Serious injury and anxiety, depression and post-traumatic stress disorder

The physical harm and suffering associated with a serious injury can often have an impact on mental health. The emotional trauma of a sudden and severe injury – resulting from events such as an assault, car accident or accidental fall – can increase the risk of a person developing an anxiety condition such as post-traumatic stress disorder (PTSD) or depression.

A person’s mental health can be further affected when serious injuries result in a loss of skills and opportunities; being unable to participate in everyday activities such as work, study and socialising; worries about finances and the future. However, once recognised, anxiety (including PTSD) and depression can be treated.

What is a serious injury?

A serious injury is a sudden trauma to the body that requires immediate treatment at a hospital. Every year, around one in 10 Australians visits the Emergency Department due to a serious injury.1

A serious injury can occur in a number of ways:

- **From falling** – Accidental falls are the leading cause of serious injury in Australia. One in three serious injuries happens this way, and elderly people are even more at risk.2
- **On roads** – Around one in seven serious injuries involves road vehicles. Males, and especially young males, are most likely to be injured on the road.3
- **From burns** – Around 10,000 Australians are hospitalised every year with serious burns or scalds. Children aged under four are most vulnerable to this type of injury.4
- **Acts of violence** – Around one in 20 Australians each year is physically assaulted, many of them young people. Also, three in every 1,000 people experience traumatic sexual assault.5
- **At work** – One in 16 working Australians experiences work-related injury. This risk is higher for tradespeople, labourers and transport workers.6
- **During sports** – One in 10 serious injuries happens during sport or training. Football-related injuries are the most common.2

Around one in 10 Australians has a chronic condition caused by a past injury.7 Fortunately, due to advances in medical science, the majority of those with serious injury recover well.

What is post-traumatic stress disorder?

Post-traumatic stress disorder (PTSD) is a set of reactions that can develop in people who have experienced a terrifying or life-threatening event.21 The most common symptoms are re-experiencing the event in nightmares or recurring memories, avoiding things that remind the person of the event, being constantly anxious and alert, feeling emotionally numb and feeling cut off from friends and family members.8

It is common in the days following injury to experience symptoms like these, but for the majority of people, these symptoms fade over time. If these symptoms continue for more than a month and are very distressing, professional help may be needed.

Signs of PTSD

The classic symptoms of PTSD are the ‘re-experiencing symptoms’ – where the person feels like he or she is experiencing the traumatic event again. These symptoms include intrusive and distressing memories about the event and distress when reminded about the event. Other signs of PTSD include:21

- difficulty sleeping
- vivid nightmares
- constant alertness (feeling ‘wound-up’) and searching for signs of danger
- irritability
- avoiding certain activities, places or people that act as reminders of the traumatic event
- lack of concentration
- being startled easily
- emotional numbness and unresponsiveness
- detachment from friends and family members
- loss of interest in previously enjoyable activities.

When a person displays some or all of these signs in the months or even
years following a serious trauma, they may be experiencing PTSD.

There are a number of effective treatments for PTSD so it is important to seek help if you think you (or someone you know) may have PTSD. For more information see the beyondblue Post-traumatic stress disorder fact sheet at www.beyondblue.org.au/resources

What is anxiety?

Anxiety is more than just feeling stressed or worried. Anxious feelings are a normal reaction to a situation where a person feels under pressure and usually pass once the stressful situation has passed, or ‘stressor’ is removed.

However, for some people these anxious feelings happen for no apparent reason or continue after the stressful event has passed. For a person experiencing anxiety, anxious feelings cannot be brought under control easily. Anxiety can be a serious condition that makes it hard for a person to cope with daily life. There are many types of anxiety and many people with anxiety experience symptoms of more than one type.

Living with serious injury is one of many things – such as a family history of mental health conditions, stressful life events and personality factors – that may trigger anxiety. The combination of serious injury, lost educational or employment opportunities and financial worries can lead to the development of anxiety.

Anxiety is common and the sooner a person gets help, the sooner they can recover.

Signs of anxiety

The symptoms of anxiety can often develop gradually over time. Given that we all experience some anxiety, it can be hard to know how much is too much. In order to be diagnosed with an anxiety condition, it must have a disabling impact on the person’s life.

Anxiety can be expressed in different ways such as uncontrollable worry, intense fear (phobias or panic attacks), upsetting dreams or flashbacks of a traumatic event.

Some common symptoms of anxiety include:

- hot and cold flushes
- racing heart
- tightening of the chest
- snowballing worries
- obsessive thinking and compulsive behaviour.

