PTSD and TBI

Rita Wood, Psy.D.
Assistant Chief of VA Police Aaron Yoder
Outline

• Prevalence of Post Traumatic Stress Disorder
• What is a traumatic event?
• Acute Stress Disorder (ASD)
• Risk Factors for PTSD
• Impact of a traumatic event
• PTSD symptoms
• Problems often associated with PTSD
• Traumatic Brain Injury (TBI)
• Types of TBI
• Symptoms of TBI
7 or 8 out of every 100 people (7-8% of population) will have PTSD at some point in their lives.

About 8 million adults have PTSD during a given year.

About 10 of every 100 (10%) of women developed PTSD sometime in their lives compared with about 4 of every 100 (4%) men.

Women are more likely to experience sexual assault.

Sexual assault is more likely to cause PTSD than many other events.

References: https://www.ptsd.va.gov/public/PTSD-overview/basics/how-common-is-ptsd.asp
What is a Traumatic event?

An emotional response to a traumatic event like:
- Severe motor vehicle or airplane crashes, industrial accidents
- Rape, incest
- Combat
- Assault, robbery, mugging or shooting
- Natural disaster (hurricane, earthquake, tornado)

The event is perceived and experienced as a threat to one’s safety.
Acute Stress Disorder

*Acute Stress Disorder* - a mental condition that occurs following exposure to one or more traumatic events.

- Directly experiencing the traumatic event
- Witnessing, in person (occurs to others)
- Learning that the event(s) occurs to close family member
- Lasts 3 days to 1 month after trauma exposure
Risk Factors for PTSD

Risk factors
• Gender
• Age
• Education
• Lower socio-economic status
• Previous trauma
• Personal and family psychiatric history
• Childhood abuse
• Poor social support
Impact of a Traumatic Event

• The disorder may be especially severe or long lasting when the stressor is interpersonal and intentional (torture, sexual violence).
• The greater the magnitude of the trauma, the greater the likelihood of PTSD.
• Symptom recurrence and intensification may occur in response to reminders of the original trauma, ongoing life stressors, or newly experienced traumatic events.
• For older individuals, declining health, worsening cognitive functioning, and social isolation may exacerbate PTSD symptoms.
Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s)

Recurrent distressing dreams in which the content and/or affect of the dream are related to the traumatic event(s)

Dissociative reactions (flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring

Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event(s)

Marked physiological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s)
Avoidance of or efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s)

Avoidance of or efforts to avoid external reminders that arouse distressing memories, thoughts or feelings about or closely associated with the traumatic event(s)

Inability to remember an important aspect of the traumatic event(s) (not associated with head injury, alcohol, or use of drugs)

Markedly diminished interest or participation in significant activities

Feeling of detachment or estrangement from others

Persistent negative emotional state (fear, horror, anger, guilt, shame)

Persistent inability to experience positive emotions
PTSD Symptoms (cont.)

- Sleep disturbance
- Irritable behavior and outbursts of anger (with little or no provocation) typically expressed as verbal or physical aggression toward people or objects
- Problems with concentration
- Hypervigilance
- Exaggerated startle response
- Reckless or self-destructive behavior
Problems often associated with PTSD

- Substance abuse
- Marital/relationship conflicts
- Employment issues
- Educational issues
- Guilt
- Chronic Pain
- Traumatic Brain Injury
- Suicide/Self-Harm
- Grief and loss issues
- Intense distrust
- Legal issues

Signs a veteran was in combat
Traumatic Brain Injury (TBI)

What is TBI?

• Blow or jolt to the head that disrupts the normal function of the brain
• “Mild,” "moderate" and "severe" are used to describe the effect of the injury on brain function.

Common events that cause TBI

• Falls, vehicle related collisions, violence, sports injuries, explosive blasts and other combat injuries

Traumatic Brain Injury

• External forces may include any of the following events:
  • Head being struck by an object
  • Head striking an object
  • Brain undergoing an acceleration/deceleration movement without direct external trauma to the head
  • A foreign body penetrating the head
Phineas Gage

• Phineas Gage is probably the most famous person to have survived severe damage to the brain
• Also the first patient from whom we learned something about the relation between personality and the function of the front parts of the brain
• Before the accident he had been their most capable and efficient foreman, one with a well-balanced mind, and who was looked on as a shrewd smart business man
• After the accident he was said to be fitful, irreverent, and grossly profane, showing little deference for his fellows. He was also impatient and obstinate, yet capricious and vacillating, unable to settle on any of the plans he devised for future action

https://www.uakron.edu/gage/story.dot
Types of TBI

• Penetrating head injuries occur when an object, like shrapnel, enters the brain and causes damage in a specific area.

