



POST TRAUMATIC STRESS DISORDERS

Since the 1980s post traumatic stress disorder (PTSD) has been recognised as an anxiety disorder associated with a traumatic event. A large number of cases are war-related.

Who gets PTSD?

- A person who has witnessed or experienced an event involving death, threat of death, or serious injury.
- People who have experienced: kidnap, rape, refugee, peace-keeping forces, war veteran, serious motor vehicle accident, natural disaster, assault, armed hold-up or serious crime are also at risk.
- This person's response is intense fear, helplessness or horror.
- Most people will be unsettled by traumatic events, however in some people there will be a longer lasting disorder.
- About 5% of the population at some stage will experience PTSD.
- 12% of Australian Vietnam Veterans suffer chronic PTSD.

Signs and symptoms

Symptoms may occur immediately after the event or may be delayed for months or years. The symptoms vary and can include:

- Intrusive memories or flashbacks – re-experiencing the event
- Numbed feelings
- Avoidance of thoughts or conversations about the event
- Depression and/or anxiety
- Difficulty sleeping – often due to distressing dreams
- Over sensitivity to noise, smells, sudden movements, or other triggers for the memory (this is known as hyperarousal)
- Rage and anger
- Feelings of guilt or shame

- Abuse of alcohol and other substances is common.

Recovery from PTSD

By seeking help and treatment, people with PTSD should get relief of symptoms, improve family life, social relationships, employment stability, substance abuse and anger management.

Important

If you (or someone close to you) have been exposed to war or other traumatic event (even if it is many years ago) read the list of symptoms to see if you might need to talk to someone about PTSD.

Treatment for PTSD

- Following a traumatic event, immediate counselling may be useful
- Ongoing counselling – this may involve remembering what happened without being overwhelmed by the distress
- Support groups by volunteers also experiencing PTSD
- Self help and group treatment programs
- Education about the condition
- Medicines are frequently used to reduce physical symptoms
- Reducing reliance on alcohol or medicines if this is a problem
- Support for family members.

Medicines and PTSD

As part of a treatment strategy, medicines may help to control symptoms and to reduce stress during counselling sessions. PTSD can be a chronic condition and may require long-term medication.

- Sedatives and anti-anxiety medicines may provide relief of symptoms
- Stopping anxiety medicines suddenly can make symptoms worse – talk to your doctor or pharmacist
- Antidepressants may help depression and flashbacks
- Medicines such as antidepressants and anti-epileptics may be used to slow down the hyperarousal response and feelings of impulsiveness or rage.

It is important to check that any other medicines from doctor/pharmacy/supermarket or complementary medicines will not be a problem with your treatment. Check with your pharmacist.

What about alcohol?

Many people self medicate with alcohol when under stress.

Alcohol will not treat PTSD and may make it worse. It is important to know that alcohol:

- Will increase sedation from anti-anxiety medicines
- Will impair driving and work ability
- May have a depressive effect
- May increase side effects of medicines used for PTSD.

Self Care

- Seek out relevant help (see Contact section)
- Exercise and relaxation will help (see *Relaxation Techniques* Fact Card)
- Join a self help group (see Contact section)
- Accept that some things in life may at times be too much to 'cope' with alone and this is not a sign of weakness
- Remember that your friends and family love you and want to help you recover
- Accept the support of family and friends – studies show this helps recovery

Your **Self Care** Pharmacist

DAVID S. NOLTE PHARMACY
DAVID S. NOLTE B.Pharm. M.P.S.
701-703 Rathdowne Street
NORTH CARLTON 3054

- Try to cut down on cigarettes and alcohol – these can make stress worse
- If you are an emergency services worker be aware that post-incident counselling is available for YOU as well as for victims of trauma
- Encourage supportive structures in the community – e.g. positive social attitudes for war veterans and victims of assault and crime
- Be aware of anniversaries or events that may increase distress (e.g. ANZAC Day or war movies).

Self Care for family members

There is no doubt that PTSD will impact on family members. They will need to cope with possible erratic behaviour and job instability and cope with the strain put on the family unit. Families should seek assistance from relevant sources (see Contact section).

Other fact cards of interest

- *Wise Use of Medicines*
- *Sleeping Problems*
- *Medicines and Driving*
- *Relaxation Techniques*
- *Anxiety*
- *Staying a Non-Smoker*
- *Depression*
- *Men's Health*

Recommended reading

Post Traumatic Stress Disorder and War Related Stress - information for veterans and their families. ACPMH 2000.

Available free from the **Australian Centre for Posttraumatic Mental Health (ACPMH)** Tel (03) 9496 2922

Contact

A doctor – listed under 'medical practitioners' in the yellow pages of the phone book

Vietnam Veterans Counselling Service (VVCS)

1800 011 046 (freecall from anywhere in Australia)

1800 043 503 (freecall NSW) 1800 019 332 (freecall Nth Qld)

Victims of Crime – Contact your local police station

Australian Centre for Posttraumatic Mental Health (ACPMH) Tel (03) 9496 2922 or visit their website:

www.ncptsd.unimelb.edu.au

Lifeline – Tel 13 11 14 (available 24 hours from anywhere in Australia)

Pharmacy Self Care has a strong commitment to providing current and reliable health information.

The information in this card was current at time of printing.

Sponsored by

