

Learning & Development

Helping to deal with post traumatic stress disorder

Cognitive hypnotherapist **Trevor Silvester** offers an insight into post traumatic stress disorder and explores how sufferers can use alternative methods to resolve their problem

IF YOU WORK IN THE FIRE AND RESCUE

Service, you will inevitably have seen some pretty unpleasant things. As an officer in the Metropolitan Police for over 18 years, I have had many experiences in the line of duty that I would prefer to forget – from picking up human remains off railway lines, to breaking tragic news to families.

We tend to dismiss these terrible experiences as an intrinsic part of the job – something to get on with and get over. But, whilst we are all affected in different ways, some people are unable to put the things that they see, hear and do behind them and move on. For these individuals, these experiences can cause ongoing problems which may stay with them for the rest of their lives.

But every problem has a solution. There are many different ways that anxiety disorders such as PTSD can be tackled and it is often a matter of finding the right way to resolve the individual's particular problem. As a practising cognitive hypnotherapist, combined with my experiences in the police, I have developed a particular interest in working with people who are suffering from the psychological effects of traumatic experiences. The clients that I see are often from the armed or emergency services due to the nature of what they do day in day out. However, sufferers may also be members of the public for any number of reasons.

Defining Post Traumatic Stress Disorder

The term given by psychologists to a severe and ongoing emotional response to an extreme psychological trauma is Post Traumatic Stress Disorder or PTSD. To be diagnosed with this condition, an individual must fulfil all of the following criteria.

They must have experienced, witnessed or been confronted with an event that involved death or serious injury, or a threat to the physical integrity of themselves or others. The person's response to this must have involved intense fear, helplessness, or horror.

As a result of this experience they must then display, for more than one month:

- Persistent flashbacks and/or nightmares
- Persistent avoidance of stimuli associated with the trauma
- Persistent symptoms of increased arousal – anxiety, sleep problems or anger management

problems

- Significant impairment in social, work or other important areas of functioning.

Discarding the label

Cognitive hypnotherapy does not label people, so whilst a client may come to me already diagnosed, I am interested in their individual experience. That is, how do they 'do' their problem, because everyone with PTSD is suffering in their own way, with a unique mix of these symptoms and the mental processes from which they arise. My job is to untangle the mix and then help the client using whatever techniques (drawn from a wide range of approaches) fit the particular parts of their problem that need resolving. This flexibility means that cognitive hypnotherapy adjusts to fit the person, not the textbook definition.

One of the guiding principles of cognitive hypnotherapy is the idea that 'all behaviour has a purpose' – that whatever symptoms you present with are the result of your mind doing its best to do something positive. We have evolved to move towards pleasure and away from pain, so, avoidance of anything the brain associates with trauma makes sense. It is also often the reason why we lack the motivation to achieve things that we have failed at in the past, such as giving up smoking or losing weight.

Neuroscience suggests that our ability to visualise the future largely depends upon our past. Researchers have found that, as people with memory loss and Alzheimer's lost their memories of their personal history, they commensurately lost their ability to imagine a personal future. So, if our past is instrumental in creating our future, we need to restructure our negative memories so they do not form the building blocks of our future. If all we see ahead of us is painful, unconsciously we shut down and cease to move towards it. Does that not sound like depression?

Conversely, if we train the brain to use positives from the past to build our future from, then we are likely to feel positive and motivated. Techniques exist to rid us of the negative effects of our past, and prime our mind to anticipate, and thus experience, a positive future.

Oldest Mechanism

When threatened, humans resort to instinct. All responses to trauma involve one of the



Experiences from devastating incidents can have an ongoing effect on frontline responders

oldest mechanisms we have – the flight or fight response. In any situation where the brain makes a connection between the present situation and a past threat, it releases large amounts of adrenalin which causes a surge in heart rate, a rise in body temperature and increased respiration. Blood is diverted from the stomach to the limbs to help us fight or run better (who does not get a feeling in their stomach when they are nervous or anxious?).

In strong responses, blood flow is reduced to the part of our brain where we do our thinking. Evolution has found that, in emergency situations, thinking about what to do does not work as well as just responding. In the words of neuroscientist Joseph LeDoux: "Strong emotions make us stupid." No wonder avoidance of social contact is common, and an inability to function at work is present. Sufferers simply have the wrong part of the brain running the show.

