5 December 2016

To the GP/Healthcare Practitioner it may concern

**RE: Psychological help after a traumatic event**

The Department of Health has written to people who were affected by the terror attack in Nice in July this year advising them to seek medical or psychological help if they experience symptoms of mental ill health as a result of coping with the psychological impact of the incident.

This open letter to GPs and healthcare practitioners and a leaflet explaining the possible symptoms people may experience after a traumatic event were included with that letter. The leaflet covers a description of symptoms to look out for in oneself or others, including children and suggests that people seek medical help if their symptoms get worse or continue beyond four weeks, as this may indicate Post Traumatic Stress Disorder (PTSD).

Symptoms mentioned include:

- wanting to talk about what happened and feeling there is no one to talk to;
- being easily startled and agitated;
- experiencing vivid images of an incident and having intense emotional reactions to them;
- disturbed sleep, disturbing thoughts preventing sleep, and nightmares;
- experiencing changes in mood for no obvious reason;
- experiencing tiredness, loss of memory, palpitations, dizziness, shaking, aching muscles, nausea and diarrhoea, loss of concentration;
- breathing difficulties or a choking feeling in throat and chest;
- feeling emotionally numb;
- relationships suffering since the incident;
- increased alcohol or drug use since the incident;
- performance at work suffering since the incident; and/or
- someone close expressing concern.
In addition to the possible symptoms above, children experiencing PTSD may think differently about themselves or other people. They might:

- blame themselves or show lowered self-esteem;
- think that they are a bad person or deserve bad things to happen to them;
- show less trust in other people and be less able to experience a sense of safety;
- experience overwhelming shame, sadness or fear; and/or
- avoid situations where fear could increase their emotional response, that might make them feel more frightened or reminded of the event.

Many of those in Nice were injured or witnessed others being injured or killed over a prolonged period of time and it is possible that they have developed one or more of these symptoms as a consequence. It is also possible that a pre-existing mental illness that was being successfully managed by the patient may have been destabilised by these experiences. It is often difficult to talk about mental ill-health and the purpose of this letter is to support those who are experiencing symptoms to start a conversation with their GP or healthcare practitioner about their options for treatment.

With regard to the best treatment for each individual, it remains your clinical judgement. All local adult IAPT services have High Intensity Therapists trained to deliver evidence-based trauma focused therapy. They will be able to conduct a psychological assessment to determine whether IAPT services would be an appropriate treatment option for each patient. Children presenting with this note may benefit from referral to Child and Adolescent Mental Health Services (CAMHS) in the usual way.

I hope this has been a helpful introduction to assist you and your patient in discussing their experiences and in choosing a treatment option.

If you have questions about this letter, you can get in contact with the Department of Health by telephoning 0207 210 4850, or textphone 0207 451 7965. Alternatively you can use the contact form available on this webpage:


Yours faithfully

Jonathan Marron

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