

Life Beyond Trauma: A discussion on PTSD and traumainformed care

PANELISTS

Dr. Diana Ahmed • Dr. Luke Kyne • Dr. Harry Zeit

WITH

Dr. Stephanie Zhou • Dr. Peter Selby





Please introduce yourself in the chat!



@OntarioCollege
#PractisingWell

Your Panelists: Disclosures



Dr. Luke Kyne

Relationships with financial sponsors (including honoraria):

- The Hub Hamilton (Co-Founder and Director)
- OCFP Practising Well Community of Practice Speaker



Dr. Diana Ahmed

Relationships with financial sponsors (including honoraria):

OCFP Practising Well – Community of Practice Speaker



Dr. Harry Zeit

Relationships with financial sponsors (including honoraria):

OCFP Practising Well – Community of Practice Speaker

Disclosures

Dr. Peter Selby @drpselby

Relationships with financial sponsors (including honoraria):

- York Region, CAMH, ECHO, ASAM, FAME, Local CHC, Veteran's Affairs Canada Honoraria
- CCSA, Cancer Care Ontario, ECHO Ontario, MOHLTC, CAMH Medical Advisory Committee, Dalla Lana U of T Youth Vaping Cessation Advisory Board or Advisory Committee Member
- CIHR, Health Canada, Canadian Cancer Society Research Institute, Medical Psychiatry Alliance, MOHLTC, Canadian Partnership Against Cancer, Ontario Neurotrauma Foundation, Patient-Centered Outcomes Research Institute, CAMH, Public Health Agency of Canada Grants and Clinical Trials
- Pfizer Inc, Johnson & Johnson, Novartis Vendors of record for providing smoking cessation pharmacotherapy through an open tendor process, free or discounted, for research studies in which PS is the principal investigator or co-investigator.
- Ontario College of Family Physicians Practising Well

Dr. Stephanie Zhou @stephanieyzhou

Relationships with financial sponsors (including honoraria):

- Ontario College of Family Physicians Practising Well Implementation Group Member, CoP Speaker
- Canadian Medical Association Honoraria for practice management lectures
- Habitat for Humanity GTA Board of Directors member

Disclosure of Financial Support

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Potential for conflict(s) of interest: N/A

Mitigating Potential Bias

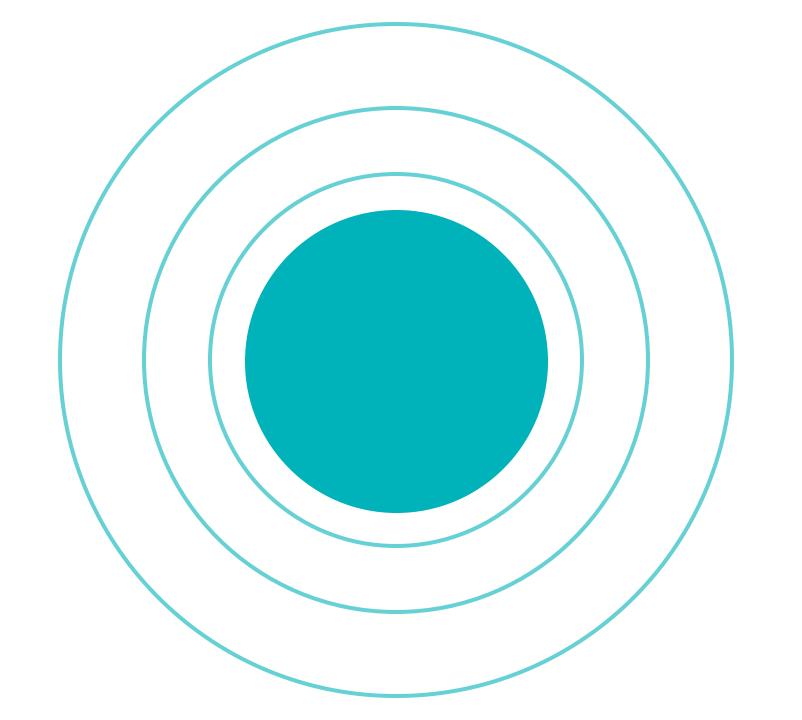
- The Scientific Planning Committee (SPC) has control over the choice of topics and speakers.
- Content has been developed according to the standards and expectations of the Mainpro+ certification program.
- The program content was reviewed by the SPC.

