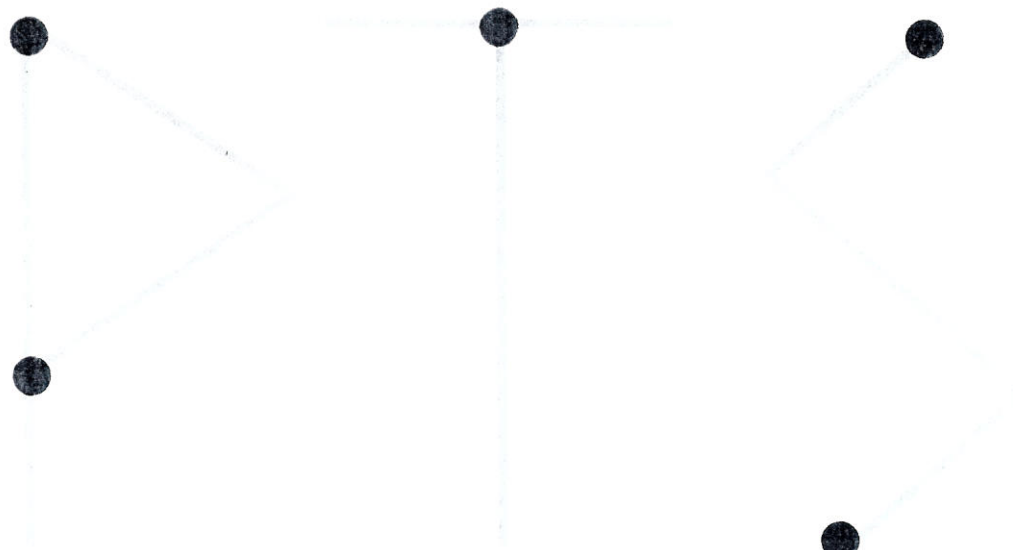


# Defusing



A growing number of combat veterans have found relief for post-traumatic stress symptoms with the help of complementary and alternative medicine.

**By Don Vaughan**

**Illustration by Kotryna Zukauskaite**

**SGT. 1ST CLASS DONALD McCASLAND, USA (RET),** served three combat tours in Iraq as a platoon sergeant with the 101st Airborne Division. It was grueling duty, both physically and emotionally, and took a heavy toll on both McCasland and his family.

"Each time I returned home, I would bring more emotional baggage, and I wasn't dealing with it properly," McCasland recalls. "In Iraq, as a platoon sergeant I was expected to be the rock everyone else leaned on, so obviously I couldn't reveal that I was having problems myself."

As the pressure of his job increased, McCasland became an emotional time bomb. During visits home, he fought constantly with his wife and his children walked on eggshells around him because of his explosive temper. On a mid-tour leave during his final deployment, McCasland even considered suicide.

"It didn't scare me. It wasn't shocking to me. It was just another thought of the day," McCasland says. "When I returned to Iraq for my last six months, I always kept that as an option."

McCasland's wife begged him to seek help, but he would either blow her off or attend one or two counseling sessions just to get her off his back. In desperation, she finally

gave him an ultimatum: Get help or the marriage is over.

Unwilling to lose his wife and family, McCasland agreed to counseling. He started with couples counseling and, after a few appointments, realized he had his own personal issues to deal with, so he asked for a referral for individual counseling.

### **Therapy plus**

McCasland found talk therapy very beneficial, especially after he incorporated an innovative approach called eye movement desensitization and reprocessing (EMDR), which helps patients process distressing memories and reduce their harmful effects using sensory input, including side-to-side eye movements, while recalling these events. Eventually, the patient is able to develop more effective coping mechanisms.

"EMDR really benefited me," says McCasland, now a licensed master social worker and program director with Soldiers and Families Embraced, a Tennessee-based nonprofit

organization that provides counseling to active duty military personnel and veterans and their families. "It doesn't work for everyone, but it worked out well for me."

McCasland is one of a growing number of combat veterans who have found relief for post-traumatic stress symptoms with the help of complementary and alternative medicine (CAM), typically provided through a personal physician or VA medical center. In fact, CAM has been a part of post-traumatic stress treatment at the VA for many years and continues to grow in popularity. A 2012 report published in the journal *Psychiatric Services* notes that of the 125 VA post-traumatic stress treatment programs that responded to the survey, 96 percent reported use of at least one CAM treatment, and 86 percent offered CAMs other than those that are a part of more traditional treatments.

