

Trauma in Contemporary Clinical Practice

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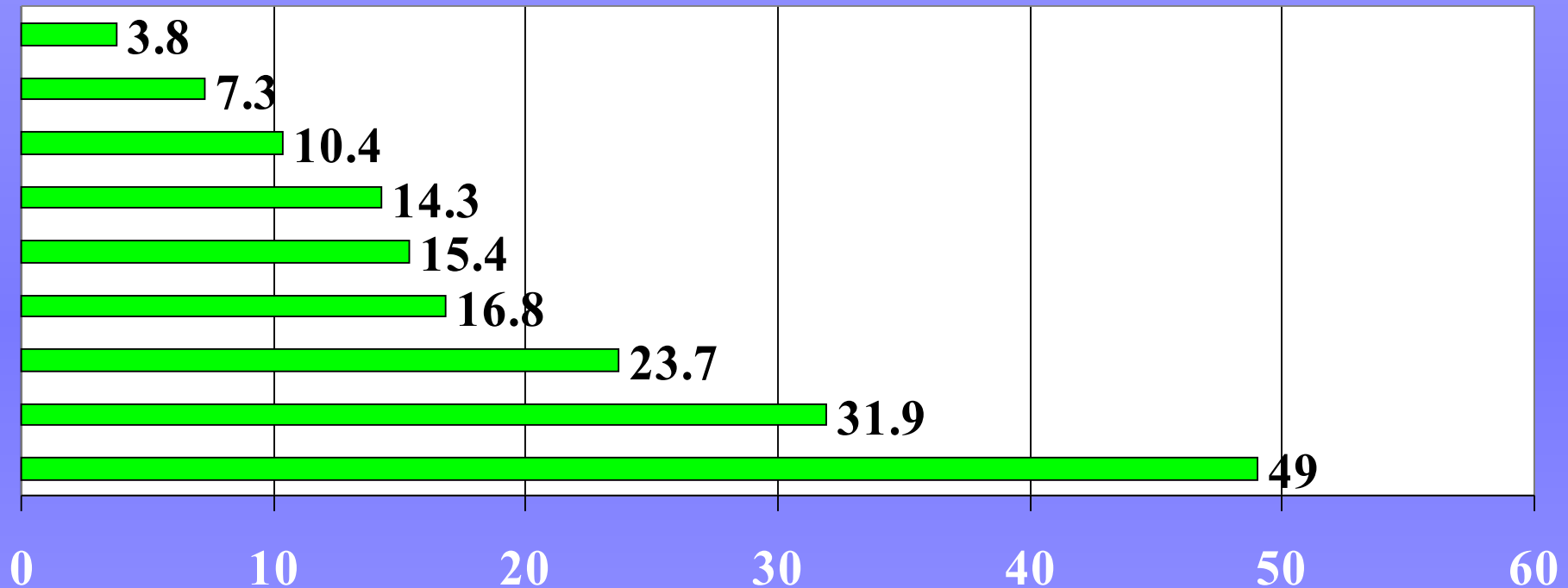
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Types of Traumatic Events

- Natural Disasters (Acts of God) = innate phylogenetically determined survivor mechanism (Stress Response, Relaxation Response)
- Man-related or Man-made Disasters (technology, wars, man-to-man violence and victimization) -- progressive increase

In a study,

Select traumatic events and the estimated risk for developing PTSD



Rape	Severe beating	Other sexual assault	Serious accident or injury	Shooting or stabbing	Unexpected death of a close	Child's life threat	Witnessing killing/serious injury	Natural disaster
49	31.9	23.7	16.8	15.4	14.3	10.4	7.3	3.8

Risk of PTSD (%)

Shaping of the Developing Brain

Genes dictate the basic architecture of the brain, but there is insufficient genetic information to detail the specific wiring. The final form and connection patterns are sculpted by experience.

(Teicher et al. 2002)

Resilience (cont'd 2)

- Classification:
- A. Natural Resilience:
 - 1. Carriers of the short allele of the serotonin transporter gene = overreactor after stress; hyperreactivity of the amygdala
 - 2. Lower level of neuroticism (MMPI)
 - 3. Neuropeptide Y enhances adaptation

Resilience (cont'd 3)

- B. Acquired Resilience
 - 1. Education
 - 2. Social Class
 - 3. Family Support System
 - 4. Communities
 - 5. Inoculation (military)
 - 6. Transcendence through Artistic Expression

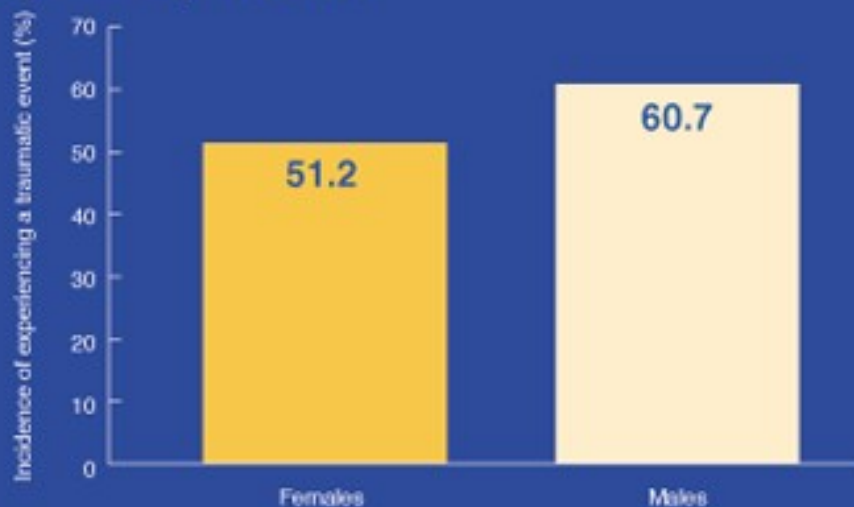
Vulnerability

(risk factors)

