Posttraumatic stress disorder and health functioning in a non-treatment-seeking sample of Iraq war veterans: A prospective analysis
Jennifer J. Vasterling, PhD, et al.

Past research indicates that war-zone veterans may experience psychological symptoms such as nightmares, difficulty experiencing happiness, and jumpiness. These and similar stress-related symptoms, if severe enough, are labeled posttraumatic stress disorder (PTSD). However, the impact of war can extend beyond psychological symptoms. This study examined 800 Army soldiers before and after they deployed to Iraq and found that higher levels of PTSD symptoms were associated with more health complaints and poorer daily functioning. These findings suggest that the impact of combat stress on health-related problems in daily life should be considered when devising optimal healthcare strategies for returning veterans.

Structural equation modeling of associations among combat exposure, PTSD symptom factors, and Global Assessment of Functioning
Mark W. Miller, PhD, et al.

This study examined relationships between combat exposure, posttraumatic stress disorder (PTSD) symptoms, and functional impairment in veterans assessed at a Department of Veterans Affairs PTSD clinic. Results showed that combat exposure led directly to PTSD reexperiencing symptoms, whereas global functioning, measured by the Global Assessment of Functioning (GAF) score, was predicted by avoidance and numbing symptoms. The proportion of variance in global functioning accounted for by PTSD was modest, raising concern about the use of the GAF score as a benchmark for quantifying this outcome.

Patient factors relating to detection of posttraumatic stress disorder in Department of Veterans Affairs primary care settings
Kathryn M. Magruder, MPH, PhD; Derik E. Yeager, MBS

Our results are applicable to Department of Veterans Affairs (VA) primary care patients who meet criteria for a diagnosis of posttraumatic stress disorder (PTSD). Approximately 50% of patients who meet PTSD criteria do not receive a diagnosis of PTSD from their VA provider. Providers should receive education about the full range of symptoms and traumatic exposures that constitute PTSD. Such education, as well as more rigorous screening, may alert clinicians to these overlooked patients.

Exploration of gender differences in how quality of life relates to posttraumatic stress disorder in male and female veterans
Paula P. Schnurr, PhD; Carole A. Lunney, MA

People with posttraumatic stress disorder (PTSD) have reduced quality of life. For example, they may have trouble in their interpersonal relationships. We examined whether differences exist between men and women in quality of life by studying more than 500 male and female veterans who were receiving treatment for PTSD from the Department of Veterans Affairs. Men and women reported similar, but poor, quality of life. Men and women also did not differ in how their PTSD symptoms affected quality of life. The findings show that quality of life should receive increased attention in our research and clinical efforts to help male and female veterans with PTSD.

Risk factors for mental, physical, and functional health in Gulf War veterans
Lynda A. King, PhD, et al.

Military personnel face numerous stressful events and circumstances when deployed to a war zone. In addition to combat, they may have extreme fear of injury or death, witness ghastly consequences of battle, and endure many
discomforts. This study examined aspects of the war experience that may be related to veteran health and adjustment. Higher levels of fear in the war zone and the belief that one was exposed to toxic environmental agents were related to Gulf War veterans’ mental and physical health. Future treatments for these veterans should address their appraisals about what they experienced in the war zone.

Sexual harassment and assault experienced by reservists during military service: Prevalence and health correlates
Amy E. Street, PhD, et al.

Previous research has documented high rates of sexual assault and harassment experienced by men and women during their military service. However, no large studies have examined this issue among members of the Reserve forces. We asked former reservists about sexual harassment and assault experiences and their current health. A substantial number of both women and men reported having had these experiences. Sexual assault, and to a lesser degree sexual harassment, was associated with poorer health at the time of the survey. Military veterans, including former reservists, should be aware that the Department of Veterans Affairs provides free care for health conditions associated with the experience of military sexual trauma.

Posttraumatic stress disorder symptoms in Bosnian refugees 3 1/2 years after resettlement
Dolores Vojvoda, MD, et al.

This study describes post-traumatic stress disorder (PTSD) over 3 1/2 years in a group of traumatized Bosnian refugees. We evaluated 21 refugees shortly after their arrival in the United States, then 1 year and 3 1/2 years later. On initial assessment, 76 percent of refugees had PTSD, and after 3 1/2 years, 24 percent still met criteria for PTSD. Women and those who could not speak English were more likely to have persisting trauma-related symptoms. This study allows us to identify possible populations at increased risk, such as women and older people, and provide appropriate and timely treatment.

Posttraumatic stress disorder and employment in veterans participating in Veterans Health Administration Compensated Work Therapy
Sandra G. Resnick, PhD; Robert A. Rosenheck, MD

Few studies have examined work outcomes in individuals with a primary diagnosis of posttraumatic stress disorder (PTSD). The current study examines the relationship between PTSD, military service, and employment among 5,862 veterans in a large Department of Veterans Affairs (VA) vocational rehabilitation program. Veterans with PTSD were 19% less likely to be employed at discharge. Individuals who were homeless at program entry were more likely to be employed at discharge, while receipt of public support income and severe mental illness decreased the likelihood of veterans having a competitive job. This study supports current efforts by VA to expand vocational rehabilitation services and treatment for veterans with PTSD.

Intensity dependence of auditory P2 in monozygotic twins discordant for Vietnam combat: Associations with posttraumatic stress disorder
Linda J. Metzger, PhD, et al.

Research suggests that brain responses to tones of increasing intensities may reflect functioning of the neurotransmitter serotonin. We measured the P2 brain response to tones of four different intensities in Vietnam veterans and their identical twins who did not serve in Vietnam. Veterans with posttraumatic stress disorder (PTSD) showed increased P2 amplitude with greater tone intensity, a pattern referred to as increased intensity dependence. Their identical cotwins did not share this pattern, suggesting that increased intensity dependence is a consequence of PTSD. Findings suggest that some veterans with PTSD may experience low serotonin and may benefit from treatment with selective serotonin reuptake inhibitors.
Right anterior cingulate cortical volume covaries with respiratory sinus arrhythmia magnitude in combat veterans
Steven H. Woodward, PhD, et al.

The brain may play a role in diseases that affect the health of many veterans. Evidence now indicates that regions of the brain involved in higher cognitive function and emotion also affect the control of the autonomic nervous system. The autonomic nervous system regulates many aspects of organ function and metabolism, and when it works poorly, veterans may be at increased risks for diabetes, obesity, and heart disease. Understanding how the brain protects veterans from these diseases, or fails to do so, may provide new treatment options.

Psychometric properties of PTSD Checklist in sample of male veterans
Stefanie M. Keen, PhD, et al.

This study evaluates the effectiveness of the PTSD Checklist (PCL) in screening for post-traumatic stress disorder (PTSD) symptoms. This screening instrument was developed in 1993 and is often used in research projects and clinical settings. It is a brief self-report measure that is easy to administer and score. Based on the results of this study, the PCL appears to be a useful tool that can help in the assessment of PTSD and in the identification of individuals who may need more thorough evaluation.