According to Dr. Paula Schnurr, acting executive director of the National Center for PTSD within the VA, among the most common complementary approaches are mindfulness meditation, other types of meditation, yoga, tai chi, and acupuncture. Techniques widely used as part of more standard health psychiatry protocols include stress management, progressive muscle relaxation, and guided imagery for stress reduction.

"It's helpful to understand that there are two broad domains of effectiveness with CAM," Schnurr says. "One would be treating PTSD symptoms directly, perhaps using the alternative treatment as a primary treatment for PTSD. The other would be as a complementary treatment to supplement other sorts of treatments or to treat conditions the person is experiencing that might not be part of the PTSD."

### **Different types of CAM**

The Naval Center for Combat and Operational Stress Control



(NCCOSC) has reviewed a variety of common and less common CAM treatments available to veterans. They include:

**Acupuncture.** This ancient approach relieves illness via the strategic insertion of needles into the body to unblock metaphysical energy, known as qi (pronounced “chee”). NCCOSC’s review references a 2007 controlled pilot trial in which 73 people diagnosed with post-traumatic stress randomly were assigned cognitive behavioral therapy, acupuncture treatment, or a wait-list control condition. At the end of the treatment period, those who received cognitive behavior therapy and acupuncture reported a similar reduction in symptoms. Schnurr acknowledges evidence that suggests acupuncture can be effective but adds it is not at the level where acupuncture can be recommended as a frontline treatment.

**Art therapy.** Conceived in the 1970s, this approach encourages those with post-traumatic stress to use drawing as a way to express details about their trauma and gain mastery over their feelings. One study examined 15 treatment components and found art therapy

produced the greatest benefit for veterans with the most severe post-traumatic stress symptoms.

**Meditation.** This refers to a variety of practices used to induce relaxation or alter consciousness, many of which have been practiced for thousands of years. A 1981 study of Vietnam veterans diagnosed with “post-Vietnam adjustment” (now known as post-traumatic stress) found transcendental meditation more helpful than traditional supportive psychotherapy. (For tips on beginning a meditation practice, read “Unleash Your Inner Zen — 7 Ways to Begin a Meditation Practice” at [www.moaa.org/wellness](http://www.moaa.org/wellness).)

**Power therapies.** This approach includes additional techniques, such as EMDR or tapping acupuncture points, with traditional talk therapy.

Calming activities such as yoga and meditation have been used to treat post-traumatic stress symptoms for years, and researchers continue to investigate their effectiveness. In 2014, sudarshan kriya yoga was the subject of a study at the Center for Investigating Healthy Minds at the Waisman

Center of the University of Wisconsin-Madison. Twenty-one soldiers were divided into two groups: an active group of 11 and a control group of 10. Those who received training in yogic breathing demonstrated lower anxiety, reduced respiration rates, and fewer post-traumatic stress symptoms.

A relatively new addition to CAM are recreational programs that help alleviate the common symptoms of post-traumatic stress through activities that encourage physical involvement and social interaction. Some programs are available through the VA, while others are run by nonprofit organizations. “Some VA medical centers and military bases have options for horseback riding and other more recreational types of interventions,” Schnurr notes. “I just heard of a program at Camp Pendleton [Calif.] that is using surfing as an intervention.”

## Encouraged to share

Soldiers and Families Embraced is among the growing number of organizations providing recreational social activities to veterans with post-traumatic stress. “We have a horticultural therapy program, as well as a songwriting retreat in which people dealing with PTSD are paired with a songwriter from Nashville [Tenn.],” McCasland says. “Through the telling of the story and the sharing of emotions, they write a song around their experience. That has been really powerful. We also partner with an agency called Your Heart on Art, which offers therapeutic art counseling, and with Soldier’s Heart, a national organization that sponsors veteran healing retreats.”