There are effective treatments available for anxiety. For more information on anxiety and treatments see the beyondblue Understanding anxiety fact sheet or visit www.beyondblue.org.au/anxiety

What is depression?

While we all feel sad, moody or low from time to time, some people experience these feelings intensely, for long periods of time (weeks, months or even years) and sometimes without any apparent reason. Depression is more than just a low mood – it’s a serious condition that has an impact on both physical and mental health.

Depression affects how a person feels about themselves. A person may lose interest in work, hobbies and doing things he or she normally enjoys. Some people may lack energy, have difficulty sleeping or sleep more than usual, while some people feel anxious or irritable and find it hard to concentrate.

The good news is, just like a physical illness, depression is treatable and effective treatments are available.

Signs of depression

A person may be depressed if he or she has felt sad, down or miserable most of the time for more than two weeks and/or has lost interest or pleasure in usual activities, and has also experienced some of the signs and symptoms on the list in the next column.

It’s important to note that everyone experiences some of these symptoms from time to time and it may not necessarily mean a person is depressed. Equally, not every person who is experiencing depression will have all of these symptoms. The symptoms will not provide a diagnosis for that you need to see a health professional – but they can be used as a guide.

Some common symptoms of depression include:

- not going out anymore, loss of interest in enjoyable activities
- withdrawing from close family and friends
- being unable to concentrate and not getting things done at work or school
- feeling overwhelmed, indecisive and lacking in confidence
- increased alcohol and drug use
- loss or change of appetite and significant weight loss or gain
- trouble getting to sleep, staying asleep and being tired during the day
- feeling worthless, helpless and guilty
- increased irritability, frustration and moodiness
- feeling unhappy, sad or miserable most of the time
- thoughts such as, “I’m a failure”, “Life’s not worth living”, “People would be better off without me”.

As with anxiety, there are effective treatments available for depression. For more information on depression and treatments see the beyondblue Anxiety and depression: An information booklet or visit www.beyondblue.org.au/depression
What are the links between serious injury, anxiety and depression?

The majority of people who experience serious injury will recover and have good mental health. For some people, however, a sudden injury can affect their mental health and wellbeing. The negative effects of serious injuries can make life harder in a number of ways – it may be more difficult to get around, stay in or find employment, develop or maintain relationships, or participate in sport or other leisure activities.

Even after recovering physically, injured people can still be at risk of serious mental health conditions. Mental health conditions may develop after injury because the injury event is traumatic (leading to PTSD) or because people find it difficult to deal with the consequences of the event (leading to difficulties such as depression, travel phobia or other anxiety conditions).

- **Post-traumatic stress disorder (PTSD)** – Between 10 and 20 per cent of people who experience a serious injury will develop PTSD within 12 months of the traumatic event occurring. Around half of all people with PTSD also have a co-existing condition such as depression or generalised anxiety disorder.

- **Anxiety and depression** – Other anxiety conditions and depression can develop following severe injury. Like PTSD, they can occur alone or with another condition. There are a number of anxiety conditions that can develop after severe injury, including:
  - generalised anxiety disorder
  - social phobia
  - panic disorder
  - agoraphobia (abnormal fear of being in crowds, public places or open areas)
  - specific phobias (especially travel phobia).

Three months after a traumatic injury, around one in three people will experience major depression.

For people who have suffered a traumatic brain injury (TBI), the risk of developing depression can be higher. Depression is the most commonly reported consequence of TBI, occurring in 23 to 45 per cent of people with a traumatic brain injury. Short or long-term cognitive impairment may complicate the assessment and management of depression or anxiety in this group.

Similarly, people who have had a spinal cord injury (SCI) are also at greater risk of developing anxiety and depression. TBI is also present in 25 to 50 per cent of SCI cases. The effects of SCI can be permanent and potentially devastating for the individual and those around them.

It is estimated there are 10,000 Australians living with SCI as a result of a traumatic injury, mainly the result of traffic incidents, falls and water-related accidents. Up to 40 per cent of people with SCI are at risk of developing PTSD, while up to 30 per cent are at risk of experiencing depression.

Continuing pain, affecting 65 per cent of people with SCI, is a strong predictor of depression and distress in this group of people.

What are the treatments for anxiety and depression?

Managing anxiety and depression can greatly improve people’s wellbeing and quality of life. People with anxiety and/or depression can find it difficult to take the first step in seeking help. They may need the support of family, friends and a health professional.

There is no one proven way that people recover from anxiety or depression, including PTSD, and it’s different for everybody. However, there is a range of effective treatments and health professionals who can help people on the road to recovery. There are also many things that people with anxiety, depression and PTSD can do to help themselves to recover and stay well.

