



NLND HEALTH PEARL #23

## Still in Harm's Way

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### Our Soldiers' PTSD & Suicide... Is the V.A. M.I.A.?

**T** *Training inoculates you against trauma. The first time you see someone dead, it's a shock. By the 10th time, you're walking over dead bodies and making sick jokes about what they had for breakfast. But all that stress accumulates.*

—Mark Waddell, a former Navy Seal  
TIME MAGAZINE, NOVEMBER 30, 2009

Feelings of anger, frustration, shock and sadness have overtaken me while preparing for this article, but also feelings of amazement, gratitude, respect and pride for the men and women who have put on the uniform to stand up for our freedom. Watching videos<sup>1</sup> and reading articles of eyewitness reports and stories about returning soldiers gave me glimpses of tension, fear, and being grossed-out.

For various reasons, many of their heart-wrenching stories will never be known. They may have died in battle, fearing for their life while in excruciating pain. Maybe they committed suicide during or after their enlisted time, or they have been traumatized so much that their experiences have been tucked away deep in their memory, but not gone.

Post Traumatic Stress Disorder (PTSD) sustains an immediate connection to horrendous and traumatic experiences from wartime that plague soldiers, both active and retired, for many years after those incidents occurred.

War changes many more lives than soldiers fighting in battle. It affects extended families, cities, countries and cultures. PTSD is real, and dates back to the first battles ever fought, involving fear for loss of life or limb for oneself and for one's mates.

#### FIGHTING THE JUST FIGHT?

A long time ago, a man would fight his own battles following escalating disagreements with other parties—a stolen pride, a hurt ego, property that had been taken, or the fear of losing one's safety. During the past millennia, these fights, first between individuals and families, eventually turned into battles between tribes and countries. Help would come from those sympathetic to whatever the cause was. The leader usually was a king or landlord whose soldiers often had to fight to the death. The winner would take all. Especially in Europe, many battles on land and sea changed borders and land ownership.

It has exposed us men as being the most ruthless and sadistically creative beings on this planet. The types of torture invented during the Middle Ages, and the public spectacles that often were made of them, makes me wonder about the trauma that both warriors and the regular public must have endured. Every time men were asked to sacrifice the ultimate, families were taken apart and lives and livelihoods were destroyed. Often soldiers were recruited by force or by threat of hurt to the rest of their family members. Presently the leaders don't fight anymore, but instill patriotism into young, fit, trainable individuals—both male and female—who leave for the battlefield with a sense of compliance, fighting for a vision set forth by their heads-of-state. Military hierarchy replaces an otherwise absent leader. Messages of hope, strength, brotherhood, dependency and trust are mixed with often brutal combat training.

But once surrounded by deafening battleground noises and little-to-no sleep, every experience is multiplied and hits deeper into the psyche. Having that constant fear of dying, mixed with the stench of death and destruction, heightens



one's vigilance and almost any violent occurrence becomes a traumatic stress. Especially as one realizes that this is not actually *their* fight.

### WHO FIGHTS THE FIGHT?

This is the generation of video-gamers. From a young age, kids are exposed to winning and losing, battlefields, robots, aliens, secret agents, snipers, explosions, and more gory brutality than most of us over thirty-five have experienced. Head-phones with stereo speakers, screaming and graphic blood enhance the excitement.

Then there are the many new and available movies containing invasions, kidnappings, rape, alien life, horror, suspense, and violence, in 3-D and slow motion, as well as the unlimited and unrestricted supply of social media feeds. One would think that potential soldiers have had enough of this "excitability cocktail" to make them ready for basic training and battle. However, not all men and women are warrior types. That's the way it was then and that's the way it is now.

What type of individuals do we send to war? Behavioral changes beg to ask the question, what really happened to those loving, calm, helpful, non-aggressive, funny and honest teenagers we knew before they were deployed? What happened to them between the time we got them off to boot camp and the time we reconnect after they come

home from serving their time?

In spite of the fact that many young people volunteer to join the armed forces, not every one of them is cut out for the experience of potential deployment into war zones—some don't even survive boot camp. Many 18-to-19-year-olds join for God and country with a good feeling of self-confidence and pride, even though other excellent opportunities like

**“I feel like people with my symptoms are becoming the majority of the Army. Feeling anxious when you don't have to, being depressed and unable to enjoy things, not sleeping well—this is the new normal for those of us who've been repeatedly deployed.”**  
Army major who started taking antidepressants and sleep meds after his 2nd tour in Iraq. —NEW YORK MAGAZINE

college are offered. Some have an inborn avoidance of confrontation—their souls hold on to a certain amount of *spiritual momentum* that may cause them to hesitate pulling the trigger in conflict. They are also more affected by the aftermath that violence creates, i.e. dead bodies, debilitating wounds, blood and guts, etc. The realities of war clash with their innate value system.

