



Post Traumatic Stress Disorder (PTSD)

By Dr. Linda Hancock

ABOUT THE AUTHOR

Dr. Hancock has written a regular weekly column entitled “All Psyched Up” for newspapers in two Canadian provinces for more than a dozen years. Over the years, her readers and clients have said that they have benefited from her common-sense solutions, wisdom, and sense of humour. Dr. Linda Hancock, the author of “Life is An Adventure...every step of the way” and “Open for Business Success” is a Registered Psychologist who has a private practice in Medicine Hat. She can be reached at 403-529-6877 or through email office@drlindahancock.com

Published

April 6th, 2016

When I was growing up I remember hearing people talk about soldiers who had gone off to war and then come home with problems. They used the term "shell shock" to describe this condition of extremely negative symptoms that included flashbacks, sleep difficulties and exaggerated startle response. Often the returning soldier would withdraw from others or try to escape memories through use of alcohol, drugs, or suicide attempts. They had become "stuck" in a situation of helplessness and hopelessness.

Since I began studying to become a psychologist I have learned a great deal about what we now call Post Traumatic Stress Disorder (PTSD) and have had many clients who have been suffering from it. Some had military experience or were first responders. Others had been threatened with death or serious injury during a rape, accident, assault or similar traumatic experience. The exposure that they or someone they cared about was so horrifying to the individual, that they became significantly distressed. This, in turn, impaired their social interactions, capacity to work or other important areas of functioning.

Diagnosis of PTSD requires identification of behavioural symptoms in four specific clusters:

1. Re-experiencing the trauma can occur when an individual is asleep (nightmares) or when awake (flashbacks).
2. Avoidance is associated with memories, thoughts, feelings or external reminders of the distressing situation.
3. Negative cognitions and mood can include a number of feelings such as blame or guilt that has become distorted, lack of interest in activities that were otherwise enjoyed or blanks in memory regarding the trauma.
4. Arousal can appear as aggression, self-harm, reckless behaviour or sleep disturbances.

Unfortunately, people with PTSD often do not seek help because of the stigma that they have assigned to their condition. The good news, however, is that there is help available and several things that can be done to make life better:

1. Get out of the house - Spend some time in nature every day. A walk or doing some exercise will help your body and give your mind a positive focus.
2. Learn how to handle your emotions - Deep breathing, paying attention to your surroundings and learning to manage stress will give you a feeling of control rather than vulnerability.
3. Practice self-care - Make sure you regularly eat a healthy diet, get enough rest and avoid both alcohol and drugs.
4. Access support - Not everyone will understand your situation or deal with it in a helpful way. There are groups and professionals, though, who are able to provide you with both strategies and caring to get you through this. Cognitive-behavioural therapy, family therapy, medications and other treatments will help you to get "unstuck".

I recently became aware of a wonderful app called "PTSD Coach Canada" that allows you to learn about PTSD, strategies, and resources. Download this for free right now and know that you have help at your fingertips day and night.