



RESPECT-Mil

# RESPECT - Mil

REGARDING  
PTSD

INFORMATION FOR SOLDIERS

# POST-TRAUMATIC STRESS DISORDER: WHAT YOU NEED TO KNOW

## What is PTSD?

PTSD is a condition that may occur after you've experienced or witnessed a life-threatening event. There are some events known to trigger PTSD: military combat, natural disasters, serious accidents, or violent personal assaults like rape.

## History

Post-Traumatic Stress Disorder, or PTSD, isn't a new or recent phenomenon. It's a disorder that can be traced as far back as the Civil War.

PTSD has been observed in all U.S. veteran populations that have been studied, including U.S. veterans of World War II, Korea, and the Persian Gulf as well as UN peacekeeping forces deployed to international war zones. Military veterans from other countries experience it too.

PTSD can affect *anyone* - men, women, children who are from all walks of life.

## Symptoms include:

- Flashbacks: images or thoughts of a traumatic event that interrupt daily activities; nightmares; sudden flashbacks of the event; severe emotional and/or physical reactions to memories.
- Emotional Distance: avoiding thinking or talking about the event; avoiding situations similar to it; experiencing memory loss of the event; loss of interest in daily activities; feeling distant or cut off; experiencing emotional numbness and/or a sense that the future has been or will be cut short.
- Agitation: experiencing insomnia; poor concentration; outbursts; being watchful, on guard and/or easily startled.

People with PTSD may experience several of these symptoms for a month or more. The symptoms may be severe enough to significantly interfere with daily life.

## HOW IS PTSD TREATED?

PTSD is treatable. Medication and psychotherapy are both proven, effective forms of treatment. The most widely used drugs to treat PTSD are the selective serotonin reuptake inhibitors (SSRIs) such as paroxetine (Paxil), sertraline (Zoloft), and fluoxetine (Prozac).

There are two forms of psychotherapy that are effective in treating PTSD: Cognitive Behavioral Therapy (CBT) and Prolonged Exposure Therapy (PE). With CBT, you learn to use relaxation strategies to lessen your symptoms. You also learn how to recognize and minimize negative thoughts and reactions. When you undergo PE, you experience the memory of the traumatic event several times under safe and controlled conditions. This helps you become desensitized to the trauma.

## WHAT ABOUT MEDICATION?

If medication is prescribed to treat your PTSD, the following simple rules will help you get better sooner.

### **Key facts about PTSD medication:**

- It only works if taken every day
- It is not habit forming or addictive
- Benefits appear slowly
- You must continue taking medicine even after you begin to feel better
- Mild side effects are common and usually will improve with time
- Call your clinician if you are thinking about stopping the medication
- The goal of treatment is remission, which may take a few tries

A diagnosis of PTSD does not automatically prevent deployment. Medications can be and are used during deployment. Participation in the RESPECT-Mil program does not start the Chapter Discharge or Medical Board Process.

If you have any questions or problems regarding your medication, please contact your care provider as soon as possible.

## **COUNSELING BENEFITS**

Counseling has been shown to be as effective as antidepressants in treating people with PTSD. More than half of people with mild to moderate PTSD respond well to it. Counseling sessions are not focused on talking about your childhood. Rather, the sessions focus on your current concerns and effective ways to treat them.

While the time spent in counseling differs among individuals, people with PTSD can typically expect to attend a weekly 45 to 60 minute session for six to 20 weeks. Cognitive Behavioral Therapy (CBT) and Prolonged Exposure Therapy (PE) have been scientifically proven to be effective for PTSD relief. Ask your counselor about these forms of therapy.

Counseling is provided by a trained behavioral health specialist and is available on post in several locations. Other forms of counseling are also available through the clergy, your chaplain, or through specific support groups in your area.

### **Types (settings) of counseling:**

Individual – you alone with a counselor

Group – you, a counselor, and other people with similar concerns

Family – you, a counselor, and your immediate family members

Marriage – you, a counselor, and your spouse

### **Making the most out of counseling**

- Keep all of your appointments with your counselor.
- Be honest and open about how you feel and what issues are concerning you.
- Feel free to ask whatever questions come to mind.
- Work cooperatively with your counselor, and complete any “homework” assignments you may be asked to do between sessions. These will be simple and clear.
- Keep appointments with your Primary Care Clinician by returning to the Clinic when recommended.

If your PTSD does not noticeably improve after six to 12 weeks, your counselor may modify your treatment and may recommend medication in addition to counseling.

## **SELF-MANAGEMENT**

As noted, medications and counseling can often take a few weeks to show a noticeable benefit, but in the meantime you can and should do things to help yourself.

*A Self-Management Worksheet is included in this pamphlet.* It discusses seven focus areas of self-management. The worksheet also discusses how to improve the amount and quality of your sleep. Sleep problems are often one of the major concerns of those with PTSD.

Please review the worksheet and select the first goal you can use to start yourself on the way to feeling better. It's important to start slowly and make a few small steps at first. Your care provider(s) can help you in selecting items that will fit your own situation, lifestyle, and needs.

### **Seven areas of self-management**

1. Engage in pleasurable physical activities and change your routine if it becomes dull.
2. Make time for pleasurable activities.
3. Spend time with people who can support you.
4. Practice relaxing.
5. Set simple goals and take small steps.
6. Eat nutritious, balanced meals.
7. Avoid alcohol. Alcohol is a depressant and can make you feel more sad and alone.

