

# New study shows PTSD as physical rather than psychological

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In 2004, retired 14th Sgt. Maj. of the Army, Raymond F. Chandler III, began suffering from post-traumatic stress after a rocket crashed into his office during a deployment in Iraq. (U.S. Army photo by Adam Turner, 335th Signal Command (Theater))

*"We are human beings and, no one is perfect." <sup>1</sup>*

-Retired 14th Sgt. Maj. of the Army Raymond F. Chandler III

There is a stigma associated with Post-Traumatic Stress Disorder in the military community, similar to how depression is a taboo in the civilian world. Trauma is a commonly known contributing factor of PTSD and, up to eight million people suffer from it as a result of traumatic events in any given year.<sup>2</sup> Most Soldiers' trauma is a result of combat stress, though younger Soldiers, who were not in service during Operations Iraqi Freedom and Enduring Freedom, suffer from PTSD as a result of childhood or generational traumas.

**Related:** See how PTSD affects Soldiers according to service era at the VA's **National Public Center for PTSD** (<https://www.ptsd.va.gov/public/PTSD-overview/basics/how-common-is-ptsd.asp>) website.

However, a recent study (<https://www.nytimes.com/2016/06/12/magazine/what-if-ptsd-is-more-physical-than-psychological.html>) raises the question of whether PTSD is psychological or physical. Dr. Daniel Perl, a neuropathologist with Uniformed Services University, an organization which educates, trains, and prepares uniformed services health professionals, scientists, and leaders to support the military and public health systems, made a discovery supporting the theory that PTSD can be the result of physical damage to the brain.<sup>3</sup> While examining a veteran's brain tissue, Perl observed brown, dust-like pattern scars in areas corresponding to sleep and cognition. He examined the brain tissue of other Soldiers and found corresponding scars in the same location. However, when he looked at civilians' tissue, the scars were not present. Each of the Soldiers had PTSD and Perl's theory is that the blast waves Soldiers experienced in combat, even if they were in a Humvee at the time of a nearby explosion, damaged their brains.<sup>4</sup>

Christian Macedonia a retired Army lieutenant colonel and maternal and fetal health specialist at Lancaster General Health's



Emilian Macedonia, a retired Army lieutenant colonel, and maternal and fetal health specialist at Lancaster General Health's Women and Babies Hospital in Lancaster, Pennsylvania, was the leader of the "Gray Team," a group of scientists and doctors organized by retired Navy Adm. Michael Mullen, 17th chairman of the Joint Chiefs of Staff, with the purpose of analyzing brain damage in Soldiers. Macedonia said that during his time as an Army doctor, he shared the military mentality that no visible injuries meant nothing was wrong.

However, the research he conducted with the "Gray Team" fell increasingly in line with Perl's theory that PTSD is a physical condition with psychological impacts, even if MRIs and CT scans do not show any injuries.

## **Response**

The announcement that blast waves are a leading cause of PTSD in Soldiers and veterans caused skepticism in and out of the Army. If external head damage is not visible, then the assumption is that there is no injury, even when Soldiers experience cognitive issues.

Soldiers suffering from PTSD may find it difficult to admit something is wrong if they do not exhibit serious, visible external injuries. Some Soldiers may not accept they experience significant cognitive issues. Others may be afraid to come forward and lose their "tough" status, especially in special operations units.

As a result, Soldiers often tend to keep behavioral health problems quiet because of the associated stigma and to avoid leaving their units or facing medical evaluation boards. All of these scenarios present NCOs with the leadership challenge of how to help Soldiers seek counseling and medical attention.

## **Related: Do service dogs really help with PTSD? A new study has answers**

(<https://rebootcamp.militarytimes.com/news/transition/2018/03/16/do-service-dogs-really-help-with-ptsd-a-new-study-has-answers/>)

## **Successful NCOs**

*"You've got a duty to help your brother or sister."<sup>5</sup>*

—Retired Sgt. Maj. of the Army Raymond F. Chandler III

During a deployment to Iraq in 2004, a rocket crashed into retired 14th Sgt. Maj. of the Army Raymond F. Chandler III's office. Subsequently, he began to experience PTSD.

