept what has happened to them and you may behave as though nothing bad has happened. This response may allow you time away from the trauma and you may subconsciously be beginning to process what you've been through. When you feel ready, you may find the following ideas helpful.

Talk to someone close to you

Talking about your feelings, when you feel ready, may be a good way of coming to terms with the experience. You may turn to friends, relatives and colleagues, or seek professional help when you decide you do want to talk about what you've been through.

●● *The things that helped me while I was going through the worst of it [...] I took up running (which helped me sleep, as it seemed to 'clear' the excess adrenaline); talking to lots of my friends and my sisters, again and again; giving up sugar and alcohol (I was using them as masks for my erratic behaviour).* ●●

Talk to people with similar experiences

It may be very helpful for you to share your experiences with others who have been through something similar. This can be an extremely important step in moving away from isolation and towards regaining control of your life. Organisations such as First Person Plural can support you if you experience a dissociative condition as a result of abuse in childhood. PANDAS can support you if you have experienced birth trauma and their website provides details of local support groups you can join (see 'Useful contacts' on pp.16–17 for information).

Give yourself time

Everyone will have their own unique responses, and will need to proceed at their own pace. Talking before you want to might not be helpful. It may make you relive memories of the event, increasing the risk of flashbacks or nightmares. Allow yourself to feel ready to talk about your experiences.

Mindfulness

Mindfulness is a technique for becoming more aware of the present moment. It can help us enjoy the world around us more, and understand ourselves better. Some of the ways you could practise mindfulness are through meditation, tai chi or yoga. Some people find this helps them manage anxiety and stress. Be Mindful has more information (see 'Useful contacts' on p.16).

●● *Mindfulness I think has changed my life – it has given me amazing tools for managing difficult times, especially anxiety, and I feel much more resilient as a result.* ●●

Contact an organisation for support

You may find it useful to contact an organisation that specialises in PTSD, such as ASSIST trauma care. They will be able to give you advice, information and support. You may find it particularly useful to find a specialist organisation with expertise in the particular type of trauma you have experienced. For example, Combat Stress offers support for British Armed Forces Veterans who have mental health problems. Lifecentre offers support for anyone who has experienced sexual abuse. Freedom from Torture offers support for people who have been tortured or who are refugees (see 'Useful contacts' on pp.16–17).

Visit your GP

If you want to, you can ask your GP for help and discuss the support options with them (see 'What treatments are available?' below for more information). Before prescribing treatment for PTSD, your GP or mental health specialist will do an assessment so that they can match the treatment to your specific needs.

Doctors and therapists should be aware of your cultural and ethnic background. If you need an interpreter, they should arrange this for you. They should also assess the impact of the traumatic event on all your close family and provide appropriate support (see 'How can friends and family help?' on p.14).

What treatments are available?

👉👉 *At times I felt that nothing was going to end the distress I was feeling, experiencing more than 10 flashbacks a day of the abuse I suffered as a child. It was a long process of recovery, with lots of bumps along the road, but the right medication and long-term therapy with someone I came to trust, has changed my life.* 👉👉

If you have mild symptoms of PTSD or you have had symptoms for less than four weeks, your GP may recommend watchful waiting. This means monitoring your symptoms yourself to see if they get worse or if they improve. If this is the course of action your GP recommends and you feel comfortable with it, you should have a follow-up appointment within one month.

Your GP may be able to refer you to a local practitioner who has been trained in treating PTSD, such as a psychotherapist. Getting professional help on the NHS can take time – waiting lists for talking treatments in particular can be long. You may want to consider seeing a therapist privately – but be aware that private therapists usually charge for appointments. You can find a private therapist through the British Association for Counselling and Psychotherapy (BACP) and the British Association for Behavioural and Cognitive Psychotherapies (BABCP) (see 'Useful contacts' on p.16 for details).

