

WHAT IS.....

PTSD

IT'S THE LITTLE THINGS

Arming you with the knowledge and understanding of the little things

What is PTSD?

Life is full of stressful events, but some are more stressful than others and in fact can be traumatic to a person. 'Trauma' comes in many different guises, but when we have been through something traumatic such as abuse, extreme or constant threat and/or danger where our life or someone else's life is at risk, we can have a psychological reaction to these overwhelming traumatic events. PTSD stands for Post Traumatic Stress Disorder and it is effectively used to describe the 'after effect' of these events. Our thoughts, our behaviours, our emotions and our physical responses can be affected dependent on the level, timescale and intensity of the trauma. Some can experience what we would call 'complex' PTSD due to the multiple 'traumatic events' they have experienced or been part of. The symptoms of PTSD can be seen as a 'normal' response to an 'abnormal' situation, but if the symptoms are recognised it is important that someone receives the support that they need.

Why would I get PTSD?

As already mentioned, PTSD can be the after effect of traumatic events which generate extreme levels of stress such as from an event which is highly threatening to the self or to another/others. Our normal response to threat involves the body's response to threat or danger i.e. our survival system - 'fight', 'flight' or 'freeze'. This involuntary system kicks in when we perceive there to be a threat as it is trying to keep you safe. When we respond with 'fight' or 'flight' a number of hormones are pumped around our body such as adrenaline (which increases our heart rate and pumps further oxygenated blood to the muscles in our body) and cortisol (which helps mobilise the body to respond to stress). We tend to freeze if our brain decides that there is little hope to defend or escape the situation.

Normally, when the threat is gone the body returns to homeostasis, but this is not the case with PTSD. The way that our mind processes traumatic experiences is very different to how our mind processes information in non-threatening/non-stressful events. Normally, when we are not under threat our brain processes the stimulus it is receiving from all our senses and in simple terms, puts it in a file and files it in the filing cabinet of our memory system. This means that when we choose to, we can retrieve this memory out of the filing cabinet and use it as we wish.

When we experience something traumatic, our brain decides that it does not need this high level of cognitive functioning as it needs to focus on our physical responses to threat first and foremost. Because the areas of the brain which normally process our stimulus are not firing as they normally would do, this results in the traumatic memories/events sometimes not being 'filed' correctly or effectively. Some of the symptoms of PTSD can occur because of this, especially nightmares and intrusive thoughts. These occur because the brain is trying its best to revisit the memories/event and to file the memories correctly.

Something which is important to the symptoms of PTSD is the Amygdala, which is effectively our internal threat detector. This is located in the brain close to the structures which process our memories. Our Amygdala identifies when there is potential threat and communicates this to the brain which in turn activates the 'fight' or 'flight' survival system described above. If someone is exposed to trauma and especially repeated trauma, this means that the Amygdala gets used to firing a lot and can become highly sensitive. This therefore means that we can become constantly alert or hyper-aroused due to the threat detector feeling like it needs to be on red alert all the time.

The symptoms related to PTSD can develop within weeks of an event or incident, but can also emerge some time later, even years later. Therefore, it is helpful to understand what the warning signs would be. Warning signs can be identified by yourself, but sometimes you may not be aware of them as much as other people are. So listen to those around you or even let them know what the warning signs are so that they can let you know if they have seen or start seeing changes in you.

For someone to be given a diagnosis of PTSD they need to meet certain 'criteria'. Any psychological professional able to assess for PTSD will look for the presence of the below symptoms which are identified within 3 different 'clusters'.

- **Re-experiencing**
- **Avoidance**
- **Hyper-arousal**

Re-experiencing:

This cluster of symptoms refers to when the traumatic event is persistently being re-experienced in at least one of the following ways:

- Recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions
- Recurrent distressing dreams of the event
- Acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, hallucinations, and dissociative flashback episodes, including those that occur upon awakening or when intoxicated)
- Intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event i.e. you have certain 'triggers' which can be visual, auditory, olfactory or sensual which can trigger a memory

Avoidance:

This cluster of symptoms refers to persistently avoiding stimuli associated with the trauma and the experience of numbing general responsiveness:

- Efforts to avoid thoughts, feelings, or conversations associated with the trauma/s
- Efforts to avoid activities, places, or people that arouse recollections of the trauma/s
- Inability to recall an important aspect of the trauma/s
- Markedly diminished interest or participation in significant activities
- Feeling of detachment or estrangement from others
- Restricted range of affect (e.g. unable to have loving feelings)
- Sense of foreshortened future (e.g. does not expect to have a career, marriage, children or a normal life span)

Hyper-arousal

This cluster of symptoms refers to persistent symptoms of increasing arousal indicated by at least two of the following:

- Difficulty falling or staying asleep
- Irritability or outbursts of anger
- Difficulty concentrating
- Hyper-vigilance
- Exaggerated startle response

How long can it take for PTSD to emerge?

There is no specific timeframe for when symptoms relating to a diagnosis of PTSD emerge as it is totally unique to each individual and what they have been through. People can struggle processing the memories of an event immediately and can therefore experience any of the symptoms early on after an event. Equally, someone may have not experienced any symptoms for a much longer period of time, even years and these memories can be triggered by something either internal or external. We can never be sure of exact timescales as someone may have been using coping strategies such as avoidance of emotions, places, people and events to ensure that they reduce their experience of their symptoms.