Remember, if you have recently experienced a serious injury, there is a good chance you will recover without mental health complications. However, it is important to know and recognise the symptoms of PTSD, anxiety and depression, and to seek help if you think you may be experiencing any of them.

The important thing is finding the right treatment and the right health professional that works for you.

Different types of anxiety or depression require different types of treatment. This may include physical exercise for preventing and treating mild depression, anxiety or PTSD,
through to psychological and medical treatment for more severe levels of depression, anxiety and PTSD.

**Psychological treatments**

Psychological therapies may not only help with recovery, but can also help prevent a recurrence of anxiety or depression. These therapies help build skills in coping with stressful life circumstances and can be provided by a psychologist, psychiatrist or other trained health professional.

- **Cognitive behaviour therapy (CBT)** is an effective treatment for people with anxiety or depression. It teaches people to evaluate their thinking about common difficulties, helping them to change their thought patterns and the way they react to certain situations.

- **Interpersonal therapy (IPT)** is also effective for treating depression and some types of anxiety. It helps people find new ways to get along with others and to resolve losses, changes and conflict in relationships.

**Medication**

- **Antidepressant medication**, alongside psychological therapies, can also play a role in the treatment of moderate to severe depression and some anxiety conditions.

Some antidepressant medications can be used to treat PTSD, but treatment guidelines recommend CBT as the first line treatment for a person with PTSD.

Making a decision about which antidepressant is best for a person can be complex. The decision will be made in consultation with a doctor, after careful assessment and consideration. The doctor should discuss differences in effects and possible side-effects of medications. Stopping medication should only be done gradually, with a doctor’s recommendation and under supervision.

A doctor or treating health professional will take into account several factors when suggesting the most suitable treatment. Regular contact with and ongoing assessment by a doctor to check that treatments are working effectively is an important part of becoming and staying well. Most people taking medication will also benefit from psychological therapies, which will reduce the likelihood of relapse after the person has stopped taking the medication.

- **Benzodiazepines** (sometimes called sedatives) are designed to be used only for a short time (two or three weeks) or, if used intermittently, as part of a broad treatment plan – not as the first or only treatment. They can help people cope with anxiety by reducing tension, without making people drowsy. Benzodiazepines are not recommended for long-term use as they can be addictive. If a person has become dependent, withdrawal symptoms may be quite severe. For more information on benzodiazepines see the [beyondblue Benzodiazepines fact sheet](https://www.beyondblue.org.au/resources) at www.beyondblue.org.au/resources.

It is important that a medical practitioner reviews any current medications, including over-the-counter preparations and herbal or natural remedies, before starting a new course of medication. Talk to your doctor or pharmacist to discuss the possibility of adverse interaction between any medications being taken.

**Who can assist?**

A General Practitioner (GP) is a good first step to discuss your concerns. A good GP can:

- make a diagnosis
- check for any physical health problem or medication that may be contributing to the condition
- discuss available treatments
- work with the person to draw up a Mental Health Treatment Plan so he or she can get a Medicare rebate for psychological treatment
- provide brief counselling or, in some cases, psychological therapies
- prescribe medication
- refer a person to a mental health specialist such as a psychologist, social worker or psychiatrist.

It is recommended that people consult their regular GP or another GP in the same clinic, as medical information is shared within a practice.

**Psychologists** are health professionals who provide psychological therapies such as cognitive behaviour therapy (CBT) and interpersonal therapy (IPT). Psychologists are not doctors and cannot prescribe medication in Australia.

**Psychiatrists** are doctors who specialise in mental health. They can make medical and psychiatric assessments, conduct medical tests, provide therapy and prescribe medication. Psychiatrists often use psychological treatments such as CBT, IPT and/or medication. If the condition requires hospital admission, a psychiatrist will be in charge of the person’s treatment.

**Mental health nurses** are specially trained to care for people with mental health conditions. They work with psychiatrists and GPs to review a person’s mental health, monitor medication and provide information about mental health conditions and treatment. Some have training in psychological therapies.
Social workers in mental health are specially trained to work with people who are experiencing difficulties in life. Social workers can help people find ways to manage more effectively some of the situations that trigger these conditions such as family issues, financial problems, work stress and living arrangements. Mental health social workers can also provide focused psychological self-help strategies.

Occupational therapists in mental health help people who, because of a mental health condition, have difficulty participating in normal, everyday activities. Mental health occupational therapists also provide focused psychological self-help strategies.

