## Treating PTSD

# (Post Traumatic Stress Disorder)

## What Is PTSD?

Post-traumatic stress disorder (PTSD) is an anxiety disorder caused by very stressful, frightening or distressing events. (Source - NHS - UK)

Post-traumatic stress disorder(PTSD) is a serious mental condition that some people develop after a shocking, terrifying, or dangerous event. These events are called traumas. (Source - Webmd)

"PTSD (post-traumatic stress disorder) is a mental health problem that some people develop after experiencing or witnessing a life-threatening event, like combat, a natural disaster, a car accident, or sexual assault." (Source - National Centre For PTSD - USA)

## Who Suffers With PTSD?

Any one has the potential to suffer with PTSD if they go through a traumatic enough event, but some people and professions are more prone than others.

E.g. Studies showed that the following were typical figures for PTSD sufferers in these groups of people ...

- 1 in 5 firefighters.
- 1 in 3 teenage survivors of car crashes.
- 1 in 2 female rape victims.
- 2 in 3 prisoners of war.

## How Many People Suffer With PTSD?

In a UK study, around 3% of adults answered positive for PTSD symptoms, which means there are likely to be around 900,000 sufferers.

Similarly around 3% (5 million) people aged 18-54 in the US suffer with PTSD in any one year, with around 7% likely to suffer in their lifetime.

Woman (10%) are twice as likely to suffer than men (5%).

## What Are The Typical Causes Of PTSD?

Typical causes of PTSD include ...

- Getting a diagnosis of a serious illness.
- Having (or seeing) a serious road accident.
- The unexpected injury or violent death of someone close.
- Being taken hostage or a prisoner of war
- Being physically assaulted or in a life-threatening situation (such as combat)
- Being sexually assaulted, raped or sexually abused.
- Any major "shock" to your way of life...

## What Actually Happens With PTSD?

The life-threatening shock triggers the "fight or flight" response in the amygdala of the brain, releasing hormones such as adrenalin as part of the stress response.

In most people, when the initial shock or threat has passed, the fight or flight response eventually switches off.

For others, it stays on for a number of days or weeks and is known as Acute Stress Response.

## What Actually Happens With PTSD?

For most of these people, the Acute Stress Response will eventually also subside as the amygdala switches off the fight or flight response.

But for about 1 in 3 people the Acute Stress Response persists.... and it is this that then develops into PTSD.

## What Are The Symptoms Of PTSD?

I typically think of these as being Direct and Indirect.

**Direct symptoms** are what the patient experiences as an immediate result of the psycho-biological effects occurring in the body.

Indirect Symptoms are what the patient then experiences as a more long-term knock-on effect of those.

## What Are The *Direct* Symptoms Of PTSD?

- Flashbacks and nightmares as the patient relives the event again and again in their mind.
- Avoiding thinking about it and feeling upset by keeping busy.
- Feeling 'on guard' staying alert all the time, can't relax, feels anxious and can't sleep.
- Physical symptoms aches and pains, diarrhoea, irregular heartbeats, headaches.
- Feelings of anxiety, panic, guilt and depression.
- Emotional numbness ... or angry outbursts.

## What Are The *In-Direct* Symptoms Of PTSD?

- Inability to deal with everyday life so start drinking too much alcohol or using drugs (including painkillers).
- Change of lifestyle to avoid anything or anyone that reminds them of it including certain places, certain people or certain TV programmes, for example.
- Loss of interest in things that they used to previously enjoy.
- It gets harder to trust, communicate, and solve problems (because the mind is in "fear" or "threat/anxiety" mode).
- This can then lead to problems in relationships with friends, family, coworkers and employment.
- Physical health can be affected (studies show that it raises your risk of heart disease and digestive disorders).
- A host of other issues from the knock-on effect of all the above.

