USVH Disease of the Week #1: Posttraumatic Stress Disorder (PTSD)

**PTSD and Older Veterans**
A National Center for PTSD Fact Sheet

From the time of Homer's ancient story of the battle between the Trojans and the Greeks, and the times of the Bible and Shakespeare, military personnel have been confronted by the trauma of war. Recent books and movies have highlighted the impact of war trauma on veterans of the Vietnam War and the Persian Gulf War. However, the traumas faced by veterans of World War II and the Korean conflict have been publicly acknowledged in the media less often and less clearly. The recent movie, "Saving Private Ryan," showed the reality of war trauma during World War II. World War II was terrifying and shocking for hundreds of thousands of American military personnel. For most World War II veterans, memories of the war can still be upsetting more than 50 years later, even if the memories arise only occasionally and for brief periods. For a smaller number of World War II veterans, the war trauma memories still cause severe problems, in the form of Posttraumatic Stress Disorder, or PTSD.

How does war affect "normal," "healthy" military personnel?

War is a life threatening experience that involves witnessing and engaging in terrifying and gruesome acts of violence. Most military personnel also feel that participating in war is their patriotic duty, and they do so to protect and defend their country, their loved ones, their values, and their way of life. The trauma of war is the shocking confrontation with death, devastation, and violence. It is normal for human beings to react to war's psychic trauma with feelings of fear, anger, grief, and horror, as well as with emotional numbness and disbelief.

Many studies have shown that the more prolonged, extensive, and horrifying a soldier's or sailor's exposure to war trauma, the more likely it is that she or he will become emotionally worn down and exhausted. This happens to even the strongest and healthiest of individuals, and often it is precisely these soldiers who are the most psychologically disturbed by war because they endure so much of the trauma. Most war heroes don't feel brave or heroic at the time, but they do their duty, despite often feeling overwhelmed and horrified, in order to protect others.

It is, therefore, no surprise that when military personnel have had severe difficulty recovering from the trauma of war, their psychological difficulties have been described as "soldier's heart" (in the Civil War), "shell shock" (in World War I), or "combat fatigue" (in World War II). After World War II, psychiatrists realized that these problems usually were not an inborn mental illness like schizophrenia or manic depressive illness but were a different form of psychological dis-ease that resulted from too much exposure to war trauma. This form of psychological disease is known as "traumatic war neurosis" or Posttraumatic Stress Disorder (PTSD). Although most war veterans are troubled by war memories, many were fortunate enough either to have not experienced an overwhelming amount of trauma exposure or to have immediate and lasting help from family, friends, and spiritual and psychological counselors so that the memories have become manageable. A smaller number, probably about one in twenty World War II veterans, had so much war trauma and so many readjustment difficulties that they now suffer from PTSD.

How is it possible to have PTSD 50 years after a war?
Because most World War II veterans received a hero's welcome and a booming peacetime economy when they returned to the states, many were able to make a successful readjustment to civilian life. They coped, more or less successfully, with their memories of traumatic events. Many had disturbing memories or nightmares, difficulty with work pressure or close relationships, and problems with anger or nervousness, but few sought treatment for their symptoms or discussed the emotional effects of their wartime experiences. Society expected them to put it all behind them, forget the war, and get on with their lives. But as they grew older and went through changes in the patterns of their lives—retirement, the death of spouse and friends, deteriorating health, and declining physical vigor—many experienced more difficulty with war memories or stress reactions. Some had enough trouble to be diagnosed with a delayed onset of PTSD symptoms, sometimes with other disorders like depression and alcohol abuse. Such PTSD often occurs in subtle ways. For example, a World War II veteran who had a long successful career as an attorney and judge and a loving relationship with his wife and family might find upon retiring and having a heart attack that he suddenly felt panicky and trapped when going out in public. Upon closer examination, with a sensitive helpful counselor, he might find that the fear is worst when riding in his car, and this may relate to trauma memories of deaths among his unit when he was a tank commander in World War II.

How can I help an older military veteran who may have PTSD?

First, if one feels emotional about past memories or experiences some of the normal changes associated with growing older (such as sleep disturbances, concentration problems, or memory impairment), it does not necessarily mean that person has PTSD. If a World War II or Korean conflict veteran finds it important, but emotionally difficult, to remember and talk about war memories, help him or her by being a good listener, or help find a friend or counselor who can be a good listener.

Second, get information about war trauma and PTSD. The Department of Veterans Affairs' Vet Centers and Medical Center PTSD Teams offer education for veterans and families, and they can provide an in-depth psychological assessment and specialized therapy if a veteran has PTSD. Books such as Aphrodite Matsakis' I Can't Get Over It (Oakland: New Harbinger, 1992) and Patience Mason's Home from the War (High Springs, Florida: Patience Press, 1998) describe PTSD for veterans of all ages and other trauma survivors and PTSD's effect on the family.

Third, learn about the specialized therapies available at Vet Centers and VA Medical Centers. These include medications to help with sleep, bad memories, anxiety, and depression; stress and anger management classes; counseling groups for PTSD and grief (some particularly designed to bring together older war veterans to support one another in healing from war trauma or prisoner of war experiences); and individual counseling. It is important that family members be involved in the veteran's care and in their own individual care.

References:

