

Veterans and Post Traumatic Stress

PTSD symptoms and problems listed here are derived from observations of veterans, not DSM 5.

Post traumatic stress (PTS) and associated problems listed here are common in veterans, but are not limited to soldiers in combat. Any encounter with interpersonal violence, training or automobile accidents, robbery, death of loved ones, etc., can lead to PTS symptoms. Any number of accidents may result in closed-head injuries that characterize traumatic brain injury (TBI) that commonly aggravates PTS. **Unfortunately, PTS often leads to arrests, convictions, and family breakups for reasons noted here.**

For diagnostic purposes post traumatic stress must persist for more than 30 days to become a disorder, or PTSD. Also, in working with veteran arrests most cases seem to be late onset, a decade or more after the trauma. If left unrecognized and untreated PTSD can, and often does evolve into a more serious condition, particularly if the individual also suffers from TBI. Thus, anyone who exhibits two or more of the following symptoms should seek medical assistance. **The alternative is too often jail or suicide!**

Sleeplessness: The first effect most notice with PTS is an inability to sleep. The common response to that is to self medicate with alcohol. All too often that leads to family or bar fights and/or arrest for driving under the influence (DUI). **What a veteran needs at this point is sleep!** If some method of getting sleep can be found, PTS symptoms usually improve. But a cot in a jail will likely make the problems worse.

Nightmares: One doesn't talk to a veteran long without them speaking of the nightmares during which they relive events, over and over. They kick, fight, scream, cry, shout, curse, and will even choke their partner until she can calm him down by talking quietly to him or gently rubbing him to let him know she is there for him. Many a wife will describe the bruises on her legs, or elsewhere, when her veteran comes home. And all it takes at this point is some busybody, well-meaning friend(?), doctor, social worker, or victim advocate to report the injuries to the justice system and the veteran goes to jail. Our experience is that on-base Family Assistance groups are the worst troublemakers in these circumstances.

Exaggerated and violent startle response: Another common, almost universal, manifestation of PTSD is an exaggerated startle response. The wife and kids of any veteran quickly learn not to shake him when asleep, come up unexpectedly or quietly behind him, make a loud noise, e.g., drop a book, or grab him from behind. **He will come up swinging!** Many a wife or child has been knocked across the room, gotten a black eye, or worse in such encounters. Unfortunately, under current laws this is considered "*domestic violence*" and all too frequently the veteran is arrested and too often convicted, usually because they take a plea bargain, for these involuntary actions. *Mens rea* be damned!

Irrational anger or irritability: Anyone dealing with a veteran who suffers from PTSD has seen this side of the problem. Usually it is impossible to determine what sets off the anger. However, some triggers may be recognized, e.g., road rage, feminists, TV news, traffic, etc. Typically the veteran will scream, shout, curse, pound on the wall or punch a hole in it, break dishes, windows, doors, furniture, TV, etc., or simply drive away at speed during these outbursts. Of course this is "*domestic violence*" under current laws and likely someone will get the justice system involved rather than help from a treatment provider.

Anxiety and a need for unconditional control: In combat it is essential to have situational awareness and know where every member of the fire team/squad/platoon/etc. are, what they are doing, and what is happening on the perimeter and flanks. That doesn't go away when they return home and the veteran may get up several times a night to patrol the perimeter of the house, check on the kids, etc.

During the day the whereabouts of the wife and kids must also be known for him to feel safe. But any victim advocate will tell you this is a power and control issue and amounts to domestic abuse. Hence the need for a restraining order and destruction of the family rather than treating the underlying cause.

What might help: Service dog (train your own if necessary), [Alpha Stim](#) (sleep, pain, anxiety, depression, VA may provide one), Benadryl (diphenhydramine, for sleep), marijuana (sleep, pain, anxiety, anger).

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Panic attacks and hyperventilating: Together with the anxiety common in many mental disorders, veterans with PTSD and TBI are often subject to panic attacks when something outside the ordinary happens. Maybe the wife is late getting home, one of the kids went somewhere and didn't tell him, or who knows?

In other cases veterans have told us about having to put on their "*battle rattle*," or "*hugs*," and then crawling into a corner, or under a bed with their weapon, in order to feel safe before attempting to sleep.

Panic attacks may result in a screaming, shouting match that used to be regarded as a family quarrel but now often results in a neighbor or passerby calling the police. With mandatory arrest and a presumption the male is guilty, it is off to jail with hundreds of dollars needed to post bail, many thousands for a defense attorney, and often a plea bargain to a crime he didn't commit with lifetime penalties.

Hypervigilance: Similar to the problems of anxiety and panic attacks is a constant state of hypervigilance.

This may express itself as a fear of crowds, garbage on the street, unusual looking people, never taking the same route twice, aggressive driving at high speed, or a need to do a reconnaissance before entering an area or building. As a result veterans with PTSD can be found doing a recce around WalMart at 0200. Of course that behavior attracts the attention of police. But when stopped the veteran, who is very likely armed, is more likely to react angrily than cooperatively. Back to jail!

Social withdrawal and fear of crowded places: Crowded places often mean danger to veterans. Depending on the type of trauma they've experienced, they may be afraid to leave their home (service dogs really help in these conditions). If they do go out they almost always do it armed and frequently they wear body armor as well. Often they will only go shopping in the early morning hours, if at all, and then they commonly reconnoiter before entering. It isn't hard to imagine how this looks to security or police patrols, particularly if when stopped and questioned the veteran has prior arrests or convictions, and is uncooperative and angry.

Dissociation: Dissociation is far more common than realized and is characteristic, even diagnostic of severe PTSD. It is a very understandable coping strategy the brain uses subconsciously to cope with severe trauma and with life after the trauma. It is often described as "*numbing out*," or being in "*robot mode*," and it is entirely involuntary. After the dissociative episode the veteran typically has no memory of what occurred, referred to as dissociative amnesia.

Apparently it is common for veterans to put their hands around their partner's necks during these episodes, and that may occur while he is asleep or awake. One wife who endured such an episode described her husband as a "*zombie*" during the attack. Of course the justice system regards this as "*domestic violence*."

Flashbacks: Many trauma victims have periods when they relive events even though they seem to be awake.

During the flashback they simply are not with you, and may or may not remember it even occurring when they recover. They have no apparent control over when the flashbacks occur or their behavior while in what often appears to be a trance to an outsider.

Difficulty concentrating, focusing, or remembering: Probably best described as short-term memory loss, especially when the veteran also has TBI. In tabulating veteran arrests a common problem is that the veteran has a traffic ticket or some other mandatory court appearance that they forget about. Of course a warrant is issued for their arrest and they are jailed for failure to appear.

Impotence in males: Rarely discussed or admitted, PTS and TBI often leave veterans impotent to some degree. While this is usually not a police matter it certainly has a negative impact on marriages. However, when the wife files for divorce she may very well use allegations of domestic violence or abuse to gain advantage. If the couple have children it is certainly to her advantage to take out a restraining (protection) order against him to ensure she gets custody.

What might help: Service dog (train your own if necessary), [Alpha Stim](#) (sleep, pain, anxiety, depression, VA may provide one), Benadryl (diphenhydramine, for sleep), marijuana (sleep, pain, anxiety, anger).