Veterans and Mental Health: Learning About PTSD

with Dr. Laura Wiedeman
Northern California VA Health Care System
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Objectives

- Learn about PTSD epidemiology, symptoms, and recovery
- Review available resources for veterans with PTSD, including websites, educational videos, mobile apps, and VA services
- Address common misconceptions about PTSD that may be held by veterans and/or the public
- Develop a greater understanding of how to interact with veterans who may have PTSD

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Objective #1:
PTSD EPIDEMIOLOGY, SYMPTOMS, AND RECOVERY

What is a "traumatic" event?

Trauma exposure is common.

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How common is PTSD?

![Graph showing the prevalence of PTSD in the population](image)

Only about 7% develop PTSD in their lifetime.

Criterion A: Traumatic Event

- Directly experiencing a traumatic event
- Witnessing, in person, an event that happened to someone else
- Learning about the violent or unexpected death of a friend or family member
- Experiencing repeated or extreme exposure to aversive details of traumatic events

Symptom Clusters

1. Reexperiencing symptoms
2. Avoidance or numbing symptoms
3. Hyperarousal symptoms

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Symptom Clusters: Intrusions (Re-experiencing) (Criterion B)

- Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s)
- Recurrent, distressing dreams related to the traumatic event(s)
- Dissociative reactions (e.g., flashbacks)
- Intense or prolonged psychological distress at exposure to trauma reminders
- Marked physiological reactions to trauma reminders

Symptom Clusters: Persistent Avoidance (Criterion C)

- Effortful avoidance of distressing memories, thoughts, or feelings related to the traumatic event(s)
- Effortful avoidance of external reminders (e.g., people, places, conversations, situations) related to the traumatic event(s)

Symptom Clusters: Negative changes in beliefs and feelings (Criterion D)

- Persistent, exaggerated negative beliefs about oneself, others, and/or the world
- Distorted blame of self or others
- Persistent negative emotions
- Difficulty feeling positive emotions
- Feeling detached or cut off from others
- Diminished interest or participation in significant activities
- Difficulty remembering important aspects of the trauma

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Symptom Clusters: Alterations in arousal and reactivity (Criterion E)

- Irritable behavior and angry outbursts
- Reckless or self-destructive behavior
- Hypervigilance
- Exaggerated startle response
- Problems with concentration
- Sleep disturbance

Prevalence rates, by service era

- 11-20%: About 11-20 out of every 100 veterans who served in Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) have PTSD in a given year.
- 12%: About 12 out of every 100 veterans who served in the Gulf War (Desert Storm) have PTSD in a given year.
- 15%: About 15 out of every 100 veterans who served in Vietnam have PTSD in a given year.

Why do some people get PTSD while others do not?

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Comorbidity: PTSD often co-occurs with other mental health problems. 80% have one or more mental health problems (depression, anxiety, and substance-use disorders). 20% have no other mental health problem.

Other Co-occurring Problems
- Reduced quality of life
- High or unstable income
- Increased risk of suicide
- Impaired ability to work

Recovery is possible!
- Reduce symptoms
- Effective management
- Improve quality of life

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How can PTSD be treated?

Both medication and psychotherapy are effective, but psychotherapy is more effective.

How effective are these treatments?

Both medication and talk therapy can help to treat your symptoms. Your customized treatment plan may include one or more of these options.

Evidence-based Psychotherapy Treatments

- First line psychotherapies:
  - Trauma-focused psychotherapy that includes components of exposure and/or cognitive restructuring, such as:
    - Prolonged Exposure (PE)
    - Cognitive Processing Therapy (CPT)
    - Eye Movement Desensitization and Reprocessing (EMDR)

Cognitive Behavioral Therapy (CBT) Works

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Evidence-based Pharmacological Treatments

- First line medications:
  - Selective Serotonin Reuptake Inhibitors (SSRIs)
    - E.g., paroxetine (Paxil), sertraline (Zoloft), fluoxetine (Prozac)
    - Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)
      - E.g., venlafaxine (Effexor)
  - Warning: Benzodiazepines (e.g., Xanax, Valium, Klonopin)
    - Limited efficacy
    - Increased safety concerns – potential for harm
    - Not recommended for PTSD

Objective #2

RESOURCES AND SERVICES

National Center for PTSD
http://www.ptsd.va.gov

- Provide education about PTSD and effective PTSD treatments
- Make available resources to promote treatment engagement
- Develop tools to foster self help and symptom management

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PTSD Basics
- Understanding PTSD and PTSD Treatment is a booklet that explains basic information about:
  - What is PTSD?
  - What can cause PTSD?
  - What are the symptoms of PTSD?
  - What do I do if I have symptoms?
  - How do I know if I have PTSD?
  - Why get treatment for PTSD?
  - Common questions about treatment
  - What happens during PTSD treatment?
  - How do I choose a mental health provider?
  - Where can I go to get help?

