Post Traumatic Stress Disorder

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...to carry ease to those in pain,
solace to those in trial or distress;
and comfort and hope to all those afflicted ...

PTSD can be helpful to understand, especially if you or someone you know has had ECT (electroconvulsive therapy). See ect.org

Etiology

The first second of a first ECT session is traumatic. Treatment beyond that induces additional trauma. Trauma for an ECT session increases with the
• session duration (i.e. time spent receiving the pulsed energy)
• frequency of the pulsed energy applied to head
• voltage and current of the pulsed energy applied to head
The aggregate level of trauma varies with the total number of ECT treatment sessions (for example 6 sessions over a 12 day span). In any other context, ECT would be understood to be a kind of torture. This article is not about the virtue or lack of virtue of ECT as a mode of therapy. It is about recovery from the PTSD always induced by ECT.

Vic's ECT and PTSD

He came for acupressure expressing a strong interest in preventive care and the intake form noted 6 ECT treatments in 1968. Vic was unaware of PTSD, but its signature is part of his symptom profile and something he experienced for over 30 years. See PTSD.org

Some hallmarks of PTSD (ways to tell it is present) include
• hyper vigilance (aka hyper arousal by Dr. Herman, see reading, last paragraph)
• exaggerated startle response
• idiosyncratic reminders (depends upon what imprints)
Reminders are ways in which an aspect of the trauma of ECT is re-experienced. For Vic reminders include falling asleep or electricity or restraint or cold or light.
• a brief and full body seizure/spasm a few times each week as he falls asleep (mildly distressing)
• intense emotional and physical distress when receiving electro-acupuncture for muscle tension
• intense emotional distress when restrained at both the wrists and ankles
• physical distress when his extremities are all cold (as in being outside on a windy cold winter day)
• physical distress when viewing lights that blink in a chaotic fashion (the
aspect is chaos)
For Vic, a potent reminder experience invariably means increased difficulty staying asleep.

Vic’s Care

- Acupressure helped to regulate the Jen Mo vessel, a way to honor the topology of ECT. The Yang Wei Mo vessel was regulated to aid in reducing neck and shoulder tension (with local points). Nei Guan was used to treat hyper vigilance. The triple warmer was rebalanced (ECT puts too much chi in the upper burner).
- He chose a low dose of a Shen tonic (herbs) to aid tranquility. See Pearl Shen at dragonherbs.com
- He chose Bach flowers (more herbs) to address the trauma and its sequelae (the remedies Star of Bethlehem, Agrimony, Olive, Aspen)
- He noticed that Swedish style massage and Trager seemed helpful in his recovery.
- With encouragement, he used self-talk to reassure his body and unconscious mind that ECT would never happen to him again.

Results (after 2 months)

- hyper vigilance seems much reduced
- startle response is unremarkable
- no seizures or spasms since using the flower remedies
- sleep is longer and deeper

General Care Guidelines

- choose a helper who empowers you
- because ECT is a somatic experience, consider somatic therapy (see jinshindo.org and trager-us.org).
- Bach flower therapy is promising (if the ECT is recent, Bach Rescue Remedy is indicated). See bachcentre.com
- adrenal fatigue is a likely consequence of prolonged hyper vigilance.

Recommended Reading

The writing of Patience Mason at patiencepress.com and the book “Trauma and Recovery” by Judith Herman, M.D.