The Body Keeps the Score
By
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Points of Interest:

-Trauma affects not only those who are directly exposed to it but also those around them. Soldiers returning from combat may frighten their families with their rages and emotional absence. The wives of men who suffer from PTSD tend to become depressed and the children of depressed mothers are at risk of growing up insecure and anxious. Having been exposed to family violence as a child often makes it difficult to establish stable, trusting relationships as an adult.

-The theory that mental illness is caused by a chemical imbalance in the brain that can be corrected by specific drugs has become broadly accepted by the media and the public as well as by the medical profession. In many places drugs have displaced therapy and enabled patients to suppress their problems without addressing the underlying issues. Consider the case of antidepressants. If they were indeed as effective as we have been led to believe, depression should by now become a minor issue in our society. Instead even as antidepressants use continues to increase it has not made a dent in hospital admissions for depression. The number of people treated for depression has tripled over the past two decades.

-12.4% of children in foster care receive antipsychotic medication compared to 1.4% of other children. These medications make children more manageable and less aggressive but they also interfere with motivation, play and curiosity, which are indispensable for maturing into a well functioning member of society.

-Even year's later traumatized people often have enormous difficulty telling other people what has happened to them. Their body's re-experience terror rage and helplessness as well as impulse to fight or flee but these feelings are difficult to articulate.

-For hundreds of years every textbook of psychology and psychotherapy has advised that some method of talking about distressing feelings can resolve them. However this is not the case. Therapy that addresses the body such as EMDR will be successful.

-Psychologists usually try to help people use insight and understanding to manage their behavior. However neuroscience research shows that very few psychological problems are the result of defects in understanding. When the alarm bell deep in the amygdala signals and fires the stress hormone that we are in danger, no amount of insight will silence it.
-Flashbacks are worse than the trauma itself. A traumatic event has a beginning, and an end, and at some point is over. But for people with PTSD a flashback can occur at anytime, whether they are awake or asleep. There is no way of knowing when its going to occur again or how long it will last. Constantly fighting these unseen dangers is exhausting.

-People with PTSD have their floodgates wide open. Lacking a filter, they are on constant sensory overload. In order to cope, they try to shut themselves down. If they cannot shut down naturally they may enlist drugs or alcohol to block out the world. The tragedy is that the price of closing down includes filtering out sources of pleasure and joy as well.

-If an individual is stuck in survival mode, their energies are focused on fighting or fleeing unseen danger, which leaves no room for nurture, care and love for those around them. How many mental health problems from drug addiction to self-injuring behaviour start as attempts to cope with the unbearable physical pain of emotions. The solution is not stop people from coping by denying them substance and self-injury but by finding ways to alter the inner sensory landscape of their bodies.

-We now know that panic symptoms are maintained largely because the individual develops a fear of the bodily sensations associated with panic attacks. The more people ignore their inner sensations, and push them away, the more likely they are to take over and leave them bewildered and confused and ashamed. People who cannot comfortably notice what is going on inside become vulnerable to respond to any sensory shift either by shutting down or by going into panic, and they develop a fear of fear itself. Many people will even respond to stress not by noticing and naming it but by developing migraine headaches or asthma attacks. Somatic symptoms for which no clear physical basis can be found are ubiquitous in traumatized individuals. They can include chronic back and neck pain, fibromyalgia, migraines, digestive problems, spastic colon, irritable bowel, chronic fatigue and asthma.

-Children who don’t feel safe in infancy have trouble regulating their moods and emotions, as they grow older.

-81% of those diagnosed with borderline personality disorder report histories of child abuse and neglect, which began before the age of seven.

-Studies show that traumatic life experiences during childhood are far more common than expected.

-Obesity is often considered a problem, but it may be in fact the solution for many. Individuals cope with their body sensations and anxiety by eating. Eating naturally calms the body. Consider the implications if you mistake someone’s solution for a
problem to be eliminated, not only are they likely to fail as often happens in addiction programs but other problems may emerge. Patients who have bariatric surgery and lose weight may often become suicidal.

-Seventy percent of prisoners in California spent time in foster care while growing up.

-In the past the military were in denial that PTSD existed and proposed that it was not war that makes people sick, but that sick men cannot fight wars, so if a soldier developed symptoms of PTSD the military believed it was a personal flaw, they were undisciplined and unwilling soldiers.