"I had a lot of issues going on in my life that were intertwined with PTSD," Chandler said. "In order to treat these negative behaviors and ultimately become a better Soldier, I had to get help. I chose to self-refer myself to a behavioral health center in Fort Bliss and had weekly counseling for about two years to heal."<sup>6</sup>

According to Chandler, support is key when facing behavioral health challenges. Leaders, NCOs and Soldiers must honor their duty to help their brothers and sisters.<sup>7</sup> It is important to recognize PTSD symptoms to provide Soldiers with support and resources.

"We are human beings, and no one is perfect," Chandler said. "PTSD is an invisible wound that you can't see but needs time to heal. The sooner NCOs support their Soldier in that healing process, the sooner they will be able to rejoin the team. Recognize that there is support, know where those touchpoints are, and encourage your trooper to get the help."<sup>8</sup>

But what if NCOs are the ones experiencing PTSD? War and deployments create a lot of stress on the individual Soldier, and NCOs may not realize they need help. Chandler advises NCOs to understand that no one can heal on their own and this applies to them as well.<sup>9</sup> The first step in seeking help is to know when it is needed.<sup>10</sup>

Chandler's experience with PTSD, during his time as Sergeant Major of the Army, demonstrates that even leaders experience challenges and may need help. Chandler pointed out that if his superior, Chief Staff of the Army, Gen. Raymond T. Odierno, was able to accept his need to receive counseling, then other Soldiers should not be nervous to seek help to continue doing their jobs, and become better human beings, spouses, and Soldiers.<sup>11</sup>

Click here (<https://www.realwarriors.net/multimedia/profiles/chandler.php>) to watch SMA Chandler's video profile, in which he discusses his experience with PTSD.

## **Therapeutic Writing**

"Telling your story allows the brain to make connections to that memory," said Diana Clark Gill, author of *How We Changed by War: A Study of Letters and Diaries from Colonial Conflicts to Operation Iraqi Freedom*. "You are not only attaching words to your experience, but you are attaching the feelings and sensory impressions that you felt at the time. And in doing so, the stuck part of the brain can finally stand down."<sup>14</sup>

For Soldiers, revisiting and writing about traumatic events is challenging because it replays unpleasant memories. Writing stimulates the hippocampus (<http://psycheducation.org/brain-tours/memory-learning-and-emotion-the-hippocampus/>), the part

of the brain that regulates emotion, memory (long-term memory and the ability to form new ones), and spatial navigation.

This is why writing may help relieve PTSD symptoms. Just as athletes must undergo physical therapy to strengthen an injured joint, writing provides a way to exercise areas of the brain affected by the scar-like markings found by Perl.

Writing is either done on its own or with other treatments. However, for this therapy to be effective, Soldiers must connect their emotions with what was seen, smelled, tasted or touched at the time.<sup>15</sup>

In *At War with PTSD* by Dr. Robert N. McLay, a military physician, psychiatrist, and research director for Mental Health at the Naval Medical Center in San Diego, California, a veteran described his writing experience as a bicycle: "It is a simple idea. You get on and pedal. But until you have practiced it over and over again, it is hard. Once you get it down, it's second nature."<sup>16</sup>

Retired 1st Sgt. Michael Schindler, a Vietnam veteran who used writing to help relieve his PTSD symptoms, said, "Sometimes during the narrative and acceptance stages, I wanted to scream and did so plenty of times. The sense of having no control over my emotions was more than I could bear at times, but was better than when my emotions manifested in anger, beer drinking and dangerous living, among a long list of negative behaviors."<sup>17</sup>

Veterans Writing Project (<https://veteranswriting.org/>), a non-profit organization, founded by Ron Capps, a retired Army lieutenant colonel and veteran dedicated to helping other veterans overcome PTSD through writing, hosts writing workshops and conferences. Such organizations are a good way to gain writing skills. Capps is an author himself, having written the VWP curriculum, *Writing War: A Guide to Telling Your Own Story*, and a memoir, *Seriously Not All Right: Five Wars in Ten Years*.