There’s even a program — Soldiers Who Salsa — that uses dance as a way for veterans to deal with their post-traumatic stress. “Because salsa [CONTINUES ON PAGE 110]

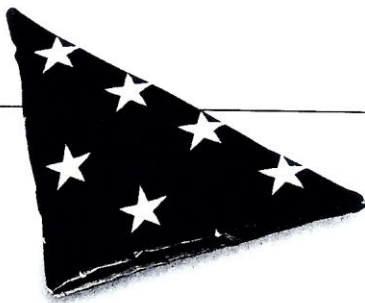
## CAM Use on the Rise

Individuals with post-traumatic stress are encouraged to try established traditional approaches as first-line treatment. However, the use of complementary and alternative medicine (CAM) for post-traumatic stress is on the rise, reports the VA:

- A study of veterans found those with post-traumatic stress were 25 percent more likely than veterans without post-traumatic stress to report CAM use, in particular, biofeedback and relaxation.
- Results from the National Comorbidity Survey Replication study indicated 12.6 percent of individuals with post-traumatic stress accessed provider-administered CAM in the past year. This is likely an underestimate because measurement of CAM excluded self-administered therapies such as relaxation techniques or herbal therapy.
- In a nationally representative sample of veterans with post-traumatic stress, 39 percent indicated they had used CAM in the previous year to address self-reported emotional and mental health issues.



# In Memoriam



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 Buff, Max L., COL (MD)  
 Carey, Joseph E., LTC (TX)  
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 Condrill, Donald R., COL (VA)  
 D'Amico, George O., COL (NY)  
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 Deadder, Robert S., LTC (MD)  
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 Mayer, Henry A., Jr., COL (TX)  
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 McKinney, John J., LTC (OR)  
 Mead, James J., CW4 (IL)  
 Mills, Alonzo R., CW4 (GA)  
 Mott, William H., IV, LTC (MA)  
 Nunn, Melvin G., COL (MI)  
 Outlaw, Douglas G., LTC (FL)  
 Pfordte, Alfred P., CW2 (AZ)  
 Pope, George V., Jr., LTC (VA)  
 Rayborn, Robert E., CW4 (AL)  
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 Setian, Zadiq Y., LTC (VA)  
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 Brown, Charles D., CW04 (NY)  
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 Murray, Lynwood C., CAPT (MA)  
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 Miller, Jack C., Lt Col (GA)  
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For submission information, see page 6.

PTS [CONTINUED FROM PAGE 110]

the very significant stress responses that people with PTSD have."

Within the VA, the gold standard for the treatment of post-traumatic stress continues to be cognitive behavioral therapies such as cognitive processing therapy; exposure-based therapies such as narrative therapy; stress-inoculation training; and EMDR.

A variety of therapies have been developed for the treatment of post-traumatic stress, reports the National Center for PTSD. One of the most beneficial, and commonly used, is cognitive therapy, which strives to change how the patient thinks about his or her trauma and its aftermath. The goal of cognitive therapy, say practitioners, is to better understand how certain thoughts about trauma can cause stress and make symptoms worse.

## Warrior-Family Symposium

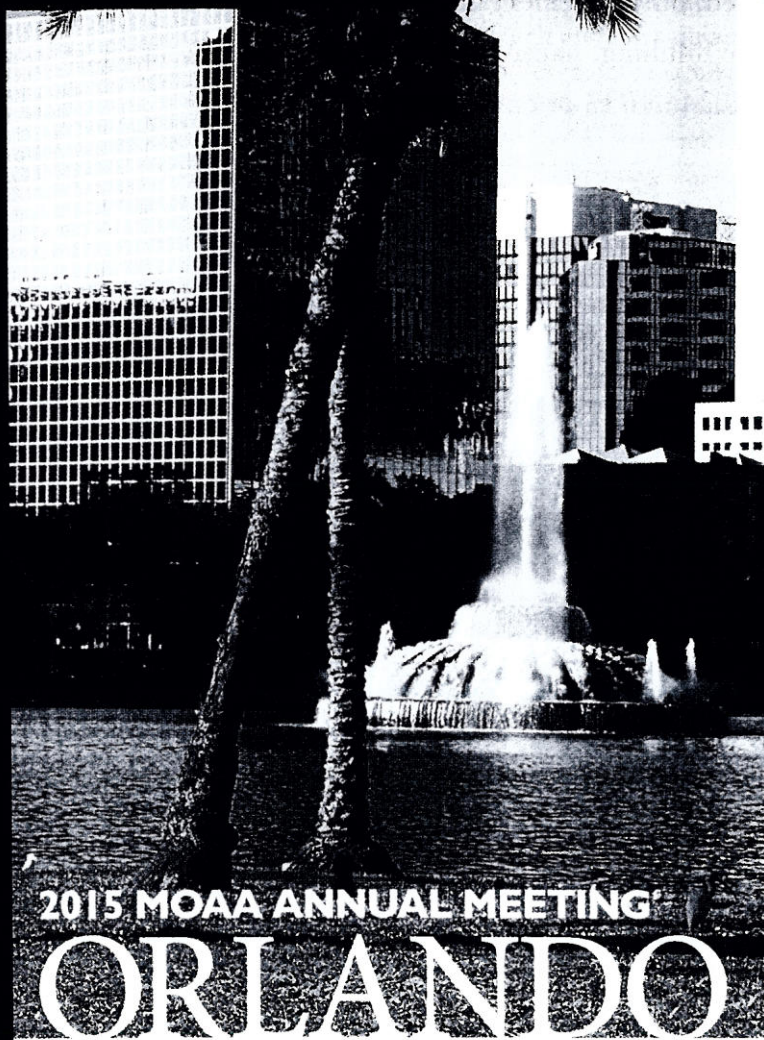
Join MOAA and Wounded Warrior Project for the 2015 Warrior-Family Symposium at the Ronald Reagan Building and International Trade Center in Washington, D.C., Sept. 9 or watch video coverage after the event at [www.moaa.org](http://www.moaa.org). This year's event will take a focused look at government and nongovernment organizations aligning to take action to improve the overall mental wellness of the nation's service-members and veterans and their families — specifically looking at our individual and collective responsibilities and commitments to taking care of our own.

