

TRAUMA AND POSTTRAUMATIC STRESS DISORDER IN TRAUMATICALLY INJURED POPULATIONS

Terri deRoon-Cassini, Ph.D.

Common Types and Prevalence Estimates of Exposure to Traumatic Stressors

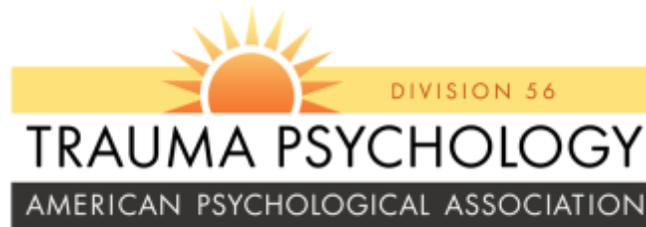
- Approximately 2.3 millions people are hospitalized each year for traumatic injury. This includes assaultive (i.e., gunshot wound, stabbing, blunt assault) and non-assaultive (i.e., motor vehicle crash, industrial work/related injury, falls) trauma (Bonnie, Fulco, & Liverman, 1999).
- 10-30% of traumatic injury survivors develop posttraumatic stress disorder (PTSD) by six months (deRoon-Cassini, Mancini, Rusch, & Bonanno, 2010)
- This translates to 200,000 to 600,000 people per year in the United States develop PTSD after injury.
- Assaultive injured trauma survivors are at a greater risk for PTSD, and this group of individuals is disproportionately of low socioeconomic status (SES) and from ethnic minority groups.
- PTSD is associated with higher rates of medical comorbidities and has significant societal impact due to lost wages, use of temporary workers and individuals taking sick time from their places of employment.

Behavioral and Physical Health Impact of Trauma on Traumatically Injured Individuals

- Traumatic injury survivors are at increased risk for depression (O'Donnell et al., 2004; Zatzick et al., 2008) and suicide than the general population (Ryb, Doerstrom, Kutera, & Dischinger, 2006)
- Unique risk factors:
 - Interestingly, objective severity of injury severity is not related to postinjury psychological consequences (Richmond & Kauder, 2000).
 - Previous treatment for a mood disorder, previous exposure to trauma, limited resources, substance use history, intentional trauma, and thoughts that one might die during the trauma are significant predictors of risk for developing PTSD.
- Unique protective factors:
 - Social support that does not encourage avoidance of trauma reminders
 - Positive coping strategies (e.g. positive reinterpretation and acceptance)

New Developments in Research on the Impact of Trauma on Traumatically Injured Populations

- With disproportionate amounts of ethnic minority and low SES injured trauma survivors developing PTSD, there is a need to understand the modifiable factors that influence risk of PTSD so as to target intervention.



- While much research has identified the risk factors for PTSD after traumatic injury, there is more work to be done to understand the neurobiological targets that impact the development of PTSD (Rothbaum et al., 2012).
- This will help to develop early interventions to prevent PTSD after traumatic injury.
- While there have been studies evaluating prevention interventions in the acute phase after trauma, more studies are needed to inform the field about preventing PTSD.

Information for Families and Friends of Traumatically Injured Populations

- Trauma Survivors Network (www.traumasurvivorsnetwork.org)
- National Center for PTSD (www.pstd.va.gov)
- MUSC Health Trauma Survivors Network (<http://www.muschealth.org/trauma/survivors/index.html>)

Resources for Professionals Seeking More Information about Traumatically Injured Populations

- In general, there are very few trauma centers across the country that have integrated behavioral health as a part of inpatient care or a part of trauma related follow-up care.
- For more information on trauma related centers, see the website of the American Trauma Society (<http://www.amtrauma.org/>)

References

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