Post-Traumatic Stress Disorder and Amino Acid Therapy
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At approximately 8:45 a.m. on September 11, 2001, everyone in the United States as well as many other countries was subjected to intense shock trauma. The tragic events that unfolded right before our eyes left an imprint on the brain that would play over and over for months and years to come. As time goes by, the state of shock will diminish to some extent but you may still experience some mental as well as physical symptoms. Post-traumatic stress disorder (PTSD) occurs after the experience of a severe stressor, such as September 11, an auto accident, fire, tornado, hurricane, military experience, chronic illness, loss of a loved one or serious surgery.

The terrorist attack that occurred on September 11 left us with feelings of helplessness, fear and uncertainty. PTSD is a specific syndrome, a variety of traumatic events and situations that can affect both children and adults. One study reported in the *Journal of Consulting Clinical Psychology* found that about 20 percent of people who experience an extreme trauma would develop PTSD. This same study found that women are twice as susceptible to PTSD. Weeks and months following a traumatic episode, people waiver between the two main stages of post-traumatic stress disorder. The two stages are the re-experiencing and avoidance of the episode or anything that causes feelings of helplessness and uncertainty.

Unconscious memories will be formed during a very stressful episode because the hormones and neurotransmitters released at such times affect the amygdala where all the emotions are stored. Flashbacks of traumatic episodes can cause a release of adrenaline and cortisol in the bloodstream. This sends the stress reaction into high gear. According to the text in *Mapping the Mind* by Rita Carter, "If a memory is burnt into the amygdala with enough force, it may be almost uncontrollable and trigger such dramatic bodily reactions that a person may re-experience the precipitating trauma, complete with sensory replay." The amygdala becomes more excitable because of the flood of hormones and neurotransmitters. Physical symptoms will become very active and interrupt the normal behavior pattern.

Since 9/11 most patients describe having an increased sense of vulnerability. A patient who lives in New York stated, "I can't trust the world any more. I don't know when or where it will attack next." He stated he has fear and anxiety every time he sees a low flying aircraft and he wants to run for cover. This type of behavior is not unusual in PTSD. It involves constant feelings of helplessness and vulnerability. PTSD appears to be more likely to occur if the stressed person is alone when the traumatic event occurs and lasts much longer if the event is other than an act of God. The clinical manifestation of PTSD can occur a long time, even decades, after the initial traumatic experience. It may be triggered by similar situations, sounds, smells, touch and sight. Sounds and smells have a very powerful impact on the brain chemistry.

There are five key symptoms that will surface and cause behavior changes in someone experiencing PTSD: anxiety/fear, irritability, startle reaction, reoccuring nightmares and avoidance. Secondary symptoms are phobic avoidance, muscle tension, spasms, headaches, chronic pain syndrome, impaired concentration and memory, panic attacks, palpitations and IBS (irritable bowel syndrome). Those close to New York's World Trade Center on 9-11 who required mental health counseling described both major and minor symptoms even three months after the event. Because of the devastating nature of 9-11 the overwhelming feelings of helplessness/hopelessness continued to control their thought pattern.
Patients express their fear when they experience reminders such as auto accidents. This is very common and causes many people to avoid expressways and heavy traffic for fear of another accident. Amino acids can ease the symptoms of depression and sleep problems, but psychotherapy, especially cognitive behavioral therapy, is an integral part of treatment. Being exposed to a reminder of the trauma as part of the healing process, such as returning to the scene, sometimes helps. Support from family and friends can be a big help and speed recovery. Empathetic understanding is the best medicine. If you are offered anti-depressants or tranquilizers, remember they only postpone healing and suppress symptoms. They do NOT restore the brain's depleted nutrients so you still run on empty.

My book Post Trauma and Chronic Emotional Fatigue discusses PTSD and hyperventilation in detail. This book is an excellent resource to read so you could have a deeper understanding about this disorder.

Nutritional Support Program

SBNC - one capsule twice to three times daily corrects neurotransmitter imbalances and inhibits the firing of anxiety-producing messages.

NeuroLinks – ½ to a full dropper three times daily to boost your serotonin and dopamine levels. This can also be used if you awaken during the night.

Rodex B6 – 1 (150mg timed release B6) capsule in the morning helps to metabolize amino acids, allowing them to work more efficiently in your body.

TotalVite (multi-vitamin) – 1 capsule, in the morning with breakfast.

MagLink – 4 to 6 capsules per day, divided, throughout the day, up to bowel tolerance, then decrease by one. Magnesium chloride works at cellular level and is generally depleted with stress and anxiety symptoms.

Anxiety Control 24 – 2 capsules, three times daily, for the first month after a traumatic episode, then 2 in the morning and 2 in the afternoon. Increase to 6 per day, if needed.

L-T (L-Theanine) – 2 capsules, 2 to 3 times daily as needed to reduce stress and decrease anxiety. This amino acid allows for the brain to be in an alpha state – highly relaxed but still attentive to surroundings.

Ester C – 1,000 mg. morning and evening bolsters the immune system and strengthens cell wall integrity along with one capsule three times daily of Green Tea Extract.

Pain Control** - 2 capsules twice daily, as needed for pain. As an alternative, use Boswellia, or DLPA.

Mood Sync** - If depression occurs, take 2 capsules, twice daily. If under 125 lbs. take 1 capsule twice daily.

Sleep Link** – 2 capsules 30 minutes before bedtime. If you weigh under 125, start with 1 capsule. You can increase to 2 capsules if needed.

OR Melatonin – For sleep use 3 mg. an hour before bedtime.

Mellow Mind** (Ashwagandha) – 500 mg can be taken during the day or at night. It has a calming effect on the central nervous system. Ashwagandha is an all-natural herb that comes from India.

** Caution: Do not use with SSRIs, MAOIs, tricyclic antidepressants or if you have had a melanoma. Pregnant or lactating women should consult a health care practitioner.

Helpful Hints

- Do not use alcohol in the acute stage of trauma.
- Decrease caffeine intake, and have none after noon.
- Limit sugar and soda intake.
- During the first month, avoid loud noises and bright lights.
- Use relaxation tapes, two to three times per week.

References


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