

## Posttraumatic Stress Disorder (PTSD)

Post Traumatic Stress Disorder (PTSD) is identified as a constellation of symptoms that develop after a traumatic or stressful event that the patient perceives as extreme. Some examples include witnessing violent deaths, threats or actual injuries, such as rape and robberies, being held hostage or tortured, or living through a disaster scenario.



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### Assessment

#### Re-experience Traumatic Event

##### Re-living Trauma-spike Event

Patients often will re-experience the initial event through flashbacks or during dreams as nightmares. They often act irrationally and experience severe anxiety during these episodes.

#### Flashbacks

##### Flash-back

A sudden and often vivid memory a patient experiences is called a flashback. Patients often recall vivid details and emotions during these episodes, which can be triggered by other events.

#### Nightmares

##### Night-mare

Patients, especially children, will experience nightmares relating to the initial event that may disrupt sleep patterns or cause anxiety around going to sleep. Hypervigilance or an exaggerated startle response is often noted.

#### Avoidance

##### Avoid-sign

Patients with this disorder often experience avoidance or emotional detachment from families, friends, and the population in general. They specifically avoid people or situations that trigger memories of the traumatic event, such as driving a different route to work to avoid an intersection where they witnessed a violent automobile accident. They also experience detachment and disinterest in regular activities.

#### Self-destructive Behaviors

##### Destroying Self

Patients often exhibit self-destructive behaviors, as they attempt to manage the anxiety regarding the traumatic experience. They may have suicidal thoughts or abuse substances, as they often have an inability to foresee a sustainable future for themselves including marriage, job possibilities, or even normal life span.

### Considerations

## **Assess Suicide Risk**

### **Assess-man with Risk of Suicide-jumper**

It is important while interviewing these patients to adequately assess their suicide risk using screening tools and accurate assessments. Assess their level of grief, depression, and support systems to attribute to their suicide risk.

## **Actively Listen to Stories**

### **Listening to Story**

It is important to acknowledge feelings of guilt or self-blame, as you provide a calm, non-threatening, private environment to allow them to explain their experiences. Actively listen to their stories and full descriptions of their experiences at their pace.

## **Anxiety Medications**

### **Anxiety-bag Med-bottles**

Medications are used in this disorder to decrease anxiety especially around situations that trigger an emotional response. Anxiety medications like SSRIs (especially Sertraline), Venlafaxine and Prazosin are indicated for first line treatment. In addition, use of beta blockers as well as other drugs like carbamazepine, valproic acid, and lithium have been used to manage anxiety levels.