

Post-traumatic stress disorder (PTSD)

This factsheet has information about the symptoms and causes of post-traumatic stress disorder (PTSD). It says who might get PTSD and what treatment is available.



KEY POINTS

- You may get post-traumatic stress disorder (PTSD) after a traumatic experience like a serious assault, road traffic accident or natural disaster.
- Symptoms include having traumatic memories or dreams, avoiding things that remind you of the event, not being able to sleep and feeling anxious. You may feel isolated and withdrawn.
- Many people have some symptoms of trauma after a traumatic event. But for most people these go away with time and do not develop into PTSD.
- If you have PTSD, your doctor should offer you therapy. They might suggest medication, but this is not a standard treatment.

This factsheet covers:

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1. What is post-traumatic stress disorder (PTSD)?

Post-traumatic stress disorder is an illness that you might get after a serious and frightening experience, including:

- a natural disaster like an earthquake or flood,
- war,
- terrorist attacks,
- serious accidents,
- seeing someone die, or
- violence against you.

The illness makes you re-live the event, which causes distress and difficulty in your day-to-day life. Your symptoms may become worse if you see, hear or smell something that reminds you of the trauma.

2. What are the symptoms of PTSD and how is it diagnosed?

Some of the symptoms are:

- having flashbacks, dreams or nightmares about the event,
- not being able to feel emotions,
- not feeling connected to other people,
- not enjoying activities you used to like,
- staying away from situations that remind you of the event,
- feeling on edge, being startled easily and always on the look out for threats, and
- having problems sleeping.¹

You can get symptoms of PTSD in the hours or days after a traumatic event. For a lot of people, these symptoms become less severe as they come to terms with what has happened. When these symptoms do not go away, there is a possibility you might have PTSD.

If you experience a traumatic event, it is important to get support as soon as you can. Your doctor might not think you need treatment straight away. If you have mild symptoms and you see your doctor within 4 weeks of the trauma, they may ask you to wait a month to see how things go.² This is called 'watch and wait'.

3. What types of trauma illnesses are there?

PTSD

PTSD usually develops in the first six months after trauma. In some people, symptoms may take years to develop. This is called 'delayed-onset PTSD'. This makes up less than 1 in 5 cases.³ There is no difference in the symptoms of PTSD and delayed-onset PTSD.

Complex PTSD

Complex PTSD is not the same as PTSD, and the treatment options are different.

Complex PTSD describes personality changes you experience after ongoing trauma, such as abuse. You may: ⁴

- find it hard to relate to other people,
- feel hopeless, and
- have difficulty trusting others.

There may be some overlap between complex PTSD and borderline personality disorder (BPD). People with complex PTSD may benefit from treatments that work for people with BPD.⁵

You can find more information about '**Borderline Personality Disorder**' at www.rethink.org. Or contact 0121 522 7007 and ask for a copy to be sent to you.

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4. What causes PTSD?

PTSD is caused by traumatic experiences, like the following.

- Violence against you
- Childhood abuse
- A car accident
- Military combat or being in a war zone
- A natural disaster like an earthquake or fires
- Seeing someone die

Not everyone who experiences these things develops PTSD. The risk of getting PTSD depends on how the experience affects you. PTSD is more likely if the traumatic event:⁶

- is unexpected,
- goes on for a long time,
- involves being trapped,
- is caused by people,
- causes many deaths,
- causes mutilation, or
- involves children.

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5. How is PTSD treated?

There are several different treatment options that you may find helpful.

Trauma-focused cognitive behavioural therapy (CBT)

Cognitive behavioural therapy (CBT) helps you deal with your symptoms by making changes to how you think and act. The therapist may ask you to do activities or remember things that you find difficult to try to help you deal with your symptoms.⁷

Stress management

This helps you to develop skills such as:

- relaxation,
- assertiveness,
- positive self-talk, and
- stopping negative emotions.

Eye movement desensitisation and reprocessing (EMDR)

EMDR helps the symptoms of PTSD. You will make eye movements while thinking about the traumatic event. Therapists think that this works by making your brain deal with painful memories in a different way.

Medication

Medication is not helpful for most people with PTSD. But your doctor might offer you medication if:⁸

- you find it hard to sleep,
- you have another mental illness or
- you would prefer to avoid therapy.

Go to www.rethink.org for specific information about:

- Talking therapies
- Antidepressants
- Medication – choice and managing problems

Or call 0121 522 7007 and ask for a copy to be sent to you.

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6. What treatment should my doctor offer me?

