



Understanding PTSD

Introduction

Posttraumatic stress disorder (PTSD) is a mental health problem that can occur after someone goes through a traumatic event like combat, assault, or disaster. During a traumatic event, you may think that your life or others' lives are in danger. You may feel afraid or feel that you have no control over what is happening around you.

Most people have some stress reactions after a trauma; but, not everyone gets PTSD. If your reactions don't go away over time and they disrupt your life, you may have PTSD.

What Are the Symptoms of PTSD?

PTSD symptoms usually start soon after the traumatic event, but they may not appear until months or years later. They also may come and go over many years.

There are four types of symptoms of PTSD:

Intrusion: Intrusion symptoms often involve internal thoughts or feelings that will not be obvious to police officers. Instead, you might notice:

- A person may seem distracted, defensive, and inattentive to what you are asking. He or she is not necessarily being disrespectful or lying, but may be re-experiencing memories of a past traumatic event.
- A person is overly reactive, such as jerking away or covering when touched, not because he or she is being resistant or aggressive, but because he or she is having a flashback. The person is experiencing all the sensory events of a prior traumatic event, as if it is happening again at that moment.



Avoidance: Avoidance symptoms may directly interfere with a police officer's duties. A person with PTSD may try to avoid people, situations, places, or internal states that remind him or her of a past trauma, because remembering such events is distressing. For example:

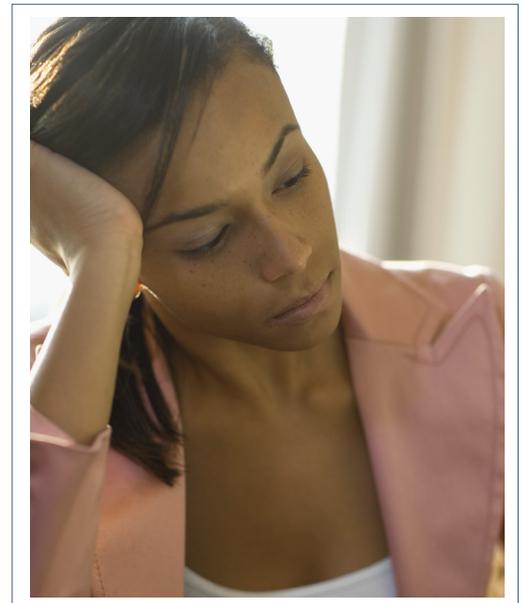
- A Veteran who was involved in a violent attack on his or her division's motorcade may resist getting into a patrol car.
- A person who has experienced an attack in a heavily-populated urban area may become agitated when unexpectedly caught in a protesting crowd.
- A person who was assaulted by someone in uniform avoids or refuses to talk or make eye contact with you because you are in uniform.

Negative alterations in cognitions and mood: These symptoms take the form of emotional numbing or having difficulty feeling emotions, problems with memory, estrangement from others, or negative views of oneself or the world. Like intrusion symptoms, negative changes in thoughts or feelings may not be observable but can still interfere in police duties. For example:

- A person with PTSD who is feeling alienated from others does not trust you enough to cooperate by answering your questions or responding to commands.
- A person with PTSD who feels numb and detached (or even hopeless) may fail to provide you with information about the event to which you are responding.

Alterations in arousal and reactivity: These types of PTSD symptoms are probably the most likely symptoms police will encounter. A person with PTSD may be overly alert, hyper-reactive, and on edge. For example:

- A person with PTSD constantly scans the environment for potential danger and may feel extremely threatened by anyone approaching him or her. This is especially threatening if being approached from behind, as is sometimes the case with a second officer.
- A person with PTSD may feel easily threatened and become aggressive or violent when you try to direct or restrain him or her.
- A person with PTSD (especially a Veteran) may carry a weapon because he or she feels unsafe. Someone with PTSD may be more likely to use that weapon because he or she may misinterpret neutral cues as signs of danger.



What Other Problems Do People with PTSD Experience?

People with PTSD may also have other problems. These include:

- Feelings of hopelessness, shame, or despair
- Depression or anxiety
- Alcohol or drug problems
- Physical symptoms or chronic pain
- Employment problems
- Relationship problems, including divorce

In many cases, treatments for PTSD will also help these other problems, because they are often related. The coping skills learned in treatment can work for PTSD and these related problems.



How Is PTSD Treated?

Getting better means different things for different people. There are many different treatment options for PTSD. For many people, these treatments can get rid of symptoms altogether. Others find they have fewer symptoms or feel that their symptoms are less intense. Your symptoms don't have to interfere with your everyday activities, work and relationships.

In general, people who receive an evidence-based treatment (a treatment proven to work in multiple research studies) for PTSD show a noticeable improvement in their symptoms, and many no longer have PTSD.

The two main types of treatment are psychotherapy (also called talk therapy or counseling) and medication. Sometimes people combine psychotherapy and medication.

A) Psychotherapy for PTSD

Psychotherapy, or counseling, involves meeting with a mental health care provider, like a psychiatrist or a psychologist. There are different types of psychotherapy:

- **Cognitive behavioral therapy (CBT)** is the most effective treatment for PTSD. Trauma-focused CBT uses a variety of techniques to help you change negative thoughts and unhelpful behaviors related to your trauma. There are different types of CBT, for example:
 - **Cognitive Processing Therapy (CPT)** teaches you to reframe negative thoughts about the trauma. It involves talking with a therapist about your negative thoughts and doing writing assignments and worksheets.
 - **Prolonged Exposure (PE)** therapy teaches you how to gain control by facing your fears related to your trauma. You go to places that are safe, but that you have avoided since the trauma.
- A similar kind of therapy is called **Eye Movement Desensitization and Reprocessing (EMDR)**, which involves thinking about the trauma while paying attention to back-and-forth movement or sound (like a finger, light or tone moving side to side).

B) Medications for PTSD

Medications can be effective too. Although they may not cure the problem, they can reduce the symptoms of PTSD. **Antidepressants** are a popular treatment choice for people with depression or PTSD. For example, two types of antidepressants known as a selective serotonin reuptake inhibitors (SSRIs) and serotonin-norepinephrine reuptake inhibitors (SNRIs) restore the balance of naturally occurring chemicals in your brain by taking the medication at the same time every day. Another type of medication, called Prazosin, has been found to be helpful in decreasing nightmares related to the trauma.

IMPORTANT: Benzodiazepines, sometimes called anti-anxiety medications, and atypical antipsychotics should generally be avoided for PTSD treatment because they do not treat the core PTSD symptoms and can be addictive.