Land Acknowledgement

We acknowledge that the lands on which we are hosting this meeting include the traditional territories of many nations.

The OCFP and DFCM recognizes that the many injustices experienced by the Indigenous Peoples of what we now call Canada continue to affect their health and well-being. The OCFP and DFCM respects that Indigenous people have rich cultural and traditional practices that have been known to improve health outcomes.

I invite all of us to reflect on the territories you are calling in from as we commit ourselves to gaining knowledge; forging a new, culturally safe relationship; and contributing to reconciliation.





Life Beyond Trauma: A discussion on PTSD and trauma-informed care You raised important questions we'll try to work through together today:

- 1. What are some practical pearls for assessing and treating trauma?
- 2. How to deal with my own PTSD triggers when caring for my patients?
- 3. What are some resources and supports for my patients experiencing trauma?



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Toronto, ON



Dr. Diana Ahmed
Burlington, ON



Dr. Harry Zeit
Toronto, ON

THE HUB



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What is Trauma?

TRAUMA: an experience that creates a sense of fear, helplessness or horror and overwhelms the person's resources for coping.

RESILIENCE: the ability to cope and adapt to stress, adversity or trauma.

Trauma is not the same as PTSD

Not everyone who experiences trauma (an experience) develops PTSD (a diagnosis)

DSM-5 Criteria for PTSD:

- -exposure to actual or threatened death, serious injury or sexual violence.
- -re-experiencing symptoms (eg nightmares, flashbacks).
- -avoidance symptoms.
- -cognitive and mood symptoms (chronic low mood, loss of interest, negative belief about self or world).
- -hyperarousal symptoms (hypervigilance, insomnia, irritability, poor concentration).
- -duration more than one month.

What is COMPLEX trauma/PTSD?

- Not a DSM diagnosis but recognized by many experts.
- Trauma that is severe, repeated and often of an interpersonal nature eg. childhood abuse or profound neglect (Adverse Childhood Experiences: ACEsscore)
- Often begins in early life and disrupts the child's development (physical and mental) as well as formation of self-identity.
- Often occurs in the context of a child's caregiver relationship and therefore interferes with the child's ability to form a secure attachment bond. Leads to significant disruption in the ability to self-regulate.
- Differs from **simple PTSD** which refers to ONE definable event.

The aftermath of trauma

- Chronic pain
- Medically unexplained symptoms
- Addiction
- Eating disorders
- Severe obesity
- Self-harm
- Suicide
- Addiction: cigarettes, alcohol, drugs, etc.
- Mental health disorders; especially chronic anxiety, chronic depression, OCD, bipolar and personality disorders
- Professional burnout

Managing Complex PTSD:

PHASE 1: focus on safety, stabilization and engagement; reducing symptoms; establishing resources.

PHASE 2: remembering and grieving; processing memories of trauma.

PHASE 3: Reconnecting and integrating; transitioning from treatment to engagement in work, relationships and community.

