Could Physical Trauma Be a Root Cause of PTSD?

By Paige Towers • June 10, 2016 at 5:59pm

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When it comes to getting a good night's rest, PTSD patients face an uphill battle. Sleeping struggles

, including disrupted REM sleep, insomnia, nightmares and sleep paralysis frequently afflict those suffering from what has long been considered and treated as a psychological disorder. But a new study suggests that physical trauma could be partially responsible for "shell shock," or blastrelated PTSD.

For the study, published in researchers analyzed the brains of eight deceased military veterans and identified consistent patterns of tissue damage in five who'd suffered trauma after repeated exposure to explosions on the battlefield. The other three veterans, who did not display the same pattern of brain damage, had only endured one blast each. The observed damage, which appeared as scar tissue in the cerebral cortex, differs from the damage caused by concussions.

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Lancet Neurology,

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But conscussions also cause mental deficits, as the

has made apparent. And pinpointing the root of soldiers' emotional and cognitive impairments has been challenging, as the : "Like other members of the team, [Jim Hancock, an emergency physician and Navy Captain], noticed that soldiers exposed to blasts often had memory and focus problems that did not go away and that seemed distinct from battlefield trauma. If the blasts were repeated, the lapses sometimes devolved into career ending mental and behavioral struggles."

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NFL head trauma crisis

New York Times reported

While many in the scientific community are calling for more research before changing current methods of treating PTSD or making rash assumptions about the nature of the disorder, these findings could have implications for preventing and managing the debilitating condition and its battery of troublesome consequences. Treating sleeplessness in PTSD patients, for instance, could potentially include measures to mitigate brain damage, in addition to or instead of sleep aids, psychiatric drugs and talk therapy. The military could also give troops headgear to protect against blast waves that may underlie the brain damage identified here.

More than anything, the findings raise questions about treating and preventing blastrelated PTSD, as well as understanding the interplay between emotional and physical factors in presumably psychological disorders. Hopefully, the future will also bring answers for PTSD patients struggling with sleep.