PTSD Bytes – Audio Transcription

Episode #:	16
Guest:	Margaret-Anne Mackintosh, PhD
Title:	#16: PTSD and Anger

Pearl:

Welcome and thank you for tuning in to PTSD Bytes, the podcast where we invite experts to talk about PTSD and mental health and how technology like mobile mental health apps can help. We'll cover a new topic every other week in bite-sized episodes. I'm your host, Pearl McGee-Vincent, and I'm a clinical psychologist at the Veteran's Affairs National Center for PTSD.

Pearl:

Today we are joined by Dr. Margaret-Anne Mackintosh, a clinical psychologist at the National Center for PTSD, to talk about PTSD and anger. Dr. Mackintosh researches technology and mental health, and specializes in problematic anger related to trauma. Welcome Dr. Mackintosh.

Maggi:

Thank you, Dr. McGee-Vincent, please call me Maggi.

Pearl:

Absolutely Maggi. And you can call me Pearl. Glad to have you on. So tell us about anger and how it relates to PTSD.

Maggi:

Absolutely. I think anger relates to PTSD in a couple different ways. it's one of the symptoms of, posttraumatic stress disorder. And it also is one of the most common symptoms that people report as what's driving them into treatment. Something is going wrong with their anger in their lives. They're not getting along with their family, they're experiencing problems at work, that intense anger is maybe causing health problems.

Pearl:

Thank you, that's really helpful. Doesn't everyone feel anger some of the time? When does anger become problematic?

Maggi:

So does everybody feel anger? I think-that's a really important question and yes, most of us do. When thinking about problematic anger, which is when the anger is somehow interfering with your life, it's too intense, it's coming too often.

Pearl:

and what does that look like in PTSD?

Maggi:

Anger as part of PTSD can show up in a number of different ways. And we have this worry about anger becoming aggression is really an extreme that doesn't occur as often as we may fear. I think anger and

PTSD is more likely to show up as maybe that persistent irritability due to being always on edge and feeling all keyed up. I think other ways people experience it, some folks with PTSD may isolate themselves because of their anger. Because they don't want to get into arguments with people. Most folks talk about anger as the energy is pointed outward, that people are yelling, people are slamming things. And I think another way that anger can be experienced is more internally, where it may feel more like depression or they may experience a lack of emotions in general, feeling kind of cold and shut down. And so the anger can be experienced both internally and externally.

Pearl:

You made a nice distinction about anger not being good or bad, there can be positive expressions of anger that can promote change and growth. And I also get the sense as you're describing the experience of somebody that lives with this irritability, that it's just really uncomfortable to live like that. It sounds like a really important symptom for folks to get help with.

Maggi:

Absolutely. The very nature of problematic anger is that it's interfering or it's disrupting people's lives. It's stopping them from living the lives that they want to live. We know people with PTSD can suffer from social isolation, both from the anger, as well as some of the other symptoms. And I think another place to understand how anger can disrupt people's lives is anger also shows up a lot with other issues that people may be dealing with such as chronic pain, sleep difficulties, traumatic brain injury and alcohol and drug disorders. And so helping people address the anger is really important.

Pearl:

Some of our listeners might be thinking to themselves, why do I need to change? If other people didn't make me angry, there wouldn't be a problem. What do you say to them?

Maggi:

I usually come at this from the perspective that if anger is causing problems in your life, and that is the point of change, the only thing somebody can change is themselves. And so helping people identify motivation for changing their anger, identify the parts of their anger that aren't helpful to them from their own point of view is where we can start.

Pearl:

I've heard people say things like I go from zero to 60 instantly. I don't have time to change anything. Is it hopeless or are there ways that even those folks can work on their anger?

Maggi:

the answer in a nutshell is no, it is not hopeless. This is very much part of an anger management treatment. We help folks to understand what are the warning signs that they're becoming angry, that they may in time become more likely to notice before they're set off. We also want to help them understand what we call anger triggers. What are the situations and feelings that are going to lead them to become angry? So yes, we can learn to slow down that anger process.

Pearl:

I imagine that this is really challenging to do on your own and that people can benefit a lot from support and professional help. If somebody is interested in getting treatment or support for problematic anger, whether they are getting treatment in VA or outside of VA, where would you suggest they start?

Maggi:

So if people want to start addressing their anger on their own, outside of professional treatment, there are digital resources that I think are really helpful. The VA has put out our Anger and Irritability Management Skills course, which is what we call the AIMS tools. And these are available through the VA and they're free, they're anonymous. And they are for both Veterans and non-Veterans.

The first one is a web-based course. It's got eight chapters that help you with identifying warning signs and triggers, as well as learning new skills that help you manage your anger in the moment. And then a second tool we have is our AIMS mobile app, includes similar tools and information about anger and, how to treat anger. It includes resources on how to find treatment options.

And then if people feel like they need additional help, both within the VA and outside the VA, it's a type of therapy that we call cognitive behavioral therapy. Therapy becomes about learning tools or skills that will help you slow down that cycle and choose other behaviors that will probably be more in line with the life you want to live.

Pearl:

In the way that you've described anger, one of my takeaways is that your anger can be valid and you can still work on it.

Maggi:

Oh, absolutely. Especially in the context of trauma. I would never tell people not to be angry about injustice, for example, but I would encourage them to, to deal with the aspects that aren't helpful to them.

Pearl:

If one of our listeners right now is looking for a tool that they can access right now in-the-moment to help them with anger, what would you suggest?

Maggi:

the first step that I would suggest is one of the ways we can slow down the anger escalation process. Look at our AIMS mobile app and in the Tool section, they'll find a deep breathing exercise. And go ahead and try it out, and notice if your body feels any different. If you feel more relaxed, perhaps, or less angry or tense.

Pearl:

Thank you, Maggi for joining us on PTSD Bytes today and sharing this really important information about anger and resources that can be helpful to folks with PTSD and anger.

Maggi:

I appreciate you having me here Pearl, thank you.

Pearl:

Dr. Mackintosh mentioned a couple resources that you or your loved ones may find helpful. There is a course called AIMS, which stands for Anger and Irritability Management Skills or A-I-M-S. That online course is available at Veterantraining.va.gov. There's also an app – you can search for the AIMS mobile app wherever you get your apps.

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