Then there are those who join because they have had to deal with life-altering situations from a young age. Their teenage years have been tough and challenging, and joining the armed forces may bring the necessary family-type experience along with a strict hand, physical activities, and an opportunity to carve out a potentially lucrative career. Dealing with confrontation, violence, survival instincts, and using a weapon to take-out an enemy may seem to come a lot easier for them, and walking away

from the war may be less traumatic. But, there are no set rules. We know of veterans having nightmares, tearful breakdowns, laying curled up in bed in a fetal position wearing their boots and uniform with a loaded handgun under the mattress, becoming skittish and jumpy, avoiding discussions, falling into a spiral of depression and loneliness, and even committing suicide. Other returning soldiers have become involved in crime and even murder. All involved have experienced much pain and trauma, even though it was done in the spirit of righteousness and solidarity.

### IT TAKES A VILLAGE...

When the world population was smaller, tribes would take care of their wounded warriors during and after battle. Those who were able to fight were celebrated as heroes for helping those who could not.

Everybody was involved, ranging from making weapons, preparing food, praying, and healing the wounded. A listening ear and support would be rendered to those telling stories of pain and loss.

As times changed, wars have been fought farther away and they have taken longer. This affected the support system at home and it increased the loneliness and coping mechanisms of those in battle. New friendships were started, bonds were made, new hierarchies were accepted, and, above all, courage and sacrifice were expected—demanded. The villagers, meanwhile, would mourn their lost heroes, while



\*Jacobus is not a doctor and does not intend to diagnose, treat or cure any disorder. The information is based on self-study, interviewing experts on his weekly 3-hour Saturday morning Radio Program\* "Gesundheit! With Jacobus," which runs from 8-11 am, on AM 1450-KMMS and AM 1340 KPRK, and on feedback received from retail customers visiting his dietary supplements retail store Gesundheit! Nutrition Center at 2855 N. 19th Avenue, Suite N, in Bozeman (585-4668). If in doubt please visit a professional of your own choice and/or educate yourself with available published materials.



supporting the battle-weary coming home.

We can probably call Korea the last war where time and distance gave those at home a feeling of helplessness mixed with pride and patriotism. Soldiers returned home after serving their country and were able to blend back into society. Family support and strong faith, as well as supportive employers, would make the transition easier.

But with the introduction of TV and live footage during the Vietnam War and subsequent conflicts, all the action was brought right back into our living rooms, complete with conflicting commentary. It became mostly about the media and what it wanted you to know, not about the mission and well-being of all who were risking and giving their lives.

The minds of the audience were so indoctrinated that opinions were formed without living through it; whereas, those who came home after living the experience found a nation not interested in either their opinion or their PTSD (called *shell shock* or *battle fatigue* back then). The authentic village support now seems gone and many soldiers are left alone, fighting their anxiety and moral injuries, often unable to cope with their physical and psychological wounds.

In a *Time Magazine* article entitled, "The Hell of PTSD," by Tim McGirk of Colorado Springs (Nov. 30, 2009), a paragraph titled, *Taken for Granted*, states, "Soldiers who serve in Iraq and Afghanistan may not experience the hostility from society upon their return to the U.S. that Vietnam vets did. But they encounter something that psychologists say is nearly as disorienting: America has found ways to distract itself from the fact that it has dispatched 1.6 million service-members to two wars (*now 2.7 million through 2012—jh*), and has kept them fighting far longer than the duration of World War II.

"This struck former Navy SEAL Mark Waddell when asked by a stranger how he broke his leg. 'Iraq,' Waddell answered. The reply, 'Was it a *car wreck* or a *cycle wreck*?' Colorado Springs psychologist Kelly Orr, who is treating vets, says, 'We all get excited when Johnny goes marching off to war, and then we forget about him a few days later, when our favorite football team loses a game.' This, says Orr, adds to a

**I f I had a troubled returning vet in front of me, these are some of the bottom-line things I would say to him...**

**Welcome home!** The battles you've been through may have caused havoc within your nervous system. This is healable and reversible with the right kind of attention and therapies. A new battle for your own sanity and wholeness has begun. You are a human being seeking wholeness now, actually like the rest of us. It's not just a "problem" for the V.A. to solve. The V.A. and unfortunately, most of the medical establishment, may not be equipped to get to the core and solution of this dilemma for you. Traditional chemical and group-talk therapies may help, and can take the edge off, but drugs will deaden you in the long run, and mask the underlying issues, rather than deeply resolving them.

Remember your nutritional support and give yourself some nutrient-dense green foods that you need to recover. The amino acid Tryptophan is very likely missing from your diet (a serotonin precursor). Get that into your body from foods that are rich in ALL the amino acids, like the moringa tree

or blue-green algae.