- Development of PTSD after trauma (10 – 30%) may be a marker for vulnerability
- Classification:
 - A. Prenatal factors (stress exposure during pregnancy)
 - B. Postnatal factors (cognitive style/bias, cumulative effect of trauma)

Prevalence of Traumatic Events Is High

The lifetime incidence of experiencing a traumatic event severe enough to cause PTSD is more than 50%, according to the National Comorbidity Survey (NCS)*



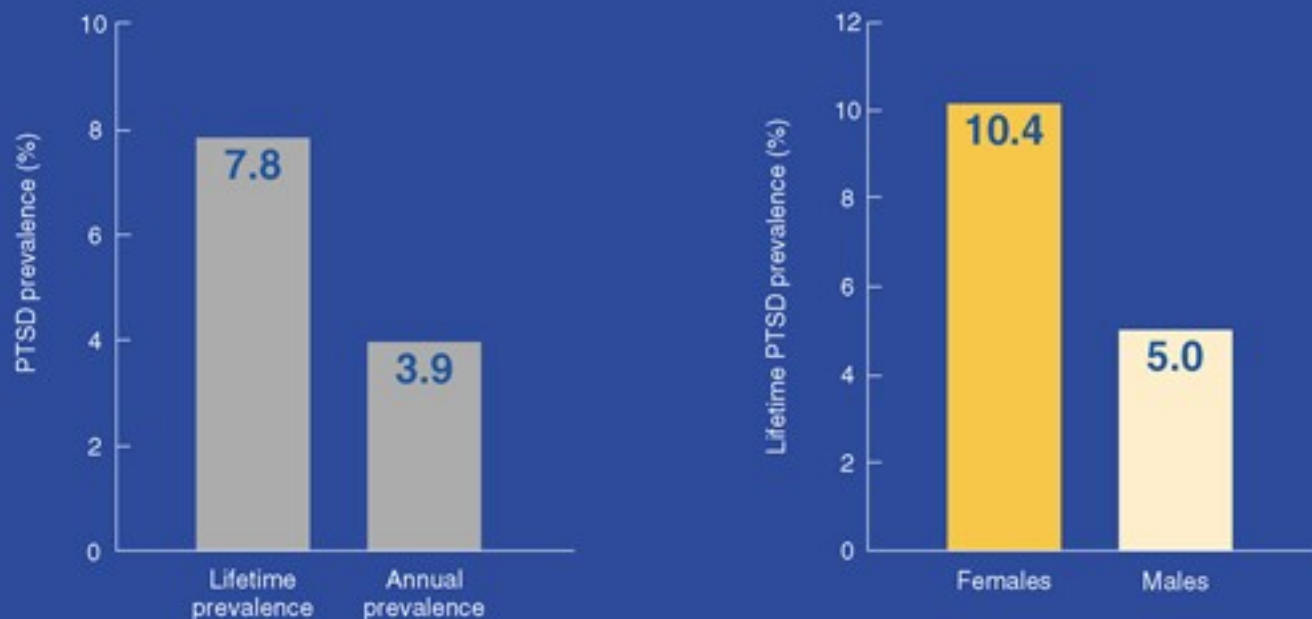
Approximately 20% of individuals exposed to a traumatic event may develop PTSD

Kessler 1995; Breslau 1991; Resnick 1993.

*From Part 2 of the NCS. A total of 5877 respondents participated in the survey, which was conducted among individuals aged 15 to 54, from September 1990 to February 1992.

PTSD—Prevalence

A common condition—PTSD is the 5th most prevalent major psychiatric illness*



Kessler 1995; Kessler 1999.

*From Part 2 of the National Comorbidity Survey (NCS). A total of 5877 respondents participated in the survey, which was conducted among individuals aged 15 to 54, from September 1990 to February 1992.

PTSD—Service Usage

In one study,

Patients with PTSD had the highest service usage among those with anxiety disorders

Risk Factors for Service Usage and Adverse Workplace Outcomes

Variable	PTSD	Panic disorder	Agoraphobia	GAD	Social phobia	Simple phobia
Hospitalization	✓		✓			
Family Doctors	✓	✓		✓		
Psychiatrists	✓	✓	✓			
Psychologists	✓					
Other Specialists	✓		✓	✓		
Social Workers	✓	✓				
Counselors	✓	✓				
Nurses/therapists		✓	✓			
Other professionals						
Work loss						
Work cutback days	✓	✓		✓	✓	
Number significant	8	6	4	3	1	0

✓ Indicates statistically significant impact at the 5% level.

(Adapted from Greenberg et al.)

Greenberg 1999.

*From Part 2 of the National Comorbidity Survey (NCS). A total of 5877 respondents participated in the survey, which was conducted among individuals aged 15 to 54, from September 1990 to February 1992. Information from the NCS was supplemented with data from a large HMO to facilitate derivation of nonpsychiatric direct medical costs.

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