Register to attend at [www.moaa.org/wfs2015](http://www.moaa.org/wfs2015). Find out more about the event on page 10.



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For more information — and to register online — visit [www.moaa.org/2015annualmeeting](http://www.moaa.org/2015annualmeeting).



## PTS [CONTINUED FROM PAGE 59]

dancing is such a social activity, it has also been invaluable to patients with post-traumatic stress and post-traumatic stress disorder," the organization explains on its website ([soldierswhosalsa.org](http://soldierswhosalsa.org)). "Common symptoms of [post-traumatic stress] include an aversion to close contact, avoidance of new activities and new surroundings, and reluctance to meet new people. Our classes provide a safe place for patients to not only learn a new activity but also work on several of the most common symptoms. It is not uncommon to see patients laughing, smiling, and engaging with new people each week."

Pleasurable activities that encourage veterans with post-traumatic stress to interact with others have tremendous value, Schnurr notes, because they can break the cycle of isolation. "Anything that helps a person get out and connect with other people, to feel good, even if it's only temporary, is a good thing," Schnurr says.

### Combining approaches

Though the VA offers complementary and alternative forms of treatment at the majority of its medical centers, Schnurr is cautious about the effectiveness of such modalities to address post-traumatic stress. "The clinical evidence on almost all of these approaches is either lacking or very preliminary," she says. "Even looking outside of PTSD, we don't have definitive information on the effects of complementary and alternative approaches. Some of the best evidence is around stress reduction, which is something you would want to do for someone who has PTSD or any other sort of mental disorder. But that's not the same thing as directly addressing the PTSD or [CONTINUES ON PAGE 118]



Another popular treatment approach is exposure therapy, which attempts to ease a patient's fear of the thoughts, feelings, or situations related to trauma through repetitive talk with a therapist. "With the help of your therapist, you can change how you react to the stressful memories," explains the National Center for PTSD on its website. "Talking in a place where you feel secure makes this easier."

Many veterans find relief through group therapy, which involves discussing trauma with those who have had similar experiences. And others have experienced significant improvement through the use of medications such as selective serotonin reuptake inhibitors (SSRIs), which are antidepressant medications that can help patients feel less sad and worried. Common examples of SSRIs include Celexa, Prozac, Paxil, and Zoloft. Serotonin-norepinephrine reuptake inhibitors, such as Venlafaxine, address depressive and mood disorders common to post-traumatic stress.

"The one thing I want to emphasize is that we have very effective, evidence-based treatments for PTSD," Schnurr says. "Patients are encouraged to try those treatments, as well as the types of CAMs that make sense to them. You no longer have to live with PTSD."

As for McCasland, he has become a vocal advocate for the use of complementary approaches to post-traumatic stress. "Just medication can't help," he says. "Just talking can't help. There are other things we need to consider when we're talking about trauma and trying not just to live with it but to thrive afterward. And these complementary methods can be very helpful." **MO**

— **Don Vaughan** is a freelance writer based in North Carolina. His last feature article for *Military Officer* was "Readiness in Reserve," August 2015.

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