There are different treatments available for PTSD and it is important you are able to find the right treatment approach for you. Experts are still evaluating treatments, although NICE (the National Institute for Health and Care Excellence) suggests the treatments below may be an effective approach. (See 'Useful contacts' on p.17 for details of NICE.)

Trauma-focused cognitive behaviour therapy (CBT)

CBT is a talking treatment based on changing the way we view things, such as trying to change negative ways of thinking into more positive ones. If you have been through a traumatic experience, you may expect that you will go on experiencing the negative feelings associated with it. You may also expect that certain triggers will always bring up old unwanted feelings. Trauma-focused CBT helps you to recognise these expectations, and try to find a more useful way of reacting and behaving. It may help you to restart activities you have been avoiding, for example travelling on public transport, and can help you to cope with other

symptoms. Therapists delivering this treatment need to have special training to practise (see Mind's booklet *Making sense of talking treatments* for more information about CBT).

Eye movement desensitisation and reprocessing (EMDR)

In this treatment, developed in the late 1980s, you make rhythmic eye movements while recalling the traumatic event. The eye movements are designed to stimulate the information-processing system in the brain. The aim of the treatment is to help you process the traumatic events, and speed up readjustment and recovery. (See Mind's booklet *Making sense of talking treatments* for more information.)

●● *EMDR made a huge difference to me (I was quite sceptical about it most of the way through, but it seemed in the end to work some sort of magic!)* ●●

Medication

Medication is not normally offered as routine first-line treatment for PTSD. However, you may be prescribed antidepressants as part of your treatment if:

- you are clinically depressed
- you are having difficulty sleeping
- you do not want to receive a talking treatment or don't feel ready to talk.

The Medicines and Healthcare products Regulatory Agency (MHRA) have approved the antidepressant paroxetine for treating PTSD. Antidepressants such as Mirtazapine, amitriptyline and phenelzine have also been found to be effective and are sometimes recommended as well. However, amitriptyline and phenelzine should only be used under the supervision of a mental health specialist.

Since antidepressants can be difficult to come off they should be used with caution and with full knowledge of their possible side effects. (See Mind's booklet *Making sense of antidepressants* for more information.)

What are the best practice guidelines for treatment?

NICE recommend that if you are offered psychological therapies such as CBT or EMDR, you should:

- be offered sessions on a regular and continuous basis by the same therapist for 8–12 weeks, with more sessions if needed
- be given all the information about the treatments available to make an informed decision.

NICE also cautions that if you have PTSD your GP should not simply offer you a single, one-off therapy session focusing on talking about the traumatic incident (often referred to as debriefing, or single-session intervention). This is because research suggests that talking about the incident in a one-off session after experiencing a trauma is not an effective long-term treatment, and in some cases may even make your PTSD worse.

You can look at NICE's website for full details of their guidelines on PTSD treatments (see 'Useful contacts' on p.17).

Other treatment options

There are other kinds of treatment options available which you may be offered or choose to explore, for example:

- **Group therapy** – You may be given the option to receive treatment in a group setting. You may be asked to talk about your experience of trauma and the emotions you feel with other people who also have PTSD. The aim of these sessions is to help you understand your experience of PTSD and learn ways to manage your symptoms.
- **Psychodynamic therapy** – Psychodynamic therapy is based on the idea that the past has an impact on your experiences and feelings in the present. The therapy focuses on the emotions you have experienced in response to a traumatic event. It aims to help you learn ways to manage intense emotions.

Experts are still evaluating evidence for which kinds of talking treatments can be effective for PTSD, and you may want to discuss this with your GP or therapist before pursuing these options. (See Mind's booklet *Making sense of talking treatments* for more information.)

How can friends and family help?

This section is for friends or family who wish to support someone who has PTSD. If you are a work colleague of someone who has PTSD, this section may also be useful for you.

Listen

Social support is really important in helping someone with PTSD seek help and recover.

You can help by:

- listening to their experience, if they want to tell you about it
- giving them time to talk and tell their story
- allowing them to be upset
- not judging them.

