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Professor of General Practice

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Friday, August 12, 2016

(Room 2)

14:00 - 14:55 WS #31: Case Studies in Mental Health

15:05 - 16:00 WS #41: Case Studies in Mental Health (Repeated)

MONASH University

MONASH
Office of the
Pro Vice-Chancellor
Berwick & Peninsula

GP CME CONFERENCE
Christchurch, New Zealand
11-14 August 2016

Mental Health Case Studies for Workshops

3. POST TRAUMATIC STRESS DISORDER (PTSD)

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GROUP OF EIGHT AUSTRALIA

1. Introduction

PTSD may develop after exposure to an extremely traumatic event, such as:

- War, torture, rape, physical assault, domestic violence
- Being kidnapped, terrorism, natural disaster, major car accident
- Being diagnosed with a potentially fatal illness
- Finding the body of someone who has committed suicide or been murdered, etc.

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The potentially traumatic events (PTEs) may involve:

- Large numbers of the public (eg. earthquake), or
- An individual (eg. major car accident).

The most commonly reported PTEs are:

- Witnessing death or injury to others
- Accidents
- Natural disasters, and
- Physical assaults.

Approximately 15% - 25% of people exposed to PTEs later develop PTSD.

Over a quarter of a million Australians experience PTSD in any one year.

Without effective management, PTSD can become a chronic and debilitating condition.

It carries a higher suicide risk than any other anxiety disorder.

As a general practitioner, you should be aware of the possibility of PTSD among people who are involved in PTEs - they might be your patients in your clinic.

Therefore, being able to recognise typical symptoms, to understand diagnostic and screening strategies, and to know options of appropriate management are necessary
as part of your professional development and enable you
to be ready to help people who experience traumatic events.

2. History

Jenny, a 35 year-old woman is brought to see you by her husband.

He reports she is 'not the same person' since a motor vehicle accident 3 months ago.

He describes that since the accident, she has been sleeping poorly, is very jumpy and irritable and has
refused to drive the car.

She has been having 2 glasses of wine at night which she says is helping her to feel calm.

Further, he is frustrated because she is even reluctant to get into the car as a passenger and bringing her to the surgery today caused an argument and tears.

3. Other History

Jenny was lucky to escape serious physical injury in the accident 3 months ago.

Her car was hit when a driver failed to give way, and a passenger in the other car was killed.

Jenny was pinned inside her vehicle for 2 hours before being freed and taken to hospital.

She stayed in hospital for 48 hours. X-rays did not reveal any fractures.

Following discharge home she was distressed and anxious but otherwise seemed to be coping.

However, after a couple of weeks rather than feeling better she felt more anxious, on edge and 'on alert', was uncharacteristically irritable and had increasing difficulty sleeping.

Her husband described that she seems to have nightmares, although does not talk to him about them,
that she won't discuss the accident, won't go out in the
car and does not want to go near the street where the accident occurred.

However, his greatest concern is that Jenny seems
'less loving' towards him and their two children,
aged 9 and 7 years.

4. Examination

Jenny is obviously anxious, and becomes quite distressed as her husband talks about her interaction with her children.

Vital signs are normal.

A basic set of blood tests was unremarkable – normal FBE, U/E and LFT and TSH and a borderline iron deficiency.

On mental state examination she acknowledges that she feels anxious and at times depressed.

She denies thoughts of self-harm.

She describes intrusive images of the accident, and admits that she dreams of being trapped in the car every night.

She also reports flashbacks, with a feeling that the crash is about to happen.

- **Questions**

- 4. 1 What is the probability psychiatric diagnosis?

- 4. 2 What other diagnoses should be considered?

- 4. 3 How can the disorder be treated?

- 4. 4 What is Jenny's prognosis?