

Post-Traumatic Stress Disorder

What is PTSD? Post-traumatic stress disorder (PTSD) can occur after you have been through a traumatic event. A traumatic event is something horrible and scary that you see or that happens to you. During this type of event, you 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.

Anyone who has gone through a life-threatening event can develop PTSD. But people don't always have to see a traumatic event or have it happen to them to get PTSD. Sometimes learning that a traumatic event happened to a loved one can cause PTSD.

These events can include:

- Combat or being sent to a combat zone.
- Military sexual trauma.
- Terrorist attacks.
- Physical violence.
- Sexual violence, such as rape.
- Serious accidents, such as a car wreck.
- Natural disasters, such as a fire, tornado, flood, or earthquake.
- Life-threatening illnesses, such as cancer.
- Living in or near a conflict, such as war.

After the event you might find that you are thinking a lot about what happened, avoiding reminders about the event, and thinking negative thoughts about yourself and the world.

What are the symptoms?

After going through a traumatic event, you may:

- Feel upset by things that remind you of what happened.
- Have nightmares, vivid memories, or flashbacks of the event. You may feel like it's happening all over again.

- Avoid places or things that remind you of what happened.
- Often feel bad about yourself and the world.
- Feel numb or lose interest in things you used to care about.
- Feel that you are always in danger.
- Feel anxious, jittery, or irritated.
- Have trouble sleeping or keeping your mind on one thing.

PTSD symptoms can change your behavior and how you live your life. You may pull away from other people, work all the time, or use drugs or alcohol. You may find it hard to be in relationships, and you may have problems with your spouse and family. You may become depressed. Some people with PTSD also have panic attacks, which are sudden feelings of fear or worry that something bad is about to happen.

Children can have PTSD too. They may have the symptoms above and symptoms that depend on how old they are. As children get older their symptoms are more like those of adults.

- Young children may become upset if their parents are not close by. Or children may have trouble sleeping or suddenly have trouble with toilet training or going to the bathroom.
- Children who are in the first few years of elementary school (ages 6 to 9) may act out the trauma through play, drawings, or stories. They may complain of physical problems or become more irritable or aggressive. They also may develop fears and anxiety that don't seem to be caused by the traumatic event.

What can you do if you think you have PTSD?

If you think you have PTSD, it's important to get treatment. Treatment can work, and early treatment may help reduce long-term symptoms.¹

If you think you have PTSD:

- Talk to your family doctor.
- Talk to a mental health professional, such as a therapist.
- If you're a veteran, contact your local VA hospital or Vet Center.
- Talk to a close friend or family member. He or she may be able to support you and find you help.
- Talk to a religious leader.

If you have thoughts about hurting yourself or someone else, call 911, 1-800-273-TALK (suicide hotline), or go to a hospital emergency room.

How does PTSD develop?

All people with PTSD have personally experienced—or have experienced through others—a traumatic event that caused them to fear for their lives, see horrible things, and feel helpless. Strong emotions caused by the event create changes in the brain that may result in PTSD.

Many people who go through a traumatic event don't get PTSD. It isn't clear why some people develop PTSD and others don't. How likely you are to get PTSD depends on many things. These include:

- How intense the trauma was.
- If you lost a loved one or were hurt.
- How close you were to the event.
- How strong your reaction was.
- How much you felt in control of events.
- How much help and support you got after the event.

Having a history of mental illness, substance use disorder, or childhood trauma may also increase your risk of getting PTSD.

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

About half of people who develop PTSD get better at some time. But other people who develop PTSD always will have some symptoms.²

If you have symptoms of PTSD, counseling can help you cope. Your symptoms don't have to interfere with your everyday activities, work, and relationships. It is never too late to get professional help or other forms of support that can help you manage the symptoms of PTSD.

Reminders and anniversaries of the event can make symptoms worse.

How is PTSD treated?

Treatments for PTSD include:

- **Counseling**, which can help you understand your thoughts and learn ways to cope with your feelings. This can help you feel more in control and get you back to the activities in your life. A type of counseling called cognitive-behavioral therapy (CBT) is effective for treating PTSD. Cognitive processing therapy and prolonged exposure therapy are examples of types of CBT that are used.
- **Antidepressant medicines**, especially selective serotonin reuptake inhibitors (SSRIs). They can help with many PTSD symptoms. SSRIs include fluoxetine (such as Prozac), paroxetine (Paxil), and sertraline (Zoloft).

You may need to try different types of treatment before finding the one that helps you. Your doctor will help you with this. These treatments may include other types of medicines and other forms of counseling, such as group counseling. If you have other problems along with PTSD, such as overuse of alcohol or drugs, you may need treatment for those also.

Treatment can help you feel more in control of your emotions, have fewer symptoms, and enjoy life again.

1. Cahill SP, et al. (2009). Cognitive-behavioral therapy for adults. In EB Foa et al., eds., *Effective Treatments for PTSD: Practice Guidelines From the International Society for Traumatic Stress Studies*, 2nd ed., pp. 139–222. New York: Guilford Press.
2. Johnson DC, et al. (2008). Posttraumatic stress disorder and acute stress disorder. In MH Ebert et al., eds., *Current Diagnosis and Treatment in Psychiatry*, 2nd ed., pp. 366–377. New York: McGraw-Hill.

Help is available. For additional information, visit [MagellanHealth.com/MYMH](https://www.MagellanHealth.com/MYMH)