

Post-Traumatic Stress Disorder in Iraqi Patients Clinical Features and Psychopharmacological Treatment.

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Abstract

Post-traumatic stress disorders(PTSD)may follow civilian psychological trauma .This study was an attempt to identify the frequency of clinical features of this significant disorder among Iraqi patients who exposed to various forms of sever civilian trauma ,and also to explore the effectiveness of psychotropic medications used in treatment ,and available in Iraqi market .

For this purpose, 25 patients with a diagnosis of PTSD were studied carefully. Symptoms were sever according to the number of Harvard Trauma Questionnaire (HTQ) items fulfilled ,chronicity and severity of psychosocial disability .Antidepressants had good or moderate results in 69% of cases treated ,but major tranquilizers were much less effective.

Key words: PTSD. Psychotropic, clinical features, Al-Diwanyia

Introduction

PTSD syndrome manifested months or years after the event by people who exposed to significant psychological trauma or stress –has been increasingly recognized as a public health problem of major proportions.

The characteristic symptoms involve re-experiencing the traumatic event, numbing of responsiveness to or reduced involvement with the external world ,and a variety of autonomic ,dysphonic or cognitive symptoms .In addition to the core features of the syndrome ,related to the re-experiencing the traumatic event ,the clinical picture include number of symptoms of depression and anxiety .Therefore ,that psychopharmacological agents which are effective in alleviating symptoms of depression or anxiety might be clinically effective .

This syndrome lastly reported frequently among Al-Diwanyia population following the American occupation and the consequences of the civilian instability because of the nearly everyday accidents including assassinations, bombing, suicidal killings and accidental events.

Aims of the study

1. Explore the frequency and severity of PTSD clinical features.
2. Explore the response of patients to a number of drugs, particularly antidepressants.

Methods

1. 25 PTSD patients are collected from the psychiatric unit of Al-Diwanyia Teaching Hospital (DTH) during the period from first January 2007 to the first of July 2007.
2. The diagnosis of PTSD by senior psychiatrist, then the patients interviewed based on HTQ, and sufficient details about the symptoms were obtained by the use of symptom check list which consist of 16 items .designed according to HTQ.
3. Aconsensuse regarding response to treatment was established in each case by two psychiatrist .Treatment outcomes were rated as good if there was substantial and sustained symptomatic improvement and as moderate if improvement incomplete or if effects were transient in spite of continued treatment .The medication trials undertaken in the patients group exceeded two weeks in length.

Results

The mean age in this sample was 32 years (range 20-42), 18 males and 7 females, 20 married and 5 single .All patients living in Al-Diwanyia center .The average time between the traumatic event and Referral for treatment was 6 months.

The traumatic nature was assassinations of their close relatives in 8 cases, home bombing in 5 cases, Shell wounds in 7 cases and traffic accidents during fights in 5 cases.

Table 1 summarizes the frequency of each item in the patient population as well as additional clinical features not included in

the PTSD diagnostic criteria .The sleep disturbances ,decreased interest ,recollection of event ,dreams of the event ,detachment and hyper alertness were the most frequent symptoms .Somatization symptoms were the most frequent items among other clinical features .The reported somatization complaints most commonly headache (7cases),chest pain or discomfort (5 cases)and irritable bowel syndrome (4 cases).Significant depression was reported in 8 patients .

Table 2 summarizes the outcomes of all the medication trials ,in 15 cases was only one trial per patient ,in 8 cases were two ,and in 3 cases three. There were a total of 30 antidepressants trials.

For those patients who responded well or moderately to antidepressants, the most prominent beneficial effects were on sleep, traumatic dreams, startle response and concentration difficulties.

Discussion

The patients in this sample are suffering from disabling post traumatic syndrome because of the sever symptoms ,chronicity ,and psychological disability.The central clinical features are consistent with the findings of Horwitz et al (1980).Recollection of the traumatic event were major feature of the clinical picture ,and were manifested both in the waking state and during sleep. There was major difference between the patients of this study and Vietnam Veterans with PTSD previously reported by Sierles et al (1983).There is a great shortage of psychotropic medications in this part of Iraq ,but among the psychotropic drugs we administered ,Antidepressants yielded the best results .Amitryptiline was the most frequently used antidepressant and the most effective ,but on the whole ,responses to antidepressants tended to be partial or transient .Major tranquilizers had a good or moderate results in only three of nine patients ,their major effect appeared to be one of sedation ,and in the absence of psychotic symptoms they cannot regarded as indicated in PTSD treatment .The single patient with minor tranquilizer ,Chlordiazepoxide ,reported a highly favorable response .

Table 1: Clinical features in PTSD patients

Symptoms	No. of patients
Re-experiencing of trauma	
Recollection of the event	21
Dreams of the event	20
Re-experiencing the event	3
Numbed responsiveness	
Decreased interest	22
Detachment	20
Constricted affect	8
Symptoms not present before trauma	
Sleep disturbances	22
Avoidance	21
Hyper-alertness/startle response	18
Memory impairment /concentration difficulty	17
Re-intensification by exposure	16
Guilt feelings	10
Others	
Somatic symptoms	18
Significant depression	8
Alcoholism (suspected)	4

Table 2: Trial of Psychopharmacological agents in PTSD patients

Drug	Good	Moderate	Poor	Total
Antidepressants				
Amitryptiline	6	6	2	14
Maprotiline	2	4	1	7
Imipramine	-	2	2	4
Clomipramine	-	1	1	2
Fluoxetine	-	1	1	2
Citalopram	-	-	1	1
Total	8	14	8	30
Major tranquilizers				
Trifluperazine	1	1	-	2
Thioridazine	-	-	2	2
Chlorpromazine	-	-	3	3
Hallperidol	-	1	-	1
Olanzapine	-	-	1	1
Total	1	2	6	9
Minor tranquilizers				
Chlordiazipoxide	1	-	-	1
Total (all drugs)	10	16	14	40

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