**Keep the worksheet in a place where it will remind you of things you can do to help yourself. Review it routinely as you work toward feeling better.**

## HOW CAN YOU IMPROVE YOUR SLEEP?

Sleep problems are common for those with PTSD. Changing your sleep pattern can take at least six to eight weeks.

Here are some areas where you may improve your sleep.

**Avoid Caffeine:** Caffeine is a stimulant found in items such as coffee, tea, soda, and chocolate, as well as in many over-the-counter medications. Those with insomnia are often sensitive to mild stimulants, and should avoid caffeine six to eight hours before bedtime. You may want to consider a trial period of avoiding caffeine altogether.

**Avoid Nicotine:** Some smokers claim smoking helps them to relax, but nicotine is actually a stimulant. Relaxing effects may occur when nicotine first enters the system, but as it builds up, it produces an effect similar to caffeine. Avoid smoking, dipping, or chewing tobacco before bedtime, and don't smoke to get yourself back to sleep.

**Avoid Alcohol:** Alcohol is a depressant. While it might help you fall asleep, as alcohol is metabolized, your sleep can become more disturbed and fragmented. Avoid alcohol after dinner, and limit its use to small or moderate quantities.

**Cautiously Use Sleeping Pills:** Sleep medications are effective only temporarily. If taken regularly, they lose effectiveness in about two to four weeks. Over time, sleeping pills may make sleep problems worse or lead to an insomnia "rebound." Many people, after long-term use of sleeping pills, mistakenly conclude that they need them to sleep normally. Don't worry if you occasionally need to use sleeping pills, but keep their use infrequent.

**Get Regular Exercise:** Exercise in the late afternoon or early evening seems to aid sleep, but it may take several weeks to become noticeable. You should exercise hard enough to work up a good sweat, preferably for 40 minutes each day. Sporadic exercise is not likely to improve sleep, and exercising within two hours of bedtime may actually interfere with your sleep.

**Take a Hot Bath:** Spending 20 minutes in a tub of hot water one or two hours prior to bedtime can be relaxing, and may help promote sleep.

### **Make Your Bedroom a Comfortable Environment:**

**Temperature** - Extremes of heat or cold can disrupt sleep, so maintain a comfortable temperature.

**Noise** - A quiet environment is better than a noisy one. Wear earplugs or create a background of white noise, such as a fan.

**Darkness** - Wear a sleep mask or use blackout shades.

**Clocks** - Position clocks out-of-sight, since clock-watching can increase your anxiety about lack of sleep.

**Comfortable Bedding** - Be sure your mattress is not too soft or too firm and that your pillow is the right height and firmness.

**Eat a Light Snack:** A glass of warm milk, a bowl of cereal or some cheese can help promote sleep. Do not go to bed too hungry or too full.

Avoid the following foods before bed:

- Caffeinated foods like chocolate
- Gas-inducing foods like peanuts, beans, raw fruits and vegetables
- High-fat foods like potato chips or corn chips
- Heavy or spicy evening meals
- Midnight snacks, since awakening may become associated with hunger

**Avoid Naps:** Sleeping during the day can affect you at night, by making it difficult to fall asleep. You may get lighter or more restless sleep; or, you may awaken earlier in the morning. If you must nap, keep it brief (10 to 15 minutes) and only nap about eight hours after arising. Consider setting an alarm so you don't sleep for too long.

**Limit Your Time in Bed:** Don't lie in bed for too long when you're not actually sleeping. This can aggravate existing sleep problems and reduce the quality of your sleep.

If you don't fall asleep within 15 to 20 minutes, get up and do something relaxing outside the bedroom. Return to bed when you do feel sleepy (yawning, head bobbing, eyes closing, concentration decreasing). Don't confuse tiredness with sleepiness; they are different. Tiredness doesn't lead to sleep – only sleepiness does. Restrict your sleep period each night to the average number of hours you have actually slept per night during the preceding week.

**Set a Regular Sleep Schedule:** Establish a regular time to get out of bed each morning, no matter how poorly you may have slept. This helps set your body clock (or circadian rhythm) so your body learns to sleep at the desired time.

## WHAT IS RESPECT-Mil CARE FACILITATION?

RESPECT-Mil (Re-Engineering Systems of Primary Care Treatment in the Military) is a primary care program designed to increase recognition and treatment of common behavioral health issues among Soldiers.

Many Soldiers prefer addressing these issues in a primary care setting, rather than a specialty care environment, and RESPECT-Mil makes this possible.

Your Primary Care Clinician may assign a Care Facilitator to help monitor your treatment and your progress.

### What does the RESPECT-Mil Care Facilitator do?

The Care Facilitator is someone invested in helping you feel better. He or she works closely with your Primary Care Clinician and serves as a connection between you and your care provider.

Within a week of your visit, your Care Facilitator will call you to talk about:

- Your treatment plan
- Any concerns you may have about your progress
- Any side effects from medications
- Any other related problems you might be experiencing
- Any treatment barriers you may be encountering

Your Care Facilitator does not prescribe medication, provide counseling or make referrals. These remain the responsibilities of your Primary Care Clinician. If your problems do not respond well to primary care-based treatment, and your Primary Care Clinician feels you should see a behavioral health specialist, your Care Facilitator can help arrange a referral for you.

With your permission, your Care Facilitator will continue to call you (about once a month) for about six months, and will give your Primary Care Clinician brief updates about your progress.

### Who is your Care Facilitator?

(Attach label)