For more information on writing workshops in your area, check out your local Veterans Affairs Vet Center (<https://www.vetcenter.va.gov/index.asp>) or public library.

**Related: "The Art of Words: Professional Writing Through the Ranks,"** (<http://www.armyupress.army.mil/Journals/NCO-Journal/Archives/2018/February/Art-of-Words/>) by Dayton Ward, NCO Journal

### **Additional Alternatives**

There are other therapeutic options besides writing. Consider giving speeches at local support groups, at churches, or among friends like Gregory Q. Cheek, a retired Army lieutenant colonel, cancer survivor, author, and inspirational speaker. Video blogging or "vlogging" is another route that would allow unlimited creative opportunities.

Brian Anderson, retired Special Forces senior engineer sergeant, 7th Special Forces Group (Airborne), used Accelerated

Resolution Therapy to overcome his PTSD.

ART is an eye-movement therapy that is based on a number of other established and evidence-based therapies, such as cognitive behavioral theory, gestalt, and eye movement desensitization and reprocessing.<sup>19</sup> Because this type of treatment does not focus on the content of thoughts or emotions, it is recommended for PTSD patients who have significant trouble speaking about emotions, depression and depressive symptoms, self-concept and behavioral issues.<sup>20</sup> However, ART does not help with social connectedness and has varying impacts on anxiety disorders, general well-being, sleep disorders, etc.<sup>21</sup>

Anderson founded an organization that provides veterans with therapeutic alternatives such as ART, restorative therapy, yoga, camaraderie-building, and retreats.<sup>18</sup>

**Related:** Click here (<https://nrepp.samhsa.gov/ProgramProfile.aspx?id=7>) to read the complete results of a study on the effects of ART.

## **Conclusion**

In the Armed Forces, PTSD can be dismissed or misdiagnosed, thus leaving Soldiers unable to seek proper care. Some Soldiers may find it difficult to accept that they need help or that their behavioral concerns are not temporary. The inability to speak about events, or the lack of interest or understanding from family members may frustrate others and lead them to remain quiet about their condition.

Sharing one's story lightens the load of traumatic memory.<sup>22</sup> Sharing the trauma reminds Soldiers that with the right listener (advisors, support groups, therapist, friends or family) they are no longer alone and powerless.<sup>23</sup>

Interested in sharing your story or writing about other important NCO-related topics? Go to the NCO Journal website to read our submission guidelines (<http://www.armyupress.army.mil/Journals/NCO-Journal/NCO-Journal-Submission-Guidelines/>) and writing topics (<http://www.armyupress.army.mil/Journals/NCO-Journal/Writing-Topics/>).

## **Related Materials**

"The Importance of Effective Writing in the NCO Corps (<http://www.armyupress.army.mil/Journals/NCO-Journal/Archives/2017/September/Effective-Writing/>)" by Crystal Bradshaw, NCOJ

"What Does Not Kill Me Could Ruin My Life (<https://www.dvidshub.net/publication/issues/28348>)," by Master Sgt. Sue Harper  
(pp. 18-20-22)

(pp. 10-20, 22)

"How to Build Battlemind (<https://www.dvidshub.net/publication/issues/28348>)," by Lt. Col. Carl Castro (pp. 23-24)

Writing Resources for Veterans (<https://iowareview.org/content/writing-resources-veterans>)

Wounded Warrior Project (<https://www.woundedwarriorproject.org/programs/combat-stress-recovery-program>)

*Three Points of Contact: A Motivational Speaker's Inspirational Methods of Success from Homeless Teen Through Cancer* by Gregory Q. Cheek, retired Army officer

*Wicked Game* by Matt Johnson

*Deadly Game* by Matt Johnson

*Soft Spots: A Marine's Memoir of Combat and Post-Traumatic Stress Disorder* by Clint Van Winkle

