In DSM-IV, PostTraumatic Stress Disorder (PTSD) is defined as an exaggerated psychiatric symptom secondarily to a stressful traumatic event. This arises as a response to a stressful event or situation of an exceptionally threatening or catastrophic nature, which is likely to cause pervasive distress in almost anyone (i.e. natural or man-made disasters, military combats, serious accidents, fires). This syndrome in men is the result of war.

Clinical symptoms of PTSD include:
Persistent anxieties, irritability, sleep disturbances, depression, disturbing dreams, and nightmares.

About 3.6 percent of U.S. adults (5.2 million people) have PTSD. 30 percent of the men and women who have spent time at war zones experience PTSD.

Assessment of PTSD is consists of:

➢ Nature & severity of stressor
➢ Nature & duration of signs
➢ Previous personality
➢ Past psychological history

The priorities of nursing care in PTSD include:
- Medication to help with sleep, disturbing memories, anxiety and depression
- Stress and anger management
- Group therapy for PTSD.
- Self-Caring

There are educational centers offering education for veterans and families.
Above all, it is important to be a good listener for such patients.