-Research into traditional “talk therapies” such as cognitive behavioral therapy has disappointing results. The majority of patients treated with CBT continue to have serious PTSD symptoms three months after treatment.

-Nobody can treat a war, abuse, rape, molestations or any other horrendous event, what has happened cannot be undone. But what can be dealt with are the imprints of trauma on the body, mind and soul: the crushing sensation in your chest that you may label as anxiety or depression: the fear of losing control, always being on alert for danger or rejection, the nightmares, flashbacks, the fog that keeps you from staying on task and from engaging fully in what you are doing; being unable to fully open your heart to another human being.

-The emotions and physical sensations that were imprinted during trauma are experienced not as memories but as disruptive physical reactions in the present.

-Traumatized people are often afraid of feeling. It is not so much the perpetrators but their own physical sensations that are the enemy. Apprehension about being hijacked by uncomfortable sensations keeps the body frozen and the mind shut. Even though the trauma is a thing of the past, the emotional brain keeps generating sensations that make the sufferer feel scared and helpless. It’s not surprising that so many trauma survivors are compulsive eaters and drinkers, and avoid social situations.

-The body responds to extreme experiences by secreting stress hormones. These are often blamed for illnesses and disease. However stress hormones are meant to give us strength and endurance to respond to extraordinary conditions. People who actively DO something to deal with disaster such as rescuing people, transporting people to a hospital, cooking meals, pitching tents utilize their stress hormones for their proper purpose and are at a much lower risk of becoming traumatized. Helplessness and immobilization keep people from utilizing their stress hormones to defend themselves. When that happens their hormones still are being pumped but the actions they are suppose to fuel are thwarted. Activation patterns that were meant to promote coping are turned back against the individual and now keep fueling inappropriate flight/ fight/ freeze responses. When people can physically
experience what it would have felt like to fight back or run away, they relax, smile
and express a sense of completion.

-Drugs cannot cure trauma. They can only dampen the expressions of a disturbed
physiology, and they do not teach the long lasting lessons of self-regulation. In a
study comparing Prozac and EMDR in depressed patients, EMDR proved to be the
more effective treatment with results lasting at follow up.

-Antipsychotics such as Risperdal, Abilify, or Seroquel can significantly dampen the
emotional brain and thus make patients less skittish or enraged but they also
interfere with being able to appreciate subtle signals of pleasure, danger or
satisfaction.

-The New York twin tower surveyors were asked what they found most helpful in
overcoming the effects of their experience. The survivors credited acupuncture,
massage, yoga and EMDR therapy.

-Cognitive therapies suggest individual’s thoughts are not rational and need to be
adjusted, or challenged. There is no question that traumatized people have
irrational thoughts:
“ I was to blame for being too sexy”
The other guys weren’t afraid they are real men”
“ I should have known better than to walk down that street”.

These types of thoughts are cognitive flashbacks and its best not to argue with them
anymore than you would argue with someone who is having visual flashbacks.
Challenging these thoughts are not effective in treatment. EMDR is the more viable
treatment option.

-People are able to heal from their trauma without talking about it. EMDR enables
them to observe their experience in a new way without verbal give and take with
another person.

-Brain scans have shown that after only three EMDR sessions PTSD symptoms
decrease, and after only 8 sessions 1 in 4 are cured of their PTSD symptoms. Studies
like these imply that EMDR is much more effective than medication. Drugs can blunt
the images and sensations of terror but they remain embedded in the mind and
body. Those who received EMDR no longer experienced the distinct imprints of the
trauma.

-If you are not aware of what your body needs you cant take care of it. If you don’t
feel hunger you cant nourish yourself. If you mistake anxiety for hunger you may
eat too much. Traumatized people need to learn that they can tolerate their
sensations, befriend their inner experiences and cultivate new action patterns. The
practice of Yoga helps focus attention on breathing and sensations. Simply noticing
what you feel fosters emotional regulation.
People can learn to control and change their behavior, but only if they feel safe enough to experiment with new solutions. The body keeps the score: If trauma is encoded in heartbreaking and gut-wrenching sensations, then our first priority is to help people move out of flight or fight states, reorganize their perception of danger and manage relationships.