

The Link Between PTSD and Addiction

Understanding Post-Traumatic Stress Disorder (PTSD)

Post-traumatic Stress Disorder (PTSD) is a serious psychological disorder that is established when a person witnesses or survives a traumatic event. In some cases, these events are brief and very intense, like a near-death experience in a car accident, or they can last much longer, such as sexual or physical abuse throughout a person's childhood.

Although PTSD does not directly cause addiction, it's often accompanied by substance abuse and addiction, as drugs of abuse can temporarily suppress the painful symptoms of PTSD. In people seeking treatment for substance abuse disorders, 35% to 50% will also have PTSD, while [3.5 % of all US adults](#) live with PTSD.

Causes and Symptoms of PTSD

Although researchers have identified the typical events that cause PTSD, the neurological causes are less well-understood. As well, the determinants of what causes some people to experience symptoms for days to weeks, which then go away, in contrast to others who may suffer for years, are likewise still under study.

What Causes PTSD?

The situations that lead to PTSD have several things in common: the threat of imminent death, extreme violence, or grave personal harm. As well, the person has little or no control over their situation or the outcome, and their ability to protect themselves is limited or non-existent.

PTSD causes long-lasting chemical changes in the way a person's [nervous system works](#). The brains of people with PTSD produce fewer endorphins than those of non-affected people. As well, their bodies also make more stress hormones than people who do not live with PTSD.

Endorphins are the natural painkillers our bodies need to self-soothe when in pain or distress. Many drugs of abuse, like cocaine, alcohol, and opiates, can temporarily boost endorphin production, leading to a brief period of an improved mood.

The neurological changes don't stop there. Those with PTSD also have increased production of noradrenaline in the brain, which causes a sustained state of elevated anxiety, hyper-alertness, and easily elevated pulse and blood pressure. High levels of noradrenaline also lead to an

ongoing subjective feeling of being in danger. The same drugs of abuse that increase the production of endorphins may also temporarily [decrease the overproduction of noradrenaline](#).

Essentially, a person with PTSD has a nervous system that's stuck in "fight-or-flight" mode, with a decreased ability to naturally self-soothe on top of being perpetually stressed.

Typical causes of PTSD include:

- Military combat
- Life-threatening accidents
- Assaults, such as a mugging or rape
- Natural disasters
- Physical, sexual, or emotional abuse
- Witnessing a loved one die

Symptoms of PTSD

The [symptoms of PTSD](#) are grouped into 4 overall categories: intrusive memories and re-experiencing, avoidance, negative changes in one's emotions, thoughts, and mood, and changes in emotional and physical reactions.

Intrusive thoughts and re-experiencing events:

- Unwanted, intrusive memories of the event
- Flashbacks. Flashbacks are intense, unwanted, and uncontrollable episodes of reliving the event
- Nightmares about the event
- Intense physical or emotional reactions to anything that prompts a reminder of the traumatic event.

Avoidance:

- People will try to avoid talking or thinking about the event
- Avoiding places, people, or situations that remind them of the traumatic event, even in a general sense.

Negative changes in a person's mood and thinking:

- Feeling emotionally numb or empty
- Pessimism about the future
- Negative feelings about oneself or others
- Feelings of hopelessness about one's condition
- Feelings of helplessness to change one's situation
- Inability to feel pleasure or happiness (anhedonia)
- Problems remembering aspects of the event
- Loss of interest in formerly enjoyable activities

- Feelings of detachment from friends and family

Changes in emotional and physical reactions:

- Elevated startle response, particularly in reference to noises or being touched
- Overwhelming feelings of guilt, shame, or self-loathing
- Hyper alertness—always on guard for threats or danger
- Bursts of aggression, irritability or anger
- Easily frustrated
- Insomnia
- Dangerous behaviors, like increased alcohol consumption, driving drunk, fighting, or substance abuse

PTSD And Co-Occurring Addiction

The typical pattern for PTSD and co-occurring addiction disorders is that PTSD becomes established along with its deeply distressing symptoms. Later on, people [self-medicate with addictive substances](#) in an attempt to control their PTSD symptoms.

It's self-mediation that leads to a co-occurring addiction disorder. Other social problems usually accompany PTSD coupled with addiction, such as job losses, problems with relationships, legal issues, and so forth.

PTSD and Addiction Statistics

- Up to 59% [of young people](#) with PTSD develop substance abuse problems in later life
- 46.4% of people with PTSD also meet the [diagnostic criteria](#) for substance abuse disorder.
- 30% to 59% of [women with a substance abuse disorder](#) also meet the criteria for PTSD.
- The most common cause of PTSD in women is childhood sexual abuse.
- Concurrent treatment (dual diagnosis treatment) of substance addiction and PTSD has been found to be the most effective approach to treating both disorders.
- PTSD and addiction are particularly common in combat veterans, with about 10% of combat veterans having [PTSD and an addiction disorder](#).

PTSD and Addiction Treatment

Treatment that addresses PTSD and addiction disorders at the same time is called dual diagnosis treatment. Dual diagnosis treatment uses an integrative treatment model that addresses the physical, emotional, and psychological contexts in which both disorders occur.

The integrative model, sometimes called a holistic treatment approach, has been found to be the [most effective way](#) to resolve both conditions.

The Importance of Dual Diagnosis Treatment

The National Alliance on Mental Illness (NAMI) identifies “[dual diagnosis](#)” as a condition in which a person has a substance use disorder and a mental illness at the same time. The dual diagnosis of PTSD and an addiction disorder is essential because both conditions must be treated at the same time.

In the past, treatment specialists have attempted—to no success—to treat addiction first, then move on PTSD, but only dual diagnosis will resolve both disorders, as addiction disorders and PTSD become inextricably tied together, with one condition fueling the other.

Consider that people use addictive substances to suppress the distress caused by PTSD’s symptoms, which pairs PTSD with cravings for those addictive substances. Until both conditions are brought under better control, neither will resolve.

Call to Action

If you are looking for a multi-phased, quality continuum of clinical care, [Absolute Awakenings Treatment Center](#) is here to help. To learn more, [give us a call today](#). We look forward to speaking with you soon and getting you started on your journey of addiction recovery as quickly as possible.

Resources

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