# **Trauma-Related Disorders Diagnosis**

#### Introduction:

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Post-Traumatic Stress Disorder (PTSD) is a discrete DSM-5 disorder that can occur in people who have experienced or witnessed a traumatic event. Many of your patients in inpatient psychiatry have been exposed to significant trauma, such as adverse childhood experiences, domestic or sexual violence, and the hardships associated with homelessness or substance use. Determining whether these experiences result in PTSD or are manifestations of ongoing trauma impacts (sometimes referred to as "complex PTSD") is crucial for effective treatment. In this fact sheet we describe a practical approach to determining a diagnosis and to what extent your patient's daily functioning is being significantly affected by past trauma.

### **DSM-5** Criteria for PTSD

Duration: Symptoms last for more than one month.

**Mnemonic:** Remembers Atrocious Nuclear Attacks (Must meet all of the following criteria to qualify; suggested probing questions follow criteria.)

- 1. **Exposure to Traumatic Event:** Directly experiencing, witnessing, learning about a traumatic event involving a close family member or friend.
  - Have you experienced any traumatic events that have stuck with you, like being attacked or surviving a disaster?
- 2. Remembers: Remembers or reexperiences intrusive distressing memories, dreams, or flashbacks of the event.
  - Does the experience come back to haunt you? In what ways?
- 3. Atrocious: Avoidance of stimuli associated with the traumatic event(s), such as avoiding certain activities or thoughts, or having amnesia for the event.
  - Do you find yourself avoiding things that you associate with the memory?
- 4. Nuclear: Negative changes in cognition and mood, such as exaggerated negative beliefs about oneself or the world, inability to have positive emotions, diminished interest in various activities, or a sense of foreshortened future.
- 5. Attacks: Arousal and reactivity, such as irritable behavior and angry outbursts, hyper-vigilance, exaggerated startle response, concentration problems, or sleep disturbance.
  - (For both 4 and 5): Since the trauma, have you noticed major mood changes, like not caring about anything or not seeing a future for yourself? Have you been more on edge, more irritable, or have you had insomnia?

### DSM-5 Criteria for Acute Stress Disorder (ASD):

- **Duration:** Symptoms last for 3 days to 1 month after exposure
- Symptoms are similar to PTSD criteria, except shorter duration.

### **Criteria for Complex PTSD:**

- **Duration:** Symptoms can last for years
- Not an official DSM-5 diagnosis
- Refers to long-lasting effects of prolonged and repeated trauma, occurring over many months or years.

• Typical symptoms include: persistent depressed mood, feeling permanently damaged or worthless, persistent distrust, interpersonal difficulties, chronic suicidal thoughts, physical symptoms without clear organic cause.

## **Diagnostic Interviewing Tips:**

- **Establish Trust:** Begin by building rapport and establishing a safe and supportive environment for the patient.
- **Trauma-Informed Care:** Be sensitive and mindful of the patient's trauma history. Avoid re-traumatization by carefully navigating discussions about the traumatic event.
- **Specific Inquiry:** Use open-ended questions to allow the patient to describe their experiences, then follow up with more specific questions based on the DSM-5 criteria.
- **Collateral Information:** Consider obtaining information from significant others or previous medical records, with the patient's consent, to gather a comprehensive history.

