



POST-TRAUMATIC STRESS DISORDER

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WHAT IS PTSD?

Direct
exposure

Intrusion
symptoms

For more than 1 month

Negative
alterations in
cognition +/-
mood

Persistent
avoidance of
similar
stimuli

CAUSES OF PTSD

A traumatic event that triggers PTSD may be:

- Serious accidents, such as car or train wrecks
- Invasive medical procedures
- Animal bites
- Natural disasters, such as floods or earthquakes
- Manmade tragedies, such as bombings
- Violent personal attacks, such as a mugging, rape, torture, or kidnapping
- Physical abuse
- Sexual assault/ abuse
- Emotional abuse or bullying
- Neglect

WHO ARE AT RISK?

The intensity is determined by:

- How close the child was to the traumatic event
- How bad the event was
- How long the event lasted
- If the event happened more than once
- How well the child is able to recover quickly from difficult things (resiliency)
- How well the child copes
- How supportive a child's family and community are after the event

SYMPTOMS

Post-Traumatic Stress Disorder (PTSD)



Avoid Thinking of the Trauma



Avoid Talking of the Trauma



Easily Frightened



Negative Mood



Negative Thinking



Always on Guard



Avoiding Places



Avoiding Activities



Flashbacks



Cannot Concentrate



Aggressive Behavior

- Re-enact an event for seconds or hours or, in rare cases, days
- Suicidal ideations
- Regression (thumb-sucking or bedwetting)
- Somatizations (headaches or stomachaches)

SYMPTOMS IN DIFFERENT AGE GROUPS

Very Young Child

Generalized fears such as separation anxiety

Avoidance of situations

Sleep disturbances

Preoccupation with words or symbols

Play that repeats themes of the trauma

Elementary-aged-children

Poor time recall when remembering trauma-related events

Omen formation: the belief that there were warning signs that predicted the event

Issues with impulse control and risk taking

Problems with self-image

Difficulty with focus

References to the trauma in play, art work or stories

Teens

Impulsive and aggressive behavior

Possible Insomnia or nightmares

Preoccupation with revenge

May numb feelings

May be suicidal

Post-traumatic reenactment by incorporating aspects of the trauma into daily life

Adults

May be suicidal

Intrusive thoughts

Difficulty being focused in the present

Re-experience flashbacks with hyper arousal symptoms

Possible insomnia or nightmares

Diminished interest in participating in activities

Feel detached or estranged from others

DIAGNOSIS

- If symptoms persist for **more than 1 month** and are negatively affecting the child's life and how he or she functions.
- For those with PTSD, symptoms most often start within 3 months after the traumatic event. But they can also start months or years later.

PTSD mimics:

- Generalized anxiety disorder
- Oppositional defiant disorder
- Attention-deficit hyperactive disorder

TREATMENT

- PTSD can be treated. Early diagnosis and treatment is very important.
- Treatment may include:
- **Cognitive behavioral therapy:** A child learns skills to handle his or her anxiety and to master the situation that led to the PTSD.
- Medicines for depression or anxiety:
 - **SSRI**
 - **Atypical antipsychotics**
 - **Beta-blockers**
- Recovery from PTSD varies. Some children recover within 6 months. Others have symptoms that last much longer. Recovery depends on the child's inner strengths, coping skills, and ability to bounce back. It is also affected by the level of family support. Parents play a vital role in treatment.

How can I help my child live with PTSD?

- Admit that the event happened. Pretending everything is normal won't help your child.
- Be supportive and get counseling for children and teens who have seen or gone through a traumatic event. A child or teen may at first not want counseling. But it may be needed months or even years after the traumatic event.
- Keep all appointments with your child's healthcare provider.
- Talk with your child's healthcare provider about other providers who will be included in your child's care. Your child may get care from a team that may include counselors, therapists, social workers, psychologists, and psychiatrists. Your child's care team will depend on his or her needs and how serious the PTSD is.
- Take all symptoms of depression and suicide very seriously. Get treatment right away. Suicide is a health emergency.

When should I call my child's healthcare provider?

Call your healthcare provider right away if your child:

- Feels extreme depression, fear, anxiety, or anger toward him or herself or others
- Feels out of control
- Hears voices that others don't hear
- Sees things that others don't see
- Can't sleep or eat for 3 days in a row
- Shows behavior that concerns friends, family, or teachers, and others express concern about this behavior and ask you to get help
- PTSD increases risk for other mental health disorders, including depression, anxiety, and suicidal thinking.

SUMMARY

- PTSD can often be misdiagnosed.
- A traumatic event with intrusive thoughts which negatively impact their life for more than 1 month
- Help the child get over it.
- If not improving or is worsening, seek help.
- Visit the ER if your child has suicidal thoughts and plans to act on it.

- THANK YOU