Look out for warning signs

You might see a change in the behaviour or mood of the person you want to support. Some of these changes might include:

- a change in performance at work, lateness or taking sick leave
- a change in mood, such as anger, irritability or depression
- a change in energy levels, such as alertness or a lack of concentration.

If you notice a change in the behaviour of someone close to you, you could ask them how they feel. If they are going through a difficult time, this might encourage them to seek help.

Help them seek support

If they want you to, you could help your friend or family member seek support. This could start with you exploring sources of support together (see 'Useful contacts' on pp.16–17 for information about organisations who can offer advice and support).

Learn about PTSD

You may find it helpful to find out more about PTSD, especially if you know someone close to you has experienced a traumatic event. This will help you to support the person and better understand what they might be going through. Anxiety UK has information about PTSD which you may find helpful (see 'Useful contacts' on p.16).

Look after yourself

A traumatic event can have a major impact, not just on those who lived through it, but also on that person's family, friends and colleagues. There are sources of support available for you too. Lifecentre provides help for people supporting survivors of sexual abuse. ASSIST trauma care also provides support for families, friends and carers of people with PTSD (see 'Useful contacts' on p.16.)

Useful contacts

Mind

Mind Infoline: 0300 123 3393
(Monday to Friday 9am to 6pm)
email: info@mind.org.uk
web: mind.org.uk
Details of local Minds and other local services, and Mind's Legal Advice Line. Language Line is available for talking in a language other than English.

Anxiety UK

helpline: 08444 775 774
(Monday to Friday 9.30am to 5.30pm)
web: anxietyuk.org.uk
Provides fact sheets for anxiety disorders (including PTSD).

ASSIST trauma care

helpline: 01788 560 800
web: assisttraumacare.org.uk
Support, understanding and therapy for people experiencing PTSD, and families and carers.

Be Mindful

web: bemindful.co.uk
Explains the principles behind mindfulness, and gives details of local courses and therapists.

British Association for Behavioural and Cognitive Psychotherapies (BABCP)

tel: 0161 705 4304
web: babcp.com
Online directory of accredited therapists.

British Association for Counselling and Psychotherapy (BACP)

tel: 01455 883 300
web: bacp.co.uk
Information about counselling and therapy. See sister website, itsgoodtotalk.org.uk for details of local practitioners.

Combat Stress

helpline: 0800 1381 619
(24 hours)
email: contactus@combatstress.org.uk
web: combatstress.org.uk
Charity specialising in the treatment and support of British Armed Forces Veterans who have mental health problems.

The Compassionate Friends

helpline: 0845 123 2304
web: tcf.org.uk
For bereaved parents and their families.

First Person Plural

web: firstpersonplural.org.uk
Survivor-led organisation for people living with complex dissociative conditions after experiencing abuse in childhood.

Freedom from Torture

web: freedomfromtorture.org
Provides direct clinical services to survivors of torture who arrive in the UK. Has access to interpreters.

Lifecentre

adult helpline: 0844 847 7879
under 18s helpline: 0808 802 0808
web: lifecentre.uk.com
Telephone counselling for survivors of sexual abuse and those supporting survivors. Also offers face-to-face counselling and art therapy groups in West Sussex.

National Institute for Health and Care Excellence (NICE)

web: nice.org.uk
Offers clinical guidance on PTSD.

PANDAS foundation

helpline: 0843 289 8401
(Monday to Sunday 9am to 8pm)
web: pandasfoundation.org.uk
UK charity supporting families suffering from pre (antenatal) and postnatal illnesses.

Post traumatic stress disorder

web: ptsd.org.uk
For ex-servicemen and women, and anyone who has PTSD.

Further information

Mind offers a range of mental health information on:

- diagnoses
- treatments
- practical help for wellbeing
- mental health legislation
- where to get help

To read or print Mind's information booklets for free, visit mind.org.uk or contact Mind Infoline on 0300 123 3393 or at info@mind.org.uk

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Mind

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