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Army General Calls for Changing Name of PTSD

Some members of the Army hope that renaming Post Traumatic Stress Disorder, or PTSD, as an injury will encourage more soldiers to seek help.



U.S. soldiers on patrol in southern Afghanistan. Photo by Getty Images.

BY DANIEL SAGALYN

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The nation's second-highest ranking Army officer is calling on mental health professionals to change the name of the condition that haunts hundreds of thousands of U.S. soldiers. But some of those doctors are resisting the change.

The term Post Traumatic Stress Disorder, or PTSD, carries a stigma that has discouraged too many soldiers from understanding the condition and seeking proper treatment, Gen. Peter Chiarelli, the Army vice chief of staff told the PBS NewsHour. He would like to see PTSD called Post Traumatic Stress Injury, or PTSI, instead.

"It is an injury," Chiarelli said. Calling the condition a "disorder" perpetuates a bias against the mental health illness and "has the connotation of something that is a pre-existing problem that an individual has" before they came into the Army and "makes the person seem weak," he added.

"It seems clear to me that we should get rid of the 'D' if that is in any way inhibiting people from getting the help they need," Chiarelli said. Changing the name to injury instead of a disorder "would have a huge impact," encouraging soldiers suffering from the condition to seek help, according to the general.

Rates of PTSD in the Army are estimated at 10-20 percent for combat infantry soldiers who experienced direct combat. In some units with high combat involvement, the rates are as high as 25-30 percent.

Chiarelli's call to change the name to PTSI comes at a time when the American Psychiatric Association is in the process of updating its "bible" for mental health illnesses. Officially called the Diagnostic and Statistical Manual of Mental Disorders IV (DSM IV), it classifies and defines the criteria for mental health conditions. It is used by health and mental health professionals, ranging from psychiatrists to physicians to psychologists, according to the association.

The manual currently says that for a person to have PTSD, he or she must have been exposed to a traumatic event, and then have a number of symptoms for more than one month. The individual persistently re-experiences the event, such as through distressing dreams or intrusive recollection. The individual also must seek to avoid stimuli associated with the trauma, such as avoiding activities that remind him or her of the event. Another symptom is hyperarousal, including hypervigilance or difficulty staying asleep.

Chiarelli is not the only one calling for a name change. Former Army 1st Lt. Paul Rieckhoff, the founder and executive director of Iraq and Veterans of America, said from a "national messaging standpoint," changing the name would help reduce the negative connotations associated with PTSD.

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