

Treatment

PTSD is treated and managed in several ways.

- **Medications**, including mood stabilizers, antipsychotic medications and antidepressants.
- **Psychotherapy**, such as cognitive behavioral therapy or group therapy.
- **Self-management strategies**, such as "self-soothing." Many therapy techniques, including mindfulness, are helpful to ground a person and bring them back to reality after a dissociative episode or a flashback.
- **Service animals**, especially dogs, can help soothe some of the symptoms of PTSD.

Related Conditions

Someone with PTSD may have additional disorders, as well as thoughts of or attempts at suicide, such as :

- Anxiety disorders, including Generalized Anxiety Disorder and OCD
- Borderline Personality Disorder
- Depression
- Substance abuse

These other illnesses can make it challenging to treat PTSD. For example, medications used to treat OCD or depression may worsen symptoms of PTSD, and may even trigger them. Successfully treating PTSD almost always improves these related illnesses. And successful treatment of depression, other anxiety or substance abuse usually improves the symptoms of PTSD.

Source:

<http://www.nami.org/Learn-More/Mental-Health-Conditions/Posttraumatic-Stress-Disorder>

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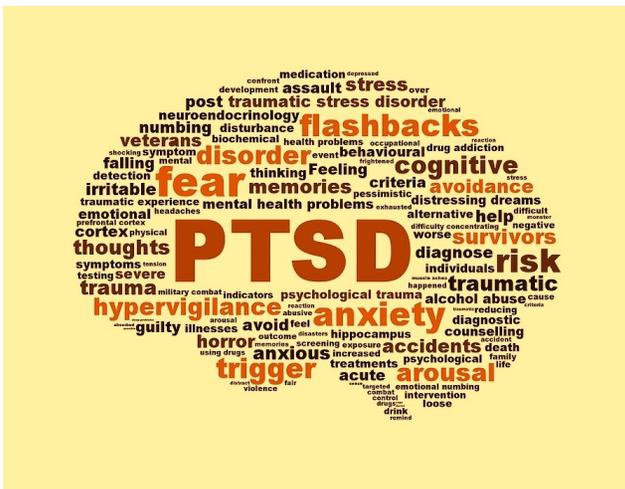
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Post-Traumatic Stress Disorder





Post-Traumatic Stress Disorder

Traumatic events, such as military combat, assault, an accident or a natural disaster, can have long-lasting negative effects. Sometimes our biological responses and instincts, which can be life-saving during a crisis, leave people with ongoing psychological symptoms because they are not integrated into consciousness. Because the body is busy increasing the heart rate, pumping blood to muscles for movement and preparing the body to fight off infection and bleeding in case of a wound, all bodily resources and energy get focused on physically getting out of harm's way. This resulting damage to the brain's response system is called post-traumatic stress response or disorder, also known as PTSD.

PTSD affects 3.5% of the U.S. adult population—about 7.7 million Americans—but women are more likely to develop the condition than men. About 37% of those cases are classified as severe. While PTSD can occur at any age, the average age of onset is in a person's early 20s.

Symptoms

The symptoms of PTSD fall into the following categories.

- **Intrusive Memories**, which can include flashbacks of reliving the moment of trauma, bad dreams and scary thoughts.
- **Avoidance**, which can include staying away from certain places or objects that are reminders of the traumatic event. A person may also feel numb, guilty, worried, depressed, or have trouble remembering the traumatic event.
- **Dissociation**, which can include out-of-body experiences or feeling that the world is "not real" (derealization).
- **Hypervigilance**, which can include being startled very easily, feeling tense, trouble sleeping or outbursts of anger.

Over the last 5 years, research on 1–6 year olds found that young children can develop PTSD, and the symptoms are quite different from those of adults. These findings also saw an increase in PTSD diagnoses in young children by more than 8 times when using the newer criteria. Symptoms in young children can include:

- Acting out scary events during playtime
- Forgetting how/being unable to talk
- Being excessively clingy with adults
- Extreme temper tantrums, as well as overly aggressive behavior

Diagnosis

Symptoms of PTSD usually begin within 3 months after a traumatic event, but occasionally emerge years afterward. Symptoms must last more than a month to be considered PTSD. PTSD is often accompanied by depression, substance abuse or another anxiety disorder.

People can describe symptoms in a variety of ways. How a person describes symptoms often depends on the cultural lens they are looking through. In Western cultures, people generally talk about their moods or feelings, whereas in many Eastern cultures, people more commonly refer to physical pain. African Americans and Latinos are more likely to be misdiagnosed, so they should look for a health care professional who understands their background and shares their expectations for treatment.

Because young children have emerging abstract cognitive and limited verbal expression, research indicates that diagnostic criteria needs to be more behaviorally anchored and developmentally sensitive to detect PTSD in preschool children. Read more on the preschool subtype at the National Center for PTSD.

