

Emergency planning and posttraumatic stress disorder

In this year's April issue of the *BCMJ* (49[3]:146-147), I reported on the regional preparedness exercise conducted in Cranbrook, British Columbia. The overall exercise seemed to be successful; however, as a psychiatrist with experience treating quite a few patients with posttraumatic stress disorder (PTSD), I was curious whether participation in such a drill might trigger significant anxiety symptoms in some individuals. Jon Allen, PhD, in his monograph *Coping with Trauma: Hope through Understanding*, describes a model that identifies factors that may predispose individuals to the development of anxiety syndromes after exposure to trauma or to events that trigger a reaction to previous significant trauma.

The volunteers in the Cranbrook regional preparedness exercise were asked to complete a questionnaire after the exercise. The questionnaire asked what their normal resting heart rate would be and asked them to record their current resting heart rate. Twenty-two volunteers in the drill between the ages of 28 and 58 completed the questionnaire. Of the 16 who reported their gender, there were nine men and seven women. At the conclusion of the exercise, three individuals reported an increase in resting heart rate of 20 beats per minute or greater compared with their usual resting heart rate. The participants were also asked "What skills, strategies, and/or resources promote resiliency from stress for you?" and "What factors distract you from your optimal functioning?" Their responses, as summarized below, were enlightening.

What promotes resiliency from stress?

- Exercise (mentioned by five)
- Knowing my job and responsibilities

- Training; reinforcement of skills learned
- Talking about concerns with co-workers and spouse
- Past experience with stressful events
- Having an optimistic attitude
- Relaxation techniques
- Hobbies, sports, reading

More time for planning, involvement of local physicians, and follow-up will be scheduled in the development of these preparedness exercises.

What distracts from better functioning?

- Sleep deprivation (mentioned by six)
- Worries about my family's welfare, safety of children
- Lack of training and/or practice
- Patient overload, too many responsibilities
- Issues out of my control, disorganization, uncertainty
- Changes in directions for no good reason
- Working with those with "headstrong" attitudes
- Patients who aren't coping well (crying, screaming)
- Stressed onlookers, personal anxiety

Lastly, the questionnaire provided a list of possible pandemic-related concerns for volunteers to rank by degree of importance to them. The results, in order of highest degree of concern to lowest, were:

- Allocation of scarce resources
- Staffing issues
- Internal communications at my facility
- Duty to provide care vs personal duties

- Coping with difficult triage decisions
- Psychosocial support for family, colleagues, etc.
- Relationships between teams and care providers
- Moving between facilities, according to needs
- Other hard ethical choices
- Welfare of my animal companions (pets)
- Restricting liberty, sequestration

Ideally, surveys such as this one will be conducted as part of future regional drills, and more time for planning, involvement of local physicians, and follow-up will be scheduled in the development of these preparedness exercises. This questionnaire is available for anyone who wishes to use or modify it.

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After serving 6 years as chair of the Emergency Medical Services Committee, I feel it's time for new leadership. I am delighted that Dr Roy Pursell, an emergency physician with an interest in the activities of the BCMA Council on Health Promotion and a great deal of experience in emergency medicine, teaching of medical students and residents, and research, accepted the nomination for this position and was ratified by the Board of Directors of the BCMA, effective July 2007. I look forward to seeing the new goals and directions under Dr Pursell's leadership.

I would like to thank my colleagues on the Emergency Medical Services Committee for their contribution to our association and to health promotion for the public. It has been a pleasure to work together with them on this committee.

—Ian Gillespie, MD
Past Chair, Emergency
Medical Services Committee