

lived in fear for six months. Cold sweats and anxiety attacks plagued her days and bad dreams haunted her nights. For a long time, she even avoided leaving her house for fear of strangers and dark streets.

With counselling and support from her family, Mdm Teh - now in her 50s - eventually shed the terror of the experience. But, although the incident happened more than 20 years ago, she still feels a tinge of fear when she drives into an underground car park. "I always park near a well-lit lift lobby," she says.

While flashbacks, nightmares and anxiety can be considered a 'normal' response to a stressful event in the first few days after a traumatic event has occurred, Mdm Teh's persistent symptoms — that stemmed from her experience are part of what's known as post-traumatic stress disorder (PTSD).

If left untreated, this disorder can seriously hinder an individual's ability to function normally in society, and may possibly even open the door to other psychological conditions.

Memory, the Enemy

According to Dr Richard Mellor, Associate Consultant, General Psychiatry, at the Institute of Mental Health, PTSD is an emotional illness that can develop after exposure to a highly-traumatic event.

"Although this disorder is popularly associated with war veterans, the most common sufferers are those who have been subjected to physical assault or rape ... and they are most often female."

"Examples of other events that may trigger PTSD include a severe accident or natural disaster, the diagnosis of a life-threatening illness and even invasive medical procedures, particularly in children."

PTSD is diagnosed when the psychological responses (see next page) to an event persist for more than a month. "The symptoms are usually classified under three different groups: persistent reexperience of the traumatic event, avoidance of any reminders of this event, and finally, hyperarousal symptoms," says Dr Mellor.

In the first category, symptoms usually take the form of reliving the stressful event in the form of intrusive flashbacks, vivid memories or recurring dreams.

The second cluster of symptoms includes the avoidance of circumstances that resemble or are associated with the original trauma. Hyperarousal symptoms refer to persistent symptoms of increased psychological sensitivity, such as



hypervigilance - constantly scanning the environment for threats - or an exaggerated startle response.

Scientists believe that in experiencing a highly traumatic event, a part of the brain known as the amygdala - a group of brain neurons that perform an essential role in the regulation of emotions and memory formation - is activated while other areas of the brain that usually act to inhibit activation of the amygdala shrink. "Such changes in the structure and functioning of the brain are thought to be major factors in the development of PTSD," says Dr Mellor.

Healing the Scars

For sufferers, the repercussions of letting PTSD go untreated can be disabling. Dr Mellor notes that chronic sufferers are likely to continue to experience symptoms that may in turn have a wide range of increasingly negative consequences on their lives. In severe cases, these symptoms may even cause sufferers to develop a feeling of hopelessness and suicidal thoughts.

"If the PTSD becomes chronic, it will increasingly be associated with other mental health disorders such as clinical depression, as well as the possible development of unhealthy coping mechanisms such as alcohol abuse or the use of illicit substances," he cautions.

It is, however, difficult to predict how well people recover. Some who do not receive any psychiatric or psychological support can recover completely with time; others do not. Early intervention is still the best course of action.

THE MOST COMMON SUFFERERS OF PTSD **ARE THOSE WHO HAVE BEEN SUBJECTED** TO PHYSICAL ASSAULT OR RAPE... AND THEY ARE MOST OFTEN FEMALE

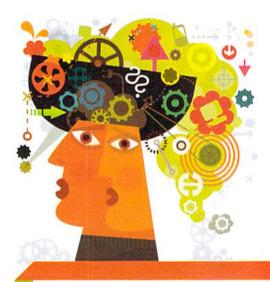
TRAUMA TRIGGERS

PTSD can arise from experiencing or witnessing:

- O Physical or sexual assault
- O Vehicular or industrial accidents
- O Natural disasters
- O Drowning or physical injury
- O Invasive or painful medical procedures

"Those without other psychiatric disorders and who are treated early, and who are well-supported emotionally by friends and family, are most likely to make a recovery although there may often be some residual symptoms," says Dr Mellor.

Treatment usually takes the form of psychotherapy such as cognitive-behavioural therapy or group psychotherapy, or a combination thereof. If needed, psychotropic medication such as antidepressants are prescribed. These have a specific action on the core symptoms of the disorder. w



DEEP IMPACT

Experiencing a traumatic event can result in emotional distress that includes:

- Flashbacks or nightmares
- Jumpiness
- Fearfulness, especially when near the location the event occurred
- Persistent sadness
- Anxiety attacks (cold sweats, hyperventilation, etc)
- Poor attention span, loss of appetite or focus

These responses are often observed in the first few days following a traumatic event, but persistent symptoms could spell a chronic problem. If these symptoms disrupt your daily activities and performance in school or work, seek professional help. Speak with your general practitioner who will be able to make the most appropriate referral to mental health services for professional help. Or call the Institute of Mental Health at 6389 2200 for an appointment.