

Simple and Complex PTSD- the history, differences and what they mean for
For Families and Victims:

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Post-Traumatic Stress Disorder (PTSD) has a long history and many previous names before being added to medical books in 1980. Those names included “shell-shock”, “estar roto” (being broken) and “combat fatigue”. Its symptoms, which are now clearly understood are flashbacks, “night terrors”, constantly reliving or being reminded of the event(s) which caused the condition; emotional, social and physical withdrawal from friends, family and society- the “hermit syndrome”. Other symptoms are self-medication (often with alcohol, prescription or OTC meds and street drugs) extreme risk-taking, periods of deep Depression, suicide; sudden, sometimes violent mood swings, sleeplessness, loss of interest in life, including personal appearance and hygiene.

Another risk is long-term physical illness-often caused by constant Stress releasing excess amounts of the hormone Cortisol, which in combination with other factors lowers the body's immune system making illness more likely and worse when it does happen. PTSD can cause hair to fall out or go white-virtually overnight- as well as the loss of any of the 5 senses, e.g. being “struck dumb” which is too often misdiagnosed by poorly qualified, sloppy or professionals as “Dullness” or even Autism; sometimes understandably. Autism is more common in military families than the civilian population in general (babyandbump.momtastic.com Feb 2015). Some lose control over a limb or limbs. These affects are NOT imaginary -PTSD changes people, Personality and Physically!

Perhaps though the most easily detectable sign is “the startle response”; someone with PTSD will jump violently or over-react in another way to small things- noise, a touch on the shoulder, an unexpected movement. It is called “hypervigilance” which is always being keyed-up, or “on-guard” (International Classification of Diseases-ICD-10 Manual: Section F43, 1).

Sadly many Doctors fail to spot PTSD and far too often note the patient as either “neurotic” (especially when the victim is female or a child) or a hypochondriac. They do not understand how old PTSD is. Examples include accounts from the Spartan army of King Leonidas (“300”), his physicians knew the symptoms and sent soldiers home early to recover, the same applies to the armies of Alexander the Great and Julius Caesar (*Ancientimes.Blogspot*. 01.2013). It is described in The Bible; the book of Job (9:28 and 16:6) and more recently in the diaries and poems of soldiers, doctors, nurses *and later their families*, from both World Wars.

Typically we think of PTSD as resulting from a single event; 9/11 survivors and rescuers, soldiers in combat, rape, earthquake or crash victims; and those are the causes of *Simple* PTSD. *Complex* PTSD has a different profile, although the symptoms are almost the same. It was first identified in the 1990's following the First Gulf War. It affects a different and less random group of people: doctors, nurses, disaster aid workers, victims of long-term illness and caregivers who look after disabled relatives, especially wounded Veterans who already have Simple PTSD. Those who grow up in poverty or live in abusive environments are very likely to have Complex PTSD.

The **big** difference is that it develops slowly- usually over years-there are no sudden life changes or events - it happens as part of the process of emotional numbness which defines both forms of PTSD, leaving the victim empty of any spark inside.

The best comparison is to think of a car battery: We are all born with an “Emotional battery at full capacity” (ICH); in times of stress it runs low, in happy times it recharges normally: But a sudden, massive overload will blow and flatten it-that is S-PTSD. With C-PTSD the discharge is like a slow leak-a damaged relay or dodgy connection-ALL THE TIME, so full re-charging is impossible. The result is the same; the “Emotional battery” is drained and lifeless.

S-PTSD is not preventable unfortunately, but it is very treatable provided that the diagnosis is Early (Early Intervention always produces the best outcome to any situation) and Accurate.

With C-PTSD a smart friend, relative or therapist can spot the symptoms before the battery goes flat and take the appropriate steps to prevent it. Yes! C-PTSD with Early Intervention (As King Leonidas knew) is preventable, that is why caregivers etc. need our support-because although much can be done to improve the lives of sufferers, once a person has PTSD they are NOT fully curable, they are changed and will never be exactly the same as before.

“Sometimes skin and bone heal before the heart and mind.” (ICH).

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