Animated Whiteboard Videos
- Short (~3 minute), engaging videos about PTSD and effective treatments

About Face
http://www.ptsd.va.gov/apps/AboutFace/

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VETERANS HEALTH ADMINISTRATION

PTSD Treatment Decision Aid
http://www.ptsd.va.gov/decisionaid

Mobile Apps

- The National Center for PTSD has partnered with a number of organizations to develop a variety of mobile apps.
- Apps are focused on PTSD, related health problems (e.g., insomnia, alcohol use, etc.), or general well-being.
- There are apps for patients, providers, and for use with patient-provider dyads.

PTSD Coach

- PTSD Coach mobile app – more than 275,000 downloads in 98 countries.
- App provides:
  - Education about PTSD and PTSD treatment
  - A self-assessment tool
  - Portable skills to address acute symptoms
  - Direct connection to crisis support
- Used as stand-alone education and symptom management tool, or with face-to-face care.
- Tools are easily accessible when they are needed most.

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PTSD Coach Online
http://www.ptsd.va.gov/apps/ptsdcoachonline/default.htm

- PTSD Coach Online offers an expanded suite of 17 tools to help manage symptoms (e.g., problem solving, challenging cognitions).
- Users can choose a tool based upon a current problem or a full list of tools.
- Video instructions from “coaches” are available for each tool.

PTSD Family Coach

- PTSD Coach is for family members of those living with PTSD.
- App provides:
  - Education about PTSD and self-care
  - Information to help take care of your relationship and children
  - Resources to help a loved one get treatment for PTSD
  - Tools to manage stress and build social networks
  - Tracking for stress level over time

Printable Materials to Share
http://www.ptsd.va.gov/about/press-room/Materials_for_Printing.asp

- A variety of handouts, posters, brochures, and flyers
- Intended for veterans, families, and general public knowledge
- Emphasis on understanding PTSD, co-occurring conditions, treatment, as well as more general readjustment issues

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Where to Get Help: Benefits (VBA)

- Connect to your local Regional Benefit Office
  - Location: [Link]
  - CA locations: Oakland, Los Angeles, San Diego

- Find your local County Veterans Service Officer (CVSO)
  - Assistance and advocacy in connecting veterans and their families with service and benefits
  - County locations: [Link]

Where to Get Help: Health Care (VHA) Eligibility & Enrollment

- Eligibility Criteria: [Link]
  - Served in the military
  - Separated under any condition other than dishonorable
  - Minimum duty requirement (24 consecutive months)

- Enrollment
  - Complete VA Form 10-10EZ
  - [Link]
  - For assistance:
    - Call 1-877-222-VETS (8387) for help completing the form
    - Contact the Enrollment Coordinator at your local VA health care facility
    - Contact a National or State Veterans Service Organization

Where to Get Help: Health Care (VHA) Locations

- Hospitals and Community Based Outpatient Clinics
  - Hospital & Clinic Locator: [Link]

- Vet Centers
  - Readjustment Counseling for veterans and their families
  - For those who served in a combat theater or area of hostility, experienced MST, provided mortuary services, operated unmanned aerial vehicles in support of combat operations
  - Bereavement counseling
  - CA Locations: [Link]
Where to Get Help: Health Care (VHA) PTSD Treatment

- All VA Medical Centers provide PTSD care, as well as many VA clinics
- Some clinics have specialized PTSD programs
  - VA PTSD Program Locator: https://www.va.gov/directory/guide/PTSD.asp
  - Within CA: https://www.va.gov/directory/guide/state_PTSD.cfm?STATE=CA
- PTSD services may also be provided over telehealth
- Comprehensive resource list: "Where to get help for PTSD"

Objective #3
COMMON MISCONCEPTIONS

About trauma exposure and/or having PTSD:
- You can only have PTSD from combat
- PTSD is a lifelong, chronic disease
- Having PTSD means I am weak, crazy, broken, or damaged

About recovery:
- It is too late for me to recover
- Everyone who served in combat has PTSD

About services:
- I am not eligible for VHA services because I am not service connected
- I can only get treatment for PTSD at a VA hospital

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Objective #4: INTERACTING WITH VETERANS WHO MAY HAVE PTSD

• Many veterans will not know or disclose if they have PTSD
• Provide information and assistance connecting them to VBA benefits and VHA services
• Focus questions on ways they need help – what do you need to know in order to help them?
  – Talking about specifics of military service, including deployments, may be personal or triggering
  – Trauma exposure or details are not needed
• Be mindful of personal space (e.g., approaching from behind, physical touch, sudden movements)
• Offer validation, normalization, and gratitude
• Instill hope

Thank you!

Laura Wiedeman, Psy.D.
925.372.2277
Laura.Wiedeman@va.gov

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