We nurses are known as part of a profession with deep commitment to sensitive, individualized patient care. We want to be aware of the experiences that have shaped our patients, as well as their families or support persons, so we help them regain or maintain their health. In recent years, this has required a clearer focus on the physical and mental health needs of Veterans with post-traumatic stress disorder (PTSD).

An Age-Old Disorder

Students of history may recognize older terms, such as nostalgia, soldier’s heart, shell shock, or combat fatigue, that have been used to describe wartime experiences. With descriptions in ancient Greek literature, this is clearly not a new problem. However, its understanding has definitely varied over the centuries. Some military physicians during the U.S. Civil War, for example, suggested such conditions affected only weak-willed or fearful men. After the war, others who studied the physical impact were able to identify symptoms such as palpitations and constricted breathing that were thought to result from overstimulation of the nervous system. Some 80,000 cases of shell shock were identified in the British Army by the end of World War I. Up to half the military discharges during World War II may have been related to combat fatigue (History.com, 2017).

In 1952, the American Psychiatric Association (APA) included “gross stress reaction” in the first Diagnostic and Statistical Manual of Mental Disorders. The assumption then was that mental health issues in response to combat or disasters would be short-term. In the second edition of the manual published in 1968, the diagnosis was replaced with “adjustment reaction to adult life.” Because this did not adequately capture symptoms of PTSD, many Vietnam-era Veterans who suffered from the condition were unable to receive the psychological help they needed. By 1980 with the publication of the third manual, the APA was able to draw on survivor research to provide diagnostic criteria for PTSD. Revisions in the fourth and fifth editions reflected ongoing research (History.com, 2017).

Taking the Lead in Support

My point in searching and recapping this history was to affirm the relatively recent efforts made to understand PTSD and its potentially far-reaching effects on the nation’s Veterans and their families. Nurses can take the lead among healthcare providers in offering empathic care and supporting Veterans in their development of resilience behaviors. We can encourage affected Veterans and their families to seek and accept social support, to look for meaning and opportunity in their lives, and to maintain an optimistic but realistic outlook (Brain & Behavior Research Foundation, n.d.). While there may be many things we don’t completely understand about PTSD, we can refuse to stigmatize persons with this condition.

REFERENCES

Journal Mission Statement

MEDSURG Nursing, the official journal of the Academy of Medical-Surgical Nurses, is a scholarly journal dedicated to advancing evidence-based medical-surgical nursing practice, clinical research, and professional development. The journal’s goal is to enhance the knowledge and skills of medical-surgical nurses to promote health, prevent and manage disease, and improve the health status of patients and their families.