# Post-Traumatic Stress Disorder

## What is post-traumatic stress disorder (PTSD)?

Post-traumatic stress disorder (PTSD) is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event.

It is natural to feel afraid during and after a traumatic situation. Fear is a part of the body's "fight-or-flight" response, which helps us avoid or respond to potential danger. People may experience a range of reactions after trauma, and most people recover from initial symptoms over time. Those who continue to experience problems may be diagnosed with PTSD.

### Who gets PTSD?

Anyone can develop PTSD at any age. This includes combat veterans and people who have experienced or witnessed a physical or sexual assault, abuse, an accident, a disaster, or other serious events. People who have PTSD may feel stressed or frightened, even when they are not in danger.

Not everyone with PTSD has been through a dangerous event. Sometimes, learning that a friend or family member experienced trauma can cause PTSD.

According to the National Center for PTSD, a program of the U.S. Department of Veterans Affairs, about six out of every 100 people will experience PTSD at some point in their lives. Women are more likely to develop PTSD than men. Certain aspects of the traumatic event and some biological factors (such as genes) may make some people more likely to develop PTSD.

## What are the signs and symptoms of PTSD?

Symptoms of PTSD usually begin within 3 months of the traumatic event, but they sometimes emerge later. To meet the criteria for PTSD, a person must have symptoms for longer than 1 month, and the symptoms must be severe enough to interfere with aspects of daily life, such as relationships or work. The symptoms also must be unrelated to medication, substance use, or other illness.

The course of the disorder varies. Some people recover within 6 months, while others have symptoms that last for 1 year or longer. People with PTSD often have

co-occurring conditions, such as depression, substance use, or one or more anxiety disorders.

After a dangerous event, it is natural to have some symptoms. For example, some people may feel detached from the experience, as though they are observing things rather than experiencing them. A mental health professional who has experience helping people with PTSD, such as a psychiatrist, psychologist, or clinical social worker, can determine whether symptoms meet the criteria for PTSD.

To be diagnosed with PTSD, an adult must have all of the following for at least 1 month:

- At least one re-experiencing symptom
- At least one avoidance symptom
- At least two arousal and reactivity symptoms
- At least two cognition and mood symptoms

#### Re-experiencing symptoms include:

- Experiencing flashbacks—reliving the traumatic event, including physical symptoms such as a racing heart or sweating
- Having recurring memories or dreams related to the event
- Having distressing thoughts
- Experiencing physical signs of stress

Thoughts and feelings can trigger these symptoms, as can words, objects, or situations that are reminders of the event.

#### Avoidance symptoms include:

- Staying away from places, events, or objects that are reminders of the traumatic experience
- Avoiding thoughts or feelings related to the traumatic event

Avoidance symptoms may cause people to change their routines. For example, some people may avoid driving or riding in a car after a serious car accident.

#### Arousal and reactivity symptoms include:

- Being easily startled
- Feeling tense, on guard, or on edge
- Having difficulty concentrating
- Having difficulty falling asleep or staying asleep
- Feeling irritable and having angry or aggressive outbursts

Engaging in risky, reckless, or destructive behavior

Arousal symptoms are often constant. They can lead to feelings of stress and anger and may interfere with parts of daily life, such as sleeping, eating, or concentrating.

Cognition and mood symptoms include:

- Having trouble remembering key features of the traumatic event
- Having negative thoughts about oneself or the world
- Having exaggerated feelings of blame directed toward oneself or others
- Having ongoing negative emotions, such as fear, anger, guilt, or shame
- Losing interest in enjoyable activities
- Having feelings of social isolation
- Having difficulty feeling positive emotions, such as happiness or satisfaction

Cognition and mood symptoms can begin or worsen after the traumatic event. They can lead a person to feel detached from friends or family members.

If you or someone you know is struggling or having thoughts of suicide, call or text the 988 Suicide and Crisis Lifeline at **988** or chat at 988lifeline.org . In life-threatening situations, call **911**.

How do children and teens react to trauma?

Children and teens can have extreme reactions to trauma, but some of their symptoms may not be the same as those seen in adults. In children younger than age 6, these symptoms can include:

- Wetting the bed after having learned to use the toilet
- Forgetting how to talk or being unable to talk
- Acting out the scary event during playtime
- Being unusually clingy with a parent or other adult

Older children and teens usually show symptoms more like those seen in adults. They also may develop disruptive, disrespectful, or destructive behaviors. Older children and teens may feel guilty for not preventing injury or deaths. They may also have thoughts of revenge.

Learn more about how to help children and adolescents cope with disasters and other traumatic events.

What are the risk factors for PTSD?

Not everyone who lives through a dangerous event develops PTSD—many factors play a part. Some of these factors are present before the trauma; others become important during and after a traumatic event.

Risk factors that may increase the likelihood of developing PTSD include:

- Being exposed to previous traumatic experiences, particularly during childhood
- Getting hurt or seeing people hurt or killed
- Feeling horror, helplessness, or extreme fear
- Having little or no social support after the event
- Dealing with extra stress after the event, such as loss of a loved one, pain and injury, or loss of a job or home
- Having a personal or family history of mental illness or substance use

Resilience factors that may reduce the likelihood of developing PTSD include:

- Seeking out support from friends, family, or support groups
- Learning to feel okay with one's actions in response to a traumatic event
- Having a coping strategy for getting through and learning from the traumatic event
- Being prepared and able to respond to upsetting events as they occur, despite feeling fear

### How is PTSD treated?

It is important for anyone with PTSD symptoms to work with a mental health professional who has experience treating PTSD. The main treatments are psychotherapy, medications, or a combination of psychotherapy and medications. A mental health professional can help people find the best treatment plan for their symptoms and needs.

Some people with PTSD, such as those in abusive relationships, may be living through ongoing trauma. In these cases, treatment is usually most effective when it addresses both the traumatic situation and the symptoms of PTSD. People who experience traumatic events or who have PTSD also may experience panic disorder, depression, substance use, or suicidal thoughts. Treatment for these conditions can help with recovery after trauma. Research shows that support from family and friends also can be an important part of recovery.

#### Psychotherapy

Psychotherapy (sometimes called talk therapy) includes a variety of treatment techniques that mental health professionals use to help people identify and change troubling emotions, thoughts, and behaviors. Psychotherapy can provide support, education, and guidance to people with PTSD and their families. Treatment can take place one on one or in a group and usually lasts 6 to 12 weeks but can last longer.

Some types of psychotherapy target PTSD symptoms, while others focus on social, family, or job-related problems. Effective psychotherapies often emphasize a few key components, including learning skills to help identify triggers and manage symptoms.