This means that the criteria for PTSD are largely the result of an over stimulated defence response. You cannot sleep with adrenalin running around inside you, and if you do, the slightest noise is likely to wake you (the hearing system never shuts down). Imagine your body is a house with the smoke alarm set too sensitively – so sensitively that most of the time you cannot even detect what set it off. What we need to do is alter the system's

by Trevor Silvester

programming so it goes back to only responding to 'real' threats.

The Sources of Origin

With that in mind, I am going to loosely break PTSD down into two sources of origin – faulty programming if you like – which may help to explain why some people suffer PTSD after a trauma and others do not.

- An individual's brain may be overwhelmed by the information it is trying to process in the moments of the traumatising event. In usual circumstances, our brain goes through a consolidation process, fitting every experience within the web of memories and meanings from which we construct the world. The extreme emotional arousal caused by the survival reflex in traumatic situations prevents that consolidation happening as it should, and the brain becomes hyper-reactive to the information present in the event.

It is as if the brain takes a low resolution snapshot of the incident, but the snapshot also contains sounds, smells, sensations and even tastes. Because the brain uses our past experiences to interpret the present, this hyper-reactivity means that anything the brain matches from the present to the trauma snapshot can cause an over reaction to it: flashbacks, anxiety attacks and anger flashes. Because the snapshot is low resolution, the accuracy may also be quite low – so a car backfiring can be mistaken for gun fire. Even a similar colour present in your current surroundings can be matched to a colour present in the trauma and cause a response without you realising it. These matching mistakes between past and present – or false alarms – tend to happen a lot. This keeps the unconscious on high alert for the next one, and leaves the sufferer feeling anxious and frightened (flight) or angry (fight) much of the time.

From the point of view of 'all behaviour has a purpose', this still makes sense. As far as the unconscious is concerned, the mistake of jumping back from a hosepipe in the grass for the hundredth time is preferable to not jumping back from a snake once. The unconscious is there to keep you safe, not make you happy.

- The event, or surviving it, takes on a personal meaning for the individual. 'Survivor guilt' is a well documented phenomenon, which can bring out a range of emotions relating to your sense of worth and self esteem. Responses of this nature are usually based on pre-existing beliefs about yourself that your mind uses to give meaning to the occurrence. Neurological capacity apart, it may be why two people can be in the same incident, but only one is affected.

The degree of support afterwards, and the reactions of others, may also be a contributory factor.



The author states that some experiences can have a lasting psychological effect leading to PTSD

Fire photos by Sean Vatcher: www.firephotos.co.uk

Following the Recipe

When dealing with PTSD, the individual's issues and the negative memories from which they stem, will be unique to them. This means that when I see someone suffering from PTSD, my first job is to identify what we call the problem pattern: the pattern of mental programming that underlies their symptoms. Once that has been mapped, the good news is that improvement can often come about quite quickly, as we begin to work on specific parts of the pattern in order to change the brain's responses.

As with all anxiety disorders – and all negative behaviours – the problem is the result of a mental process, a bit like a recipe. This means that, if you alter the ingredients, mix them up or interrupt them, what comes out of the oven is very different from what the creator of the recipe originally planned.

For those suffering these debilitating anxiety disorders, it may seem that there is no way out. We are still learning and finding new ways to deal with the many ways that PTSD and similar conditions can manifest themselves, and in no way are we suggesting that cognitive hypnotherapy has all the answers. It does, however, offer another avenue to explore.

The important thing to remember is that the brain is plastic; it is constantly changing, and there are ways available that can help sufferers guide changes in the brain that would help them. Symptoms are the brain's best attempt to deal with the situation as it understands it and cognitive hypnotherapy can help to understand it better. It offers hope of relief for sufferers and a chance to regain control of their lives.



About the Author:

A former police officer, Trevor Silvester is the founder of the Quest Institute which specialises in cognitive hypnotherapy and NLP and is one of the largest and most successful hypnotherapy training institutions in the UK. His work with clients includes helping people overcome a range of issues such as anxiety disorders and PTSD. He also helps sports people improve their performance using mind body techniques. A published author and popular speaker, Trevor also runs a private practice in Harley Street, London. To order Trevor's books and audio downloads, to find out more about the Quest training package, or the network of therapists he has trained, visit www.questinstitute.co.uk For more information about seeing Trevor, visit www.trevorsilvester.com