

PTSD999 Self-Help Guide

Am I Traumatised?

- Traumatic experiences are defined as exposure to actual or threatened death, serious injury or sexual violation.
- You may have directly experienced a traumatic event yourself or witnessed something traumatic happening to someone else
- In the services, it is common to experience first-hand repeated or extreme exposure to aversive details of traumatic events
- *It is common, in the aftermath of these experiences, to develop psychological difficulties such as symptoms of Post-Traumatic Stress Disorder (PTSD)*
- The greater exposure you have to traumatic experiences (either directly or indirectly), the more likely you are to develop PTSD

Do I have Post-Traumatic Stress Disorder (PTSD)?

Are you experiencing the following symptoms?:

“Re-living”

The persistent re-experiencing of the event by way of recurrent intrusive memories, flashbacks and nightmares. "Flashbacks" aren't always visual. They are intrusive memories of what you experienced during the traumatic event, essentially a reliving or replay of the experience, so can include sounds, smells and physical sensations.

Some people describe them as pictures or snapshots and others as “like a video” of the experience.

Distress and Anxiety

Distress, anxiety or panic when exposed to things, which remind you of your past traumatic experiences. The "panic" can manifest itself in lots of different ways, depending on how you experience anxiety - it can involve a racing heart, difficulty breathing, tightness in the chest, shaking, sweating, feeling dizzy, light-headed or faint or feeling detached from oneself.

Some people misinterpret their symptoms of anxiety or panic and worry that there is something physically wrong with them, such as a heart defect.



Avoidance, Blocking and Suppression

This can include attempts to block or suppress difficult or distressing emotions and avoidance of talking about your experiences with other people. Also, avoidance of activities or people that remind you of your experience is really common.

Many people withdraw so much from other people and activities that used to give them pleasure that they end up feeling depressed or low in mood, often reporting that they no longer feel like themselves. Sometimes people feel so bad that they have thoughts of taking their own lives.

Physiological Symptoms

Intrusive memories and the need to avoid any reminders of your traumatic experience, will often result in difficulties with sleeping and concentrating. You may also feel angry, irritable and be hyper vigilant (on the lookout for danger) or jumpy and easily startled.

It is common for the stress and anxiety to build up so much that people feel extremely irritable and angry and can react strongly to things that wouldn't have bothered them in the past.

Behaviour

Intrusive memories of past traumatic experiences often come back with all the associated distress and physical sensations you felt at the time. You can feel overwhelmed with emotions, you can feel under threat. It is not unusual to use strategies to try to block this out.

Many people drink too much or take recreational drugs in order to block out the memories or to avoid thinking or feeling. Whilst this might work in the short-term, longer term it can make people feel worse and prevent the processing needed to recover from PTSD.

Am I Normal?

Symptoms of PTSD are normal following a traumatic experience. Almost everyone experiences intrusive reliving and high levels of anxiety. It is due to how our brains process information at times of extreme fear (when we're in "fight, flight, freeze" mode).

It is not a sign of weakness.



Why won't my symptoms go away?

The reliving symptoms of PTSD tend to persist as a result of avoidance, suppression and blocking. It is normal to not want to be reminded of something highly distressing but unfortunately, your brain has to process and make sense of your experience, before your high levels of distress and anxiety will alleviate.

When you "re-live" your traumatic experience, you are experiencing a re-activation of your threat system, which can make you think and feel as though you are in danger, and often look for ways to protect yourself from harm (which can make your symptoms worse).

What can I do to help myself?

It will help to talk about and allow yourself to think about what has happened. Write out an account of your traumatic experience and read over it, if you feel able to.

Feelings of guilt or shame often prevent us from talking to other people about what we've experienced, but shutting yourself away can result in low mood, depression and certain beliefs about the experience being "stuck". For example, if you blame yourself for something that happened (something you did or didn't do) during your traumatic experience and you never speak to anyone else about it, there's no opportunity for anyone else to challenge it.

If your flashbacks and nightmares are overwhelming then "grounding" strategies can help. Being "grounded" means being fully in the present and aware of your surroundings - rather than back in your traumatic experience, feeling as though it is happening again.

Some people find that using a grounding object such as stress ball, piece of jewelry or a pebble can help. Other people use smells such as peppermint oil or coffee. Some people also find it helpful to use statements such as "I'm safe", "I've survived", "it's not happening any more" to remind themselves that what they are "reliving" is just a memory.

What can I do if my symptoms won't go away?

Self-Help

Self-help Video: The Impact of Trauma on the Brain

<https://youtu.be/yb1yBva3Xas>

Self-help guide on assessing and managing PTSD

<http://www.moodjuice.scot.nhs.uk/posttrauma.asp>

Organisations for Support and Guidance

PTSD999

<http://www.ptsd999.org.uk>

MIND

<http://www.mind.org.uk>

The Samaritans

<http://www.samaritans.org>

Organisations for Trauma-focused Therapy

If you are unable to afford private therapy, ask your GP for:

- Trauma-focused Cognitive Behaviour Therapy (CBT) or
- Eye Movement Desensitisation and Reprocessing (EMDR)

Both of these therapeutic approaches are recommended by the National Institute of Clinical Excellence (NICE) for the treatment of PTSD.

If you can afford private therapy then please contact London Trauma Specialists to arrange an assessment:

www.londontraumaspecialists.com

Risk

If you are feeling suicidal then don't suffer in silence. Contact your GP or visit your nearest Accident and Emergency department to get the help you need.