*And Then I Cried: Stories of a Mortuary NCO* by Justin Jordan

## **Writing Competitions**

*\*Author's note: There are many other publishing opportunities than the ones listed below. Take the time to research what else is out there and think outside the box. In addition, submitting your writing to literary journals is another great way to share your writing.*

Military Review DePuy Writing Competition (<http://www.armyupress.army.mil/DePuy-Writing-Competition/>)

Army University Press Future Warfare Writing Program (<http://www.armyupress.army.mil/Journals/Military-Review/Future-Warfare-Writing-Program/>)

Emerging & Disruptive Technologies Essay Contest (<https://www.usni.org/essay-contest/emerging-disruptive-technologies-essay-contest>)

Proud to be Writing by American Warriors (<http://www.semopress.com/events/proud-to-be-writing-by-american-warriors/>)

National Veterans Creative Arts Festival (<http://www.va.gov/opa/speceven/caf/index.asp>)

Fort Leavenworth Ethics Symposium (<http://www.cgscfoundation.org/events/ethics-symposium/>)

Wounded Warrior Storytelling Project (<http://www.woundedwarriorproject.org/>)

## Notes

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3. Robert F. Worth, "What if PTSD is More Physical Than Psychological?" *New York Times Magazine*, 10 June 2016, accessed 27 December 2017, pp.11, <http://treatnow.org/knowledgebase/4-new-york-times-blast-ptsd-physical-psychological/> (<http://treatnow.org/knowledgebase/4-new-york-times-blast-ptsd-physical-psychological/>); <https://www.nytimes.com/2016/06/12/magazine/what-if-ptsd-is-more-physical-than-psychological.html> (<https://www.nytimes.com/2016/06/12/magazine/what-if-ptsd-is-more-physical-than-psychological.html>).
4. Worth, 6-7.
5. Chandler. Interview with author.
6. Chandler. Interview with author.
7. Stephanie Ayres, "SMA speaks out on psychological health," *NCO Journal*, vol. 22, no. 2 (February 2013): 10, <https://www.dvidshub.net/publication/issues/11530> (<https://www.dvidshub.net/publication/issues/11530>).
8. Chandler. Interview with author.
9. Chandler. Interview with author.
10. Chandler. Interview with author.
11. Ayres, "SMA speaks out on psychological health."
12. Paul Gauci, "From PTSD to publication" section in "Writing Out PTSD," National Centre for Mental Health website, n.a., accessed 03 January 2018, <http://www.ncmh.info/2017/02/07/writing-ptsd-matt-johnson/> (<http://www.ncmh.info/2017/02/07/writing-ptsd-matt-johnson/>).
13. Gauci, "From PTSD to publication" section in "Writing Out PTSD."
14. Diana Clark Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," *Army Magazine*, vol. 67, no. 12 (December 2017): 37, <https://www.ausa.org/articles/words-matter-telling-your-story-alternative-medication-ptsd> (<https://www.ausa.org/articles/words-matter-telling-your-story-alternative-medication-ptsd>).
15. Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," 37.
16. Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," 38.
17. Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," 38.
18. "Training the Mind, Body, and Spirit," Veterans Alternative website, accessed 11 January 2018, <http://veteransalternative.org/>.
19. Dr. Dwight Norwood, "Accelerated Resolution Therapy (ART): Quick Fix for PTSD?" Good therapy Organization website, 01 March 2017, accessed 12 January 2018, <https://www.goodtherapy.org/blog/accelerated-resolution-therapy-art-quick-fix-for-ptsd-0301175> (<https://www.goodtherapy.org/blog/accelerated-resolution-therapy-art-quick-fix-for-ptsd-0301175>).
20. Norwood, "Accelerated Resolution Therapy (ART): Quick Fix for PTSD?"; and "Accelerated Resolution Therapy," National Registry of Evidence-based Programs and Practices."
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22. Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," 38
23. Gill, "Words Matter: Telling Your Story an alternative to Medication for PTSD," 38.