The National Institute for Health and Care Excellence (NICE) says that the NHS should offer you trauma-focused therapy. This could be cognitive behavioural therapy (CBT) or eye movement desensitisation and reprocessing (EMDR).⁹

If you have depression and PTSD, your doctor might treat your PTSD first. Your depression may improve after you get treatment for PTSD. If your depression is so bad it stops you from taking part in therapy for your PTSD, your doctor might treat your depression first.¹⁰

If you have a drug or alcohol problem, you may need treatment for this before you can start therapy.¹¹

The National Institute of Health and Clinical Excellence (NICE) guidance on PTSD does not apply to complex PTSD.

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7. What can I do if I am not happy with my treatment?

If you are not happy with the treatment you then you can:

- talk to your doctor about your treatment and ask for a second opinion if you feel it would help,
- get an advocate to help you speak with your doctor,
- contact Patient Advice and Liaison Service (PALS) and see if they can help, or
- make a complaint.

There is more information about these options below.

Second opinion

You should talk to your doctor about your treatment first and see if you can resolve the situation with them. You can mention the NICE guidelines if you feel they are not offering you the right treatment.

If your doctor cannot think of any other treatment options, you could ask for a second opinion. You cannot demand a second opinion, but your doctor might agree if they think it would help with treatment options.

Advocacy

An advocate is not employed by the NHS, but they understand the system and your rights. They can go to meetings with you to try to help you get what you need from the NHS or social services.

'PALS'

The Patient Advice and Liaison Service (PALS) at your NHS trust can try and help you with any problems or issues you have with an NHS service. You can find your local PALS' details at [www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/LocationSearch/363](http://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/LocationSearch/363).

You can find out more about:

- Second opinions
- Advocacy
- Complaints

at www.rethink.org. Or contact 0121 522 7007 and ask for a copy to be sent to you.

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8. What self-care and management skills can I try?

You can learn to manage your symptoms through self-care. Self-care is how you take care of your diet, exercise, daily routine, relationships and how you recognise signs that you are becoming unwell.

Try the following resources for information on how to deal with the symptoms of PTSD.

- Mood Juice PTSD self-help
www.moodjuice.scot.nhs.uk/posttrauma.asp
- Northumberland, Tyne and Wear NHS self-help leaflets
www.ntw.nhs.uk/pic/selfhelp

You can find more about 'Recovery' at www.rethink.org. Or call 0121 522 7007 and ask us to send you a copy.

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9. What risks are associated with PTSD?

Alcohol and drug use

You might use drugs or alcohol to help you forget problems, or to help you to sleep.^{12,13} But drugs and alcohol are likely to make your symptoms worse in the long-term. Make sure you get help as soon as you can to stop things getting worse.

Depression, anxiety and suicidal thoughts

PTSD may lead to depression, which can cause suicidal thoughts. There is a risk of getting other anxiety disorders like panic disorder or generalised anxiety.

Physical health issues

PTSD can give you physical symptoms such as dizziness and blurry vision during times of stress.¹⁴

In the long-term, people with PTSD may get physical illnesses such as heart disease, high blood pressure and obesity.¹⁵

Go to www.rethink.org for specific information about:

- Psychosis
- Depression
- Anxiety
- Suicidal feelings – How to cope

Or call 0121 522 7007 and ask for a copy to be sent to you.

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10. Information for carers, friends and relatives

Support for you

If you are a carer, friend or relative of someone living with PTSD, you can get support.

You could get in touch with carer support groups or sibling support groups. You can search for local groups in your area or the Rethink Mental Illness Advice Service can search for you.

You can ask your local authority for a carer's assessment if you need more practical support to help care for someone.

As a carer you should be involved in decisions about care planning. There are rules about information sharing and confidentiality which may make it difficult for you to get all the information you need in some circumstances.

You can find out more information about:

- Carers' Assessments and Support Planning
- Confidentiality and information sharing – for carers, friends and family
- Welfare benefits for carers

at www.rethink.org. Or contact 0121 522 7007 and ask for a copy to be sent to you.

Supporting the person you care for

You might find it easier to support someone with PTSD if you understand their symptoms, treatment and self management skills. You can use this information to support and encourage them to get help and stay well.

Think about what you can do if you are worried about someone's mental state or risk of self harm. It will help to keep details of their mental health team and discuss a crisis plan with them.

You can find out more information about:

- Supporting someone with a mental illness
- Getting help in a crisis
- Suicidal thoughts – how to support someone
- Responding to unusual behaviour

at www.rethink.org. Or contact 0121 522 7007 and ask for a copy to be sent to you.

