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War Torn

The trauma of Iraq and
Afghanistan haunts
returning veterans.



HEALTH



◀ Chuck Luther woke up in a cold sweat. Nightmares again. The former Army sergeant was home in Killeen, Texas. But in his dreams, he was still in Iraq, where he had led an elite unit that battled insurgents.

Two years earlier, Luther had been stationed in a combat outpost north of Baghdad when a mortar blast exploded nearby and knocked him to the floor. Luther survived the attack. However, the jolt to his head damaged his hearing and left him with severe headaches.

Luther was also plagued by visions of the mortar attack and haunted by the blood and pain he had seen. The memories made functioning as a husband and father difficult when he returned home to Texas. He began experiencing panic attacks and uncharacteristic bursts of rage.

"Before Iraq, my wife and I never fought at all," says Luther. "But when I got back, I was so angry. We started fighting all the time. I'd tear up the house and break things. My kids became scared of me. It was awful."

Luther suffers from a psychological illness common among soldiers returning from war. During World War I, it was called shell shock; during World War II, battle fatigue. Today the condition is known as *post-traumatic stress disorder (PTSD)*. The illness has become *epidemic* (widespread) in the United States. A recent RAND Corporation study found that 300,000 soldiers returning from Iraq and Afghanistan suffer from it.

NEVER-ENDING CRISIS

During war, the demands on the human brain are relentless. Soldiers on the battlefield are in constant crisis. Staying alert and focused is more than a necessity; it's a matter of life and death.

The brain can become locked into that state of hypervigilance and remain that way, even when the threat of war is gone and the soldier has returned home. That's when PTSD can develop. Keith Armstrong is a professor of psychiatry at the University of California, San Francisco. He says that soldiers with PTSD are "always scanning the environment for threats. During battle, that vigilance might help save another soldier's life." Back home, however, that focus makes the soldiers overprotective of their children and more critical of their kids' mistakes. "Their reaction to everything becomes

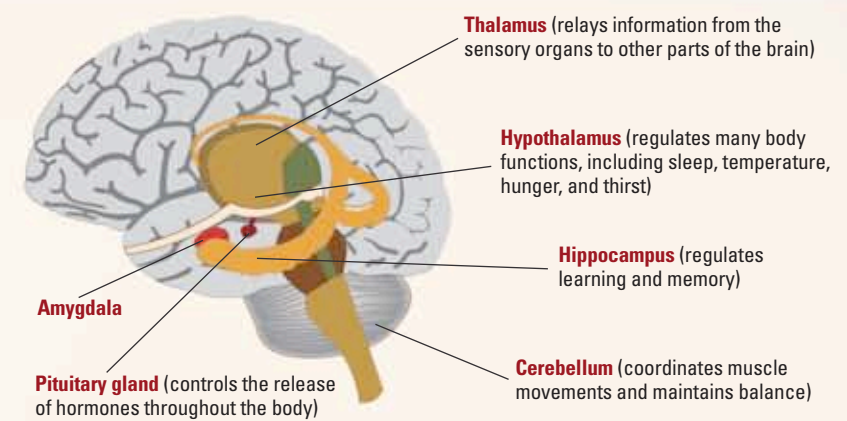
much more dramatic. That can strain relations in families," Armstrong says.

Many veterans try to cope with PTSD on their own, often in inappropriate ways, says Michelle Sherman, a psychologist who treats soldiers at a veterans hospital in Oklahoma City. They might refuse to leave the house. Or they might avoid everything that triggers memories of war—the screaming crowds at their daughters' basketball games or the loud bangs of a Fourth of July parade.

A large number of vets also try to numb themselves with drugs and alcohol, according to Sherman. "The thing is, when you numb the pain, you numb the pleasure," says Sherman. "My goal is to show soldiers that they don't need to emotionally withdraw or create a wall between themselves and their families. With help, they can learn to turn that page and move on to the next chapter of their lives."

Under Fire

The human brain is organized into many regions, some of which are shown here. Each one has a separate function. Neurologists studying post-traumatic stress disorder (PTSD) have zeroed in on the *amygdala*, the part of the brain that processes emotions. A recent study found that soldiers with PTSD have a hyperactive amygdala; the *neurons* (nerve cells) in that region fire at a faster-than-normal rate. With the emotion center of the brain working overtime, soldiers who were even-tempered before war may be quicker to anger and more easily frightened when they return.



Graphic: KRT/Newscom; Background: Christopher Morrey/VL; Photo Frames: Shutterstock; Chuck Luther: Courtesy Chuck Luther (2)

PAGE TURNERS

There are many emerging ways to treat PTSD. Some vets get regular massages to ease the tension left over from war. Others enroll in group therapy, where they can discuss their situations in safe settings with other soldiers who have experienced the traumas of war. Armstrong has pioneered a family counseling program in which vets bring their wives and children and talk as families about the challenges they're facing. "When a soldier talks with family, his family has the ability to be supportive," says Armstrong. "Family can be part of the healing process."

Sherman is coauthor of *Finding My Way: A Teen's Guide to Living with a Parent Who Has Experienced Trauma*. In it, she speaks directly to young readers, offering them guidance about how to help their parents—and how to care for themselves.

She encourages soldiers' children to recognize that changes in parental behavior are due to struggles with PTSD. The changes have nothing to do with the kids or their parents' love for them. She asks readers to understand the new

limitations on their mother's or father's abilities.

A parent may not be able to attend band concerts because the bang of the drums is too loud, too much like the gunfire of war. "Teens need to ask themselves, 'Is there someone else who can come to my recital, someone else I can turn to when I need a laugh or feel like crying?'" says Sherman.

Luther recently purchased Sherman's book for his 14-year-old daughter, Alexa. She and her siblings have struggled with the change in their father's temperament and tried their best to be patient and sympathetic.

"Things are hard now; there's no denying that," says Luther. "But with time, I do believe things will get better for me and my family." **CS**



Veterans and their families are coping with the lingering trauma of Iraq and Afghanistan.

War Torn

By Joshua Kors