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Even with new treatments, few PTSD vets seek help

By SAM HARNETT on September 13, 2011 - 4:55pm



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Just as the state California needs to shift gears to address the needs of today's veterans, so does the medical community. Veterans Association studies have found that 1 in 5 returning vets suffer from [post traumatic stress disorder](#). According to a study by the San Francisco VA, only 1 in 10 of those vets seeks treatment at a VA hospital. Getting treatment to those in need is paramount, and it's sparked new thinking about how to treat PTSD. Sam Harnett reports.

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SAM HARNETT: Vietnam veteran Howie Slater describes himself as a walking time bomb.

HOWIE SLATER: I'm originally from New York, and I was drafted in 1967. I was In Cu Chi Vietnam attached to the 25th infantry division, so I did see my somewhat share of combat...

Slater was 22 when he returned from Vietnam. Something in him had changed – he felt anxious, disconnected from friends and family. He moved to the West Coast. He joined the anti-war

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movement, cut himself off from the Veteran's Association, and tried to lose his memories. Instead, he lost his wife. Howie Slater lived with PTSD for 38 years before seeking treatment.

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SLATER: Even now, I might not seem anxious being around people, because I'm a bit talkative, but I actually get into more of anxious mode. And for the last five years I've been back involved with the VA, and have started to deal with ... life.

Now, once a week, Slater joins other vets at the Presidio YMCA. They work out together in a recreational therapy program coordinated by the [San Francisco Veterans Association](#). Most are in their mid- to late-sixties, and each one has a story – of anxiety, depression, alcoholism, family and physical deterioration.

CHRIS GERONIMO: Yeah, this looks good. This looks really good. I know it has been difficult for you, the last few weeks, just trying to get back on the saddle again.

ANTONE SOUZA: Oh yeah – very difficult.

Recreational therapist Chris Geronimo is helping veteran Antone Souza on a weight machine.

GERONIMO: Good. That's good extension.

When this generation of vets returned from the battlefields, they faced limited treatment options – mostly drugs and talk therapy.

GERONIMO: More than a few times, these guys, these Vietnam-era guys, have mentioned how they wished this type of program or therapy was available 10, 20, 30 years ago.

FRANCINE SHAPIRO: You ask the person to identify the image that has been bothering them and the thoughts that have been bothering them.

Then you add bilateral stimulation.

SHAPIRO: Either taps or tones or eye movement, generally. All this together helps to activate the brain's information processing system, and then you just allow the brain to go wherever it needs to go. You allow whatever associations that need to come up, come up.

Shapiro, who practices in Watsonville, has seen good results in her patients. Still, she admits that what actually happens neurologically is far from clear.

SHAPIRO: There is no known mechanism, proven mechanism, for any form of therapy in terms of brain changes – or for that matter, for most pharmaceuticals.

Because so little is known about how PTSD actually works, new treatments take years to develop and test. It was only in 2004, after 24 years of studies, that the VA and Department of Defense endorsed EMDR. Meanwhile, young damaged vets continue to suffer. And the longer they go untreated, the more intractable their symptoms become. Doctor William Wolf directs the PTSD program at the San Francisco VA.

WILLIAM WOLF: If we are meeting up with someone who is younger, where the trauma is recent – or older, where the trauma is recent – we have a better chance that things are going to be resolved more quickly.

The San Francisco VA provides many traditional approaches to PTSD: group therapy, substance-abuse programs, and cognitive behavioral therapy – the process of thinking through traumatic experiences. But to connect with young veterans, the VA is trying something novel: virtual reality.

WOLF: It is a fully-realized, three-dimensional simulation of a world in which the veterans interact, wearing a helmet, motion centers, stereo headphones so that the sounds are in the appropriate places, even takes place on a platform that can vibrate. A lot of our vets have traumatic experiences in a Humvee, so that can be simulated.

“[Virtual Iraq](#)” was adopted from the first-person-shooting game, “Full Spectrum Hero.” The simulation returns a veteran to combat for a 30- to 45-minute session of prolonged exposure therapy. Choppers whir overhead, IEDs explode underneath Humvees, and bad guys jump out from behind broken-down buildings on realistic Baghdad streets. It’s a video game, but therapists control the scenarios, allowing vets to recreate specific traumatic situations. By simulating these memories, therapists hope to desensitize them.

WOLF: Men and women who are coming back now grew up on video games. This is something that is natural for them, so it seems like a great thing to explore.

But even with new treatments, veterans fail to get help. A 2010 study conducted by the San Francisco VA found that fewer than 10% of vets with PTSD who served in Iraq or Afghanistan received treatment at a veterans’ hospital. VA doctor Keith Armstrong says that many veterans still don’t utilize VA healthcare.

KEITH ARMSTRONG: If you are young, you don’t really think about what you’re eligible for when you leave the military, especially when it comes to the VA. I think that you’re more interested in getting on with your life, and I think people in general don’t want to think about what happens when you get sick.

Armstrong directs an outreach program that put a VA mental health clinic directly onto the campus

at San Francisco City College. The aim of the program is to bring the VA to young veterans, instead of waiting for veterans to come to the VA. But even with early intervention, PTSD is more often than not a life-long problem, according to Dr. William Wolf of the San Francisco VA.

WOLF: We have to take a long view. Someone drops out of treatment for a while, we want them to understand that we are here and ready to come when they are ready and that this is a process.

Back at the Presidio YMCA, the workout session is winding down. Howie Slater lifts weights, and Antone Souza uses the elliptical. Out in an otherwise empty recreational room, Vietnam vet Ralph Parker hits a punching bag. It isn't a solution for his PTSD, but he says it helps him deal with the day-to-day.

RALPH PARKER: You know, throw some kicks, some punches, some elbows. Not in an angry way. Just, you know, throw my whole body at the bag. That's one thing about coming here, I feel better than I did when I came. Every time I show up.

In San Francisco, I'm Sam Harnett for Crosscurrents.

What do you think of these new treatments for PTSD? Do you know anyone suffering from the disorder who has found relief? Call our tipline at 415-264-7106 to let us know.

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