• Closed head injuries occur when there's a blow to the head, which can happen during a fall, car accident, sporting event, or any number of different ways.
Traumatic Brain Injury

Closed Head Injuries - Coup and Contrecoup

A. The contrecoup injury to the brain occurs when the brain strikes the skull on the opposite side of impact. Once the skull has stopped moving forward, the brain continues to move backward striking the back of the skull.

B. The coup injury to the brain occurs when the brain strikes the skull on the side of impact.
Physical Signs of TBI

- Headache
- Difficulty sleeping
- Sleeping more than usual
- Dizziness
- Balance problems
- Nausea/vomiting
- Fatigue/drowsiness
- Sensitivity to light
- Ringing in the ears
- Problems with speech

Cognitive Signs of TBI

The following are typically attributed to injuries to the frontal lobe (front of the head):
- Concentration problems
- Temporary gaps in memory
- Attention problems
- Slowed thinking
- Difficulty finding words
Emotional Signs of TBI

These are typically associated with injuries to the temporal lobe (side of the head)

- Irritability
- Anxiety
- Depression
- Mood swings
- Anger

Clinical Presentation Overlapping Symptoms

PTSD
- Flashbacks
- Nightmares

TBI
- Headaches
- Dizziness

Overlapping Symptoms:
- Poor Concentration
- Memory Impairment
- Sleep Disturbance
- Depression
- Anxiety
- Irritability
Recovery is different for every person. Most people recover from a concussion. Symptoms usually begin to improve within hours and typically resolve completely within days to weeks. Even after more than one concussion, full recovery is expected; however, every time an additional concussion is sustained, healing time might take longer. (Defense and Veterans Brain Injury Center)
Veteran Affairs Police

• How do we deal with veterans suffering with PTSD/TBI?

  ANSWER = Using the tenants of Interpersonal Effectiveness

• What type of officer is most successful in our field of work?

  ANSWER = An Officer who is sophisticated enough adjust his demeanor and tactics to the situation at hand.
“No Excuses”

Video: https://www.youtube.com/watch?v=ErASUGL00gQ
“Inmates save deputy’s life”

- [https://www.youtube.com/watch?v=TSQ3jao_DTU](https://www.youtube.com/watch?v=TSQ3jao_DTU)
Video Takeaways

- Moon “is a good guy”
- The inmates liked Officer Moon
- Deputy Simmons has a perfect balance of “authority and diplomacy with no attitude”
- Deputy Simmons is “disarming and kind”
- “You know what it is it’s his smile...how can you be mad...”
- “He’s so kind...”
Interpersonal Effectiveness

• Builds and sustains positive relationships (Both Simmons & Moon)
• Handles conflicts and negotiations effectively (Simmons)
• Builds and sustains trust and respect (Moon)
• Collaborates and works well with others (Moon)
• Shows sensitivity and compassion for others (Simmons)
• Encourages shared decision making
• Recognizes and uses the ideas of others
• Communicates clearly (Simmons)
• Listens actively to others (Simmons)
• Honors commitments and promises
Adjusting to Situation at Hand - Burger King Your Way & Critical Incident Spectrum
Adjusting to Situation at Hand

The officer on the left writes tickets with Deputy Simmons. The above picture demonstrates his general demeanor when dealing with offenders and petty offenses.

The officer below works with Officer Moon in jail. He never takes his sunglasses off, even when inside. He doesn’t speak respectfully to inmates and is mean when it’s not called for.
Adjusting to the situation at Hand

Understand the spectrum of services we supply all the way between Burger King Your Way and Critical Incident and adjust appropriately.

Don’t view everything as a critical incident and just as importantly understand that you can’t always give people what they want.

Be flexible and adjust to the situation.
Summary

• How do we deal with veterans suffering with PTSD/TBI?
  ANSWER = Using the tenants of Interpersonal Effectiveness

• What type of officer is most successful in our field of work?
  ANSWER = An Officer who is sophisticated enough adjust his demeanor and tactics to the situation at hand.

PRACTICE YOUR CRAFT!!!
Questions?