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**Anxiety UK**

User-led organisation which supports people with anxiety disorders, including PTSD.

Telephone: 08444 775 774 (Mon-Fri 9:30-17:30)

Website: www.anxietyuk.org.uk

ASSIST (Assistance Support and Self Help in Surviving Trauma)

Not-for-profit organisation offering therapists trained in trauma-focused CBT, EMDR and treating complex PTSD.

Telephone: 01788 560 800

Web: www.assisttraumacare.org.uk

Combat Stress

Charity offering support to ex-Service men and women of all ages with mental ill-health.

Telephone: 0800 138 1619 (24 hours)

Address: Tyrwhitt House, Oaklawn Road, Leatherhead, Surrey, KT22 0BX

Email: contactus@combatstress.org.uk

Website: www.combatstress.org.uk

Freedom from Torture

Support, practical advice and treatment for survivors of torture. Has access to language interpreters.

Telephone: 020 7697 7777 (admin)

Address: 111 Isledon Road, London, N7 7JW

Email: via website <http://www.freedomfromtorture.org/webform/7807>

Website: <http://www.freedomfromtorture.org/>

Rape Crisis

Support for survivors of rape and sexual assault.

Telephone: 0808 802 9999 (Helpline open 12:00-14:30 and 19:00-21:30 daily)

Address: BCM 4444, London, WC1N 3XX (email preferred)

Email: rcewinfo@rapecrisis.org.uk (general enquiries)

Website: www.rapecrisis.org.uk

UK Psychological Trauma Society

Online list of UK trauma services.

Website: <http://www.ukpts.co.uk/trauma.html>

Veterans UK

Government body offering support for veterans.

Telephone: 0808 1914 218 (open 7.30 - 18:30 Monday to Thursday; and 7.30 - 17:00 Friday)

Address: Veterans UK, Ministry of Defence, Norcross, Thornton Cleveleys, FY5 3WP

Email: veterans-uk@mod.uk

Website: www.veterans-uk.info

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¹ World Health Organization. *The ICD-10 Classification of Mental and Behavioural Disorders Clinical descriptions and diagnostic guidelines*. Geneva: WHO; 2015 at F43.1.

² National Institute for Health and Care Excellence. *Post-traumatic stress disorder: The management of PTSD in adults and children in primary and secondary care*. Clinical Guidance 26. London: Gaskell and the British Psychological Society; 2005. Page 18.

³ As note 2, paragraph 2.6.1.

⁴ As note 2, paragraph 2.3.6.1.

⁵ de Zulueta, F. Post-traumatic stress disorder and attachment: possible links with borderline personality disorder. *Advances in Psychiatric Treatment* 2009, 15: 172–180. At 173.

⁶ Royal College of Psychiatrists. *Post-traumatic Stress Disorder* <http://www.rcpsych.ac.uk/mentalhealthinfo/problems/ptsd/posttraumaticstressdisorder.aspx> (Accessed July 2015)

⁷ As note 2, paragraphs 5.2.1 – 5.2.1.1.

⁸ As note 2, paragraphs 11.9.3.1 – 11.9.3.6.

⁹ As note 2, paragraph 11.9.2.1.

¹⁰ As note 2, paragraphs 11.8.2.1. and 11.8.2.3.

¹¹ As note 2, paragraph 11.8.2.4.

¹² As note 2, page 13.

¹³ As note 2, paragraph 2.6.3.

¹⁴ Gupta, MA. Review of somatic symptoms in post-traumatic stress disorder. *International Review of Psychiatry* 2013 Feb; 25(1): 86-99. Abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/23383670> (accessed 8th July 2015).

¹⁵ McFarlane, A.C. The long-term costs of traumatic stress: intertwined physical and psychological consequences. *World Psychiatry* 2010 Feb; 9(1) 3-10.

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This factsheet is available
in large print.



Rethink Mental Illness Advice Service

Phone 0300 5000 927
Monday to Friday, 9:30am to 4pm
(excluding bank holidays)

Email advice@rethink.org

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We'd love to know if this information helped you.

Drop us a line at: feedback@rethink.org

or write to us at Rethink Mental Illness:

RAIS
PO Box 17106
Birmingham B9 9LL

or call us on 0300 5000 927.

We're open 9:30am to 4pm
Monday to Friday (excluding bank holidays)



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www.rethink.org

Need more help?

Go to www.rethink.org for information on symptoms, treatments, money and benefits and your rights.

Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

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