### What Are The Self-Help Recommendations For PTSD?

#### Self-Help Recommendations (From Royal College Of Psychiatrists).

- Try to get back to your usual routine.
- Talk about what happened to someone you trust. Maybe speak to your doctor and keep hopeful.
- Try relaxation exercises.
- Eat regularly, take exercise and spend time with family and friends.
- If the event has made you avoid something e.g. driving or going out be aware of this and, you think it's possible, try to overcome the fear. This may be difficult and may need to be done gradually.
- Take care with driving you are more likely to have an accident while you feel like this.
  Try not to avoid other people.
- Try not to resort to alcohol or street drugs to help you cope. These will make it more difficult to get better.
- Body-focused therapies, such as physiotherapy and osteopathy, massage, acupuncture, reflexology, yoga, meditation and Tai Chi can help you to control your distress, reduce the feeling of being 'on guard' at all time, and focus on the 'here and now' experiences rather than the past.

## What Are The Usual Treatment Recommendations For PTSD?

CBT (Cognitive Behavioural Therapy)

To talk about and discuss the memories, to view them in a different light, as well as consciously changing habits, behaviours, thought patterns and responses.

• EMDR (Eye Movement Desensitising & Reprocessing)

To help make it difficult to bring the causative incident to mind.

Medication (as a last resort)

Typically antidepressants for up to a year and then try to wean off.

[NOTE: Counselling and psychotherapy have been found to be not very effective].

#### 1. Information Gathering

Find out about what's been happening

What are the symptoms they are experiencing & how long?

What is it like to be them?

How are they reacting to the symptoms?

Is it there all the time?

Does it go away sometimes? If so, when?

How extreme is it? Scale 1-10

What their expectation may be for treatment?

Typical triggers? People, places, things, smell, sounds?

#### **Possible Treatment Approaches**

Suggestion Therapy

Self Hypnosis

Anchoring

Regression

Rewind

Swish

#### **Suggestion Therapy**

For simple relaxation

To help feel safe and in control

Use the. Library visualisation - monkey/security system is creating the symptoms.

Creat new "rules"/beliefs based on their "wants" to remove old beliefs.

Take away the "meaning" they have given to the triggers.

Visualise letting go of feeling (balloon etc).

"You have survived" "You can move forward" "You are not alone".

Tailor specific ideas to the specific triggers.

Use the above to create self-hypnotic questions and mantras.

#### **Anchoring A Sense Of Safety**

- (a)Access a calm/safe/in control state and then use that when in the situations that trigger the symptoms.
- (b)Collapsing anchors I've not used this for PTSD and tend not to use this approach anyway but, theoretically, I can see how the "collapsing anchors" technique might be useful here, if applied correctly, to reduce or ease the response to certain triggers.

#### Regression

Follow the feeling/anxiety back to it's cause and treat this as a normal regression/abreaction type session.

HOWEVER ... I would be looking for the "WHY????"

Why are they stuck? What is the ONE unexpressed, unacknowledged feeling or idea that caused it to be stuck?

E.g. Guilt ... over not being able to save dog. Secondary Fear ... over possibly not being there for children

ALSO ... consider some form of "protection"/safety net between the client and the memory/scene.

#### **Reframing The Event**

Use methods such as Inner Child, or re-writing the scene to help the victim feel safe for fight back or express the unexpressed etc.

#### Repeat Viewing - "Clearing".

Have the client go through the scene several times until the emotional reaction reduces.

NOTE: I would only really do this once I had a full understanding of the situation ... but (to contradict) I may do this to help bring to the surface extra information ... in which case it may get more emotional to begin with.

#### Fast Phobia/Rewind Technique -

To help change the perception of the memory

#### Swish

To help think of more positive thoughts (instead of the negative).

**Summary** of what I may consider doing (in one session if I have enough time) ...

- 1. Chat
- 2. Positive visualisation "Do wants, Don't Wants"/Library model
- 3. Regression
- 4. Express the unexpressed etc (find the "why"?)
- 5. Repeated Viewing To Clear It
- 6. Rewind Technique to help change perception/reframing to be saved, or fight back.
- 7. Check in to see how they feel.
- 8. Back to the positive visualisation/swish to end.