Post Traumatic Stress Disorder
Post-Traumatic Stress Disorder

What is post-traumatic stress disorder, or PTSD?

Some people develop post-traumatic stress disorder (PTSD) after experiencing 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 normal “fight-or-flight” response, which helps us avoid or respond to potential danger. People may experience a range of reactions after trauma, and most will recover from their symptoms over time. Those who continue to experience symptoms may be diagnosed with PTSD.

Who develops PTSD?

Anyone can develop PTSD at any age. This includes combat veterans as well as people who have experienced or witnessed a physical or sexual assault, abuse, an accident, a disaster, a terror attack, or other serious events. People who have PTSD may feel stressed or frightened, even when they are no longer in danger.

Not everyone with PTSD has been through a dangerous event. In some cases, learning that a relative or close friend experienced trauma can cause PTSD.

According to the National Center for PTSD, a program of the U.S. Department of Veterans Affairs, about seven or eight of every 100 people will experience PTSD in their lifetime. Women are more likely than men to develop PTSD. 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 symptoms of PTSD?

Symptoms of PTSD usually begin within 3 months of the traumatic incident, but they sometimes emerge later. To meet the criteria for PTSD, symptoms must last longer than 1 month, and they 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 illness varies: Although some people recover within 6 months, others have symptoms that last for a 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 or even to feel detached from the experience, as though you are observing things rather than experiencing them. A health care provider—such as a psychiatrist, psychologist, or clinical social worker—who has experience helping people with mental illnesses can determine whether symptoms meet the criteria for PTSD.

For a PTSD diagnosis, 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

- Flashbacks—reliving the traumatic event, including physical symptoms such as a racing heart or sweating
- Reoccurring memories or dreams related to the event
- Distressing thoughts
- 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

- Staying away from places, events, or objects that are reminders of the experience
- Avoiding thoughts or feelings related to the traumatic event
- Avoidance symptoms may cause people to change their routines. For example, after a serious car accident, a person may avoid driving or riding in a car.
Arousal and reactivity symptoms

- 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 present—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

- Trouble remembering key features of the traumatic event
- Negative thoughts about oneself or the world
- Distorted thoughts about the event that cause feelings of blame
- Ongoing negative emotions, such as fear, anger, guilt, or shame
- Loss of interest in previous activities
- Feelings of social isolation
- Difficulty feeling positive emotions, such as happiness or satisfaction

Cognition and mood symptoms can begin or worsen after the traumatic event and can lead a person to feel detached from friends or family members.
How do children and teens react to trauma?

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

- Wetting the bed after having learned to use the toilet
- Forgetting how 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 also may have thoughts of revenge.

Why do some people develop PTSD and others do not?

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:

- Exposure to dangerous events or traumas
- Getting hurt or seeing people hurt or killed
- Childhood trauma
- 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 history 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 a 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 both. An experienced mental health professional can help people find the treatment plan that meets their symptoms and needs.

Some people with PTSD may be living through an ongoing trauma, such as being in an abusive relationship. In these cases, treatment is usually most effective when it addresses both the traumatic situation and the symptoms. People who have PTSD or who are exposed to trauma 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. This type of treatment can occur 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, and others focus on social, family, or job-related problems. Effective psychotherapies tend to emphasize a few key components, including learning skills to help identify triggers and manage symptoms.

One common type of psychotherapy, called cognitive behavioral therapy, can include exposure therapy and cognitive restructuring.

- **Exposure Therapy** helps people learn to manage their fear by gradually exposing them, in a safe way, to the trauma they experienced. As part of exposure therapy, people may think or write about the trauma or visit the place where it happened. This therapy can help people with PTSD reduce symptoms that cause them distress.

- **Cognitive Restructuring** helps people make sense of the traumatic event. Sometimes people remember the event differently than how it happened, or they may feel guilt or shame about something that is not their fault. Cognitive restructuring can help people with PTSD think about what happened in a realistic way.
Medications

The most studied type of medication for treating PTSD is a type of antidepressant medication called selective serotonin reuptake inhibitors (SSRIs). SSRIs may help control PTSD symptoms such as sadness, worry, anger, and feeling emotionally numb. SSRIs and other medications may be prescribed along with psychotherapy. Other medications may help address specific PTSD symptoms, such as sleep problems and nightmares.

Health care providers and patients can work together to find the best medication or combination of medications, as well as the right dose. Check the U.S. Food and Drug Administration website at https://www.fda.gov/drugsatfda for the latest information on patient medication guides, warnings, or newly approved medications.
How can I find help?