FAMILY PHYSICIANS CAN DO PHASE 1 in their office

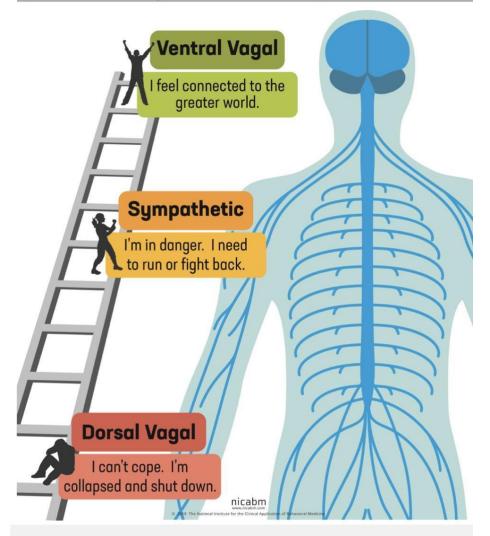
PHASE 1: What family doctors can do

- Validation, build connection and safety ("the relationship IS the therapy").
- Psycho-education about the effects of trauma.
- Attention to sleep (Trazodone, Prazosin)
- Teachable skills: mindfulness, grounding, breathing; distress tolerance.
- Treat other co-morbidities eg depression, anxiety, substances use, ADHD.

** some benefit for SSRIs in PTSD-->SHAREDDECISION-MAKING!! ?anti-psychotics for dysregulation and impulsivity (treats symptoms only)

NICABM Free Report - pg. 4

Polyvagal Theory: The Autonomic Ladder Understanding the Nervous System Adapted from Deb Dana, LCSW



The polyvagal ladder, adapted by Deb Dana.

Source: NICABM.

SAFETY

- primary goal: cannot proceed with next steps of treatment and healing until patient feels safe and experiences safety in their environment.
- we need to understand safety as an EMBODIED experience ("felt safety") rather than a cognitive or psychological one.
- the effects of trauma get stored in the nervous system and therefore affect our sense of safety and attachment.
- Polyvagal Theory (Dr Stephen Porges)-->NEUROCEPTION: our autonomic nervous system is always scanning for signs of safety or danger; body reacts to these cues in our environment. People with history of trauma spend more time further down the ladder and can get "stuck".

How can I help a patient feel safe?

- be mindful of your own state!
- health providers can provide safety "cues" which triggers the patient to lower defensiveness (perceived threat) and promote nervous system safety (connection) eg. quiet room, eye contact, facial expression, voice tone (PROSODIC VOICE).
- continuity of care, predictability, transitions.
- be aware of your physical proximity, appropriate use of touch (always ASK FIRST!)



Empowerment/Self-Determination

- use a strength-based, empowerment-oriented approach to health care provision:
 - -->helps patients rebuild agency and self-efficacy.
 - -->prevents further victimization.
- we do this through validation, providing choices (allow patients as much autonomy and control as possible).
- allow patients to disclose only what they are comfortable with.



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Tools



Links to resources shared today will be sent to participants following the session.

Videos

The Window of Tolerance - https://www.youtube.com/watch?v=nZnJMyNT620

Regulate, Relate, Reason (Sequence of Engagement): Neurosequential Network Stress & Trauma Series - https://www.youtube.com/watch?v=LNuxy7FxEVk

This Will Change How You Think About Trauma | Dr. Bessel van der Kolk, Being Well Podcast - https://www.youtube.com/watch?v=W_HJPYfukiY&t=3160s

Strengthen Your Resilience During Covid-19 - https://www.youtube.com/watch?v=1TPi-WE3KWM&t=2873s

Resources

Books

The Body Keeps the Score by Bessel van der Kolk MD - https://www.besselvanderkolk.com/resources/the-body-keeps-the-score

What Happened to You? by Bruce Perry MD with Oprah Winfrey - https://us.macmillan.com/books/9781250223210/whathappenedtoyou

Damaged: Childhood Trauma, Adult Illness and the Call for a Healthcare Revolution by Robert Maunders MD - https://www.maunderings.ca/?page_id=762

Trauma as a determinant of health - https://thischangedmypractice.com/trauma-as-a-determinant-of-health/

In Focus: Recognizing trauma as a means of engaging patients - https://www.commonwealthfund.org/publications/2016/jun/focus-recognizing-trauma-means-engaging-patients

The trauma world and the healing world - https://abetternhs.net/2020/01/20/the-trauma-world-and-the-healing-world/

Understanding PTSD - https://www.psychologytoday.com/ca/contributors/annie-tanasugarn-phd-cctsa