Aboriginal and Torres Strait Islander mental health workers understand the mental health issues of Indigenous people and what is needed to provide culturally safe and accessible services. Some may have undertaken training in mental health and psychological therapies. Support provided by Aboriginal and Torres Strait Islander mental health workers might include, but is not limited to, case management, screening, assessment, referrals, transport to and attendance at specialist appointments, education, improving access to mainstream services, advocacy, counselling, support for family and acute distress response.

The cost of treatment from a mental health professional varies. However, in the same way that people can get a Medicare rebate when they see a doctor, they can also get part or all of the consultation fee subsidised when they see a mental health professional for treatment of anxiety or depression. For more information, see beyondblue’s Getting help – How much does it cost? fact sheet at www.beyondblue.org.au/resources

To find a mental health practitioner in your area, visit www.beyondblue.org.au/find-a-professional or call the beyondblue support service on 1300 22 4636.

Helpful strategies and tips

Coping with a serious injury and its treatments can be challenging enough, but if you experience mental health problems as well, it can be very difficult to work out how to manage – both emotionally and practically. Remember, you don’t have to sort everything out at once. It may take some time to deal with each issue.

If you have recently experienced a serious injury, take some time to consider how you feel. Think about how you have faced previous stressful situations in your life and what helped you cope (and what didn’t). Get support from friends and family and learn as much as you can about your injury, the symptoms of PTSD, other anxiety conditions and depression and how to recognise and deal with them.

Serious injuries can lead to frustration and anger, a sense that the world is unfair ("Why me?") or that you are particularly unlucky. You may find it helpful to contact other people who have been injured or traumatised and share your experiences through a support group. Your health professional should be able to put you in touch with relevant services.

If you have experienced a serious injury and think you may have PTSD, another anxiety condition or depression, the following tips may be helpful:

- Speak to your doctor about your concerns and discuss treatment options. Make sure you attend all of your appointments and have regular check-ups.
- Take a family member, friend or carer with you when you go to the doctor. Not only can they help you to remember what was discussed, ask questions and give you support, but they may benefit from having a better understanding of your condition and its treatments.
- Accept help, support and encouragement from family and friends.
- Acknowledge you have been through a traumatic experience and, when ready, talk about the experience and how you feel. It can help to talk to others who are going through a similar experience, such as in a peer support group.
- Avoid feeling isolated by becoming involved in support groups and social activities, if you are able.

It’s important to be kind to yourself, eat well, get regular exercise if you are able, try to get enough sleep and avoid alcohol. Make time for activities that you enjoy and allow yourself time to relax. Visit www.beyondblue.org.au/staying-well for more helpful tips for recovery and staying well.

Remember that, like any other conditions, PTSD, other anxiety conditions and depression can be treated. The sooner you seek help, the better – but it is never too late to treat any of these conditions.

Advice for family, friends and carers

When a person has a serious injury and anxiety or depression, it can affect family members and friends. People who support and care for someone may be at increased risk of anxiety and/ or depression, so it’s important that you look after your own health.

- Make sure you eat well, exercise regularly, get enough sleep and avoid alcohol and other drugs.
- Allow yourself time to relax and do what you enjoy. Plan activities like social outings and exercise.
- Look out for symptoms of anxiety and depression in yourself and seek help at the earliest sign.
- Seek support from professionals. This may involve having counselling or attending a support group.
- Find ways to ease the load, for example take Carer’s Leave from work.
- Involve other family members and friends and accept offers of help and encouragement.
- Acknowledge you are going through a difficult time and are likely to experience periods of grief.
- Remember that allowing others to help is not a sign of weakness – rather it is an act of generosity to allow them to show their concern and support for you.

For more information see The beyondblue guide for carers booklet available from www.beyondblue.org.au/resources or by calling 1300 22 4636.
References


Where to find more information

beyondblue
www.beyondblue.org.au
Learn more about anxiety and depression, or talk it through with our support service.
1300 22 4636
Email or chat to us online at www.beyondblue.org.au/getsupport

mindhealthconnect
www.mindhealthconnect.org.au
Access to trusted, relevant mental health care services, online programs and resources.

Australian Centre for Posttraumatic Mental Health (ACPMH)
www.acpmh.unimelb.edu.au
Information on post-traumatic mental health problems and general advice about treatment.

Brain Injury Australia
www.braininjuryaustralia.org.au
Information and advocacy for people with an acquired brain injury and their families.

Spinal Cord Injuries Australia
www.scia.org.au
Information, support and advocacy for people with a spinal cord injury and their families.

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