If you or someone you know is in immediate distress or is thinking about hurting themselves, call or text the Suicide and Crisis Lifeline at 988 or chat at 988lifeline.org/chat. You can also text the Crisis Text Line (GOT5 to 741741). These services are available 24/7 to anyone and are completely confidential.

What can I do to help myself?

It is important to know that, although it may take some time, you can get better with treatment. Here are some things you can do to help yourself:

• Talk with your health care provider about treatment options and follow your treatment plan.
• Engage in exercise, mindfulness, or other activities that help reduce stress.
• Try to maintain routines for meals, exercise, and sleep.
• Set realistic goals and do what you can as you are able.
• Spend time with trusted friends or relatives and tell them about things that may trigger symptoms.
• Expect your symptoms to improve gradually, not immediately.
• Avoid use of alcohol or drugs.

How can I help a friend or relative who has PTSD?

If you know someone who may be experiencing PTSD, the most important thing you can do is to help that person get the right diagnosis and treatment. Some people may need help making an appointment with their health care provider; others may benefit from having someone accompany them to their health care visits.

If a close friend or relative is diagnosed with PTSD, you can encourage them to follow their treatment plan. If their symptoms do not get better after 6 to 8 weeks, you can encourage them to talk to their health care provider. You also can:

• Offer emotional support, understanding, patience, and encouragement.
• Learn about PTSD so you can understand what your friend is experiencing.
• Listen carefully. Pay attention to the person’s feelings and the situations that may trigger PTSD symptoms.
• Share positive distractions, such as walks, outings, and other activities.
Finding Help

New York State Mental Health Program Directory

The Mental Health Program Directory provides information on all programs in New York State that are operated, licensed or funded by the State Office of Mental Health (OMH). This site includes three search options: Basic Search, Advanced Search, and Full Directory. Definitions for all programs are available under the Support tab, along with directory help and information on program data collection.

Find services close to you at: https://my.omh.ny.gov/bi/pd/saw.dll?PortalPages#report

Mental Health Treatment Program Locator

The Substance Abuse and Mental Health Services Administration (SAMHSA) provides this online resource for locating mental health treatment facilities and programs. The Mental Health Treatment Locator section of the Behavioral Health Treatment Services Locator lists facilities providing mental health services to persons with mental illness.

Find a facility in your state at: https://findtreatment.samhsa.gov/

For Immediate Help

If you are in crisis, experiencing emotional distress, or worried about someone you know:

- Call or text the Suicide and Crisis Lifeline at 988 or chat at 988lifeline.org/chat. You can also text the Crisis Text Line (GOT5 to 741741). These services are available 24/7 to anyone and are completely confidential.

If you are thinking about harming yourself or thinking about suicide:

- Tell someone who can help right away
- Call your licensed mental health professional if you are already working with one
- Call your doctor
- Go to the nearest hospital emergency department

If a loved one is considering suicide:

- Do not leave them alone
- Try to get your loved one to seek immediate help from a doctor or the nearest hospital emergency room, or call 988
- Remove access to firearms, medications or other potential tools for suicide
The New York State Office of Mental Health thanks the National Institute of Mental Health for providing the information contained in this booklet.

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For questions or complaints regarding mental health services anywhere in New York State please contact:

New York State
Office of Mental Health
Customer Relations
44 Holland Avenue
Albany, NY 12229
(800) 597-8481 (toll-free)

For information about mental health services in your community, contact the New York State Office of Mental Health regional office nearest you:

Central New York Field Office
545 Cedar Street, 2nd Floor
Syracuse, NY 13210-2319
(315) 426-3930

Hudson River Field Office
10 Ross Circle, Suite 5N
Poughkeepsie, NY 12601
(845) 454-8229

Long Island Field Office
998 Crooked Hill Road
Building #45-3
West Brentwood, NY 11717-1087
(631) 761-2508

New York City Field Office
330 Fifth Avenue, 9th Floor
New York, NY 10001-3101
(212) 330-1650

Western New York Field Office
737 Delaware Avenue, Suite 200
Buffalo, NY 14209
(716) 533-4075

In Crisis?
We’ve got time to listen.
Text Got5 to 741741

988 SUICIDE & CRISIS LIFELINE

Call/Text 988 or
Chat at 988lifeline.org
Are you in crisis, experiencing emotional distress, or worried about someone you know?
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Albany, NY 12229
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