Chronic illness trauma studies - https://chronicillnesstraumastudies.com/

Homeless Hub - https://www.homelesshub.ca/

The Canadian Alliance to End Homelessness - https://caeh.ca/

International Journal on Homelessness Website - https://ighomelessness.org/

Deaths in the Hamilton Homeless Population - https://hamiltonhomelessmortality.weebly.com/cumulative.html

Hamilton Code Red - https://www.thespec.com/news/hamilton-region/code-red.html

Health care of people experiencing homelessness in the United States <u>- https://www.uptodate.com/contents/health-care-of-people-experiencing-homelessness-in-the-united-states</u>

Access more mental health tools and resources through the OCFP's Clinical Tools & Resources repository.



Access Tools & Resources

Education

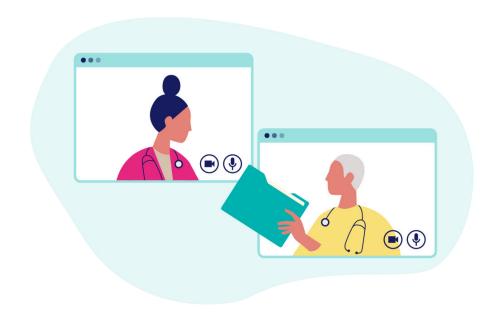


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After today's CoP session, continue your learning with:

Peer Connect

Interested in continuing your learning journey to better support your patients who have experienced trauma? Join your colleagues and a Peer Guide in small group discussion! Space is limited.





Complete this short survey to participate: https://www.surveymonkey.com/r/J5SXVQN

Resources Supports O

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Supports



OMA Physician Health Program https://php.oma.org

Centre for Addiction and Mental Health Health Care Provider (HCP) Resource Site http://www.camh.ca/covid19hcw

CMA Wellness Hub https://www.cma.ca/physician-wellnesshub



- PARO 24/7 Helpline for Residents, Family Members, Medical Students
- 1-866-HELP-DOC



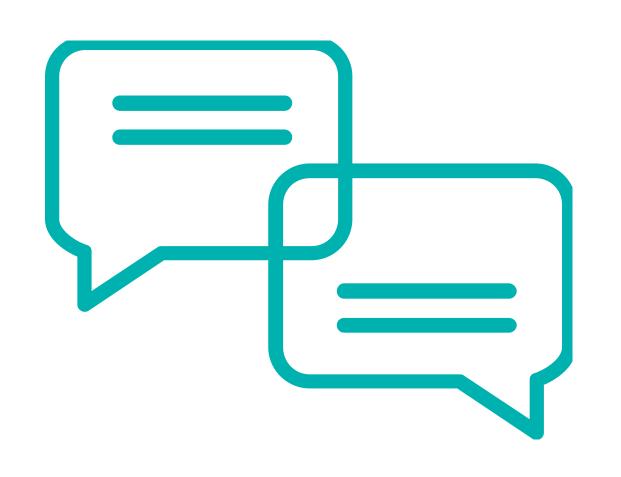
- https://www.ontario.ca/#support-health-care-worker
 - Self-led / With peers / Talk to a clinician
- •Ontario Shores Centre for Mental Health Sciences, Whitby
- •St. Joseph's Healthcare, Hamilton
- •The Royal Ottawa Mental Health Centre, Ottawa
- Waypoint Centre for Mental Health Care, Penetanguishene
- •Centre for Addictions and Mental Health (CAMH), Toronto



- ECHO Coping with COVID
 - for health providers (educational credits)
 - Fridays 2-3pm EST

https://camh.echoontario.ca/echo-coping-with-covid/

Support for you and those you care about.



What is one thing you can do to support your colleagues and patients who have experienced trauma?

Upcoming Community of Practice

Mindful Medicine

Adapting and learning to cope with uncertainty
with Drs. Merrilee Brown, Lisa Del Giudice and Sarah Newberry

March 22, 2023 7:55am - 9:00am

Register Now



practisingwell@ocfp.on.ca