

Traumatic Events and Post Traumatic Stress

Traumatic experiences can shake our world and affect our sense of security. One way to describe a traumatic event is as an experience where someone fears for their life or someone else's life. We often think of these as associated with war, violence, accidents and natural disasters. However, surgery or medical emergencies and interventions can also be experienced as traumatic and life threatening, even though the intention behind the medical intervention is to save or improve quality of life. A strong sense of vulnerability can persist in awareness, or can be held by the body.

Quite a number of people born with a heart condition have been in touch with me about issues that, after discussion, seem related to traumatic stress or post traumatic stress disorder (PTSD). Such stress is often associated with surgery, and in connection with repeated medical interventions and procedures. The challenging and overwhelming nature of these has an emotional affect. Some adults have also spoken to me about very difficult and traumatic past experiences in hospital as children and teenagers that still have an impact on their lives now. Sometimes it might be easier to appreciate the challenges faced by those who were treated in hospital as children in the 1950's and 60's, when visiting hours by parents for children in hospital were strictly controlled. Thankfully this is very different now. However, the experience of threat to the self from even our modern procedures can also create trauma.

Trauma – what's usual?

After any kind of traumatic event, it is usual to feel very stressed and overwhelmed. This can lead to a wide range of intense and frightening emotional and physical reactions. These can vary and come and go, including: shock, fear and anxiety, anger, guilt, helplessness and feelings of vulnerability.



Some of the possible physical reactions include feeling 'jumpy' or very tense, plus sensations of panic. Sleep can be disrupted, not helped by possible pain, heart rhythm disturbance, other bodily discomfort or nagging worries. Depression may also be experienced post-operatively, often becoming more noticeable once at home.

Feeling anxious about recovery is natural and it's vital to give yourself time to heal and recover. Remember this is a process which will have ups and downs and can't be rushed. Difficult feelings and emotions are to be expected at times. Energy can fluctuate, so learning

to 'pace' yourself can be useful. Sometimes our own expectations work against us - wanting or thinking that we *'should be doing x, y or z by now'*. Developing confidence in your body once more is also a gradual process.

It can be helpful to find places to talk and get help with acknowledging difficult feelings or experiences. There are many ways of working with these so they cause less distress. Reach out and connect with other people in an everyday sense if feeling alone. Some people find our [closed Facebook group](#) a great place to chat with others who understand.

It might help you to know that most people *do* recover, and that not everyone who experiences a traumatic event, or has surgery, will go on to develop PTSD. If any symptoms and responses to the trauma don't subside after a few months it may be that PTSD is present.

Here's some more information on [coping after a traumatic event](#).

How might Post Traumatic Stress relate to people with congenital heart conditions?

Interestingly, recent research (2016) has shown that adults living with congenital heart disease may have a higher risk of post-traumatic stress disorder than people in the general population. Other research (2014) has demonstrated higher rates of PTSD in patients who have experienced a stay in ICU. This may, for example, mean that you might have a more sensitive or heightened reaction to medical interventions due to any past medical trauma you have experienced. For some people, the more interventions they have, the more intense their anxiety and reactions can become. I hope that understanding this idea might allow you to feel less critical of your experience if you perhaps recognise something of yourself in the description.

Here are some of the symptoms people might experience which can vary in intensity over time:

- Flashbacks of the event or particular memories of frightening or distressing experiences.
- Sleeping badly, nightmares
- Avoidance of anything that reminds you of what happened
- Anxiety
- Feeling on edge or on alert
- Depression

It's never too late to get help if you think you might be suffering from post-traumatic stress disorder. There are many self-help and supportive psychological therapies that can help and different approaches suit different people.

Support and Treatment Options

Self help in dealing with symptoms:

These include [grounding techniques](#) to stay in the present, which help with panicky feelings, flashbacks and wakening from nightmares. Other things that might help you de-stress and relax such as relaxation techniques, yoga, massage, exercise, time in nature etc.

Trauma Self Help Tapping Technique

An Emotional Freedom Technique (EFT) which involves tapping with fingers on acupuncture points. Instructions can be found at [Self Help for Trauma](#).

Psychological Support:

Trauma focussed cognitive behavioural therapy (CBT)

Psychotherapy

Eye movement desensitisation and reprocessing (EMDR)

Medication:

SSRI antidepressants help some people with a reduction in symptoms and depression. These need to be prescribed - do check out with your Doctor any possible interactions with other medication you are taking.

Read more about [post traumatic stress disorder](#).

[PTSD UK](#) is a charitable organisation supporting people with PTSD and has more information online.

Self-help books:

8 Keys to Safe Trauma Recovery by Babette Rothschild 2010

Overcoming Traumatic Stress by Claudia Herbert and Ann Westmore is a self-help book. It is based on cognitive behavioural therapy and demonstrates, with practical advice and exercises, how to find new and effective ways of coping with and overcoming traumatic stress.

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