If you've been on Prozac, or other antidepressants called *serotonin reuptake inhibitors*, remember that these only reroute your already low serotonin to feed the brain with the well-being feelings that this amino acid provides, (a layman's, not a biochemist's, explanation). But be very careful not to go off these drugs *cold turkey*. You can find yourself bankrupt of serotonin and may become suicidal or homicidal. (The statistics are there and it has happened to friends of mine.) Find a qualified health practitioner who can guide you.

Educate yourself. The solutions are learnable and doable. Your brain is stuck in a primitive state of "fight or flight" because of the trauma you faced. Your *autonomic nervous system* needs to be reset, reorganized and refreshed. The limbic/survival brain needs to get reconnected to the prefrontal cortex. Talking this through and/or drugs won't accomplish this, but there are natural therapies that can. Breathwork is one of them. EFT (Emotional Freedom Technique) and RET (Rapid Eye Technology) are two others. These are tried and true, but

probably won't be covered or even recommended by the V.A.—but you can pursue them yourself. They are not expensive. There are therapists wanting to help you. You must seek and ask.

Watch the movie starring Christian Bale called "*Harsh Times*" (one of his best performances as a messed-up returning vet)... *and weep*. DON'T GO where this character went! You owe it to yourself and your family to find a way to renew yourself. Visit [TraumaHealing.com](http://TraumaHealing.com) by Peter A. Levine, Ph.D., the developer of Somatic Experiencing®. He is a true pioneer in the understanding and resolving of PTSD. *Somatic* means "in and of the body." Your issues are very physical, not just "in your mind," as some would tell you.

Remember that you're not alone and trauma comes to many of us and not just from war. Plenty of civilians, especially women, have experienced it too. If you find yourself being abusive to yourself or your loved ones, stop now and call for help. Please remember that alcohol, especially along with drugs, is a poison, not a friend.

I offer Breathwork Seminars (406-333-4103) along with Dustin Fox,

returnee's well of anger and loneliness."

Waddell speaks of a "break in the covenant" between those who volunteer to fight and the society that sent them into battle and then forgot about them. There are no hard-and-fast rules for treating PTSD, but studies show that stricken veterans who have a strong social network of family and friends tend to bounce back faster...

### IS THE V.A. M.I.A.?

In the same article, McGirk references a Rand Corp. study that concluded about one-in-five soldiers returns from war (*about 550,000 thus far—jh*) with symptoms of PTSD. And anyone going through multiple deployments is going to be affected. But, according to Rand Corp., half of the cases go untreated because of the stigma that both the military and civil society place on mental disorders.

As in other areas, the military is

undermanned when it comes to mental health experts. The Army reckons that it has only about 400 psychiatrists handling more than half-a-million troops! Faced with a wave of service-members coming back from combat in anguish, the Pentagon has made the diagnosis and treatment of PTSD a top priority. And even though platoon leaders are supposed to steel their troops physically and mentally against the enemy, every battalion, especially in combat zones, is now supposed to have a mental-health specialist.

The *Billings Gazette*, on Monday, June 11th, published an opinion piece entitled, "U.S. Must Do More to Combat Military Suicides," stating, "More American military personnel have died by suicide this year than have been killed in combat. That terrible fact says more about the failure to protect the mental health of our troops than it does about a decrease in soldiers killed in action. Those numbers don't count suicides by veterans, which are running at 18 a day, according to the Department of Veteran Affairs. Yet a stigma about soldiers coming forward with their mental-health issues persists."

Dr. Joseph Mercola's article<sup>2</sup> of May 14th, subtitled, "Why Are Soldiers Dying in Their Sleep?" reads, "A growing number of U.S. veterans, whether they're still deployed or back at home, are being downed by something else. They die in different ways, but they all have one thing in common—at the time of their deaths they were on a cocktail of drugs prescribed for them by V.A. military doctors to treat PTSD. It is often called *The Cocktail of Death* and consists of antidepressants, antipsychotics and analgesics (Seoquel, Klonopin, Oxycodone, Xanax, Percocet, Celexa, Lunesta, Ambien, and Paxil).

"The combination of these drugs, especially when mixed with alcohol, really can mess you up. However, the V.A. has ruled their doctors have done nothing wrong, as they met 'the community standards of care.' Sadly, this standard is often just as deadly as the

disease. V.A. doctors should reduce their reliance on toxic drugs, and focus on other therapies such as counseling and outdoor activities."

Pulitzer Price winning investigative reporter for the *Great Falls Tribune* Eric Newhouse has written a touching book entitled, "*Faces of Combat—PTSD & TBI: One Journalist's Crusade to Improve Treatment of Our Veterans.*" I highly recommend reading his blog entries on his website.<sup>3</sup> On May 15th, he wrote: "Last month, the U.S. Army Medical Command issued a report changing its policy on pharmaceuticals. It said that only Selective Serotonin Reuptake Inhibitors (SSRIs) and Serotonin Norepinephrine Reuptake Inhibitors (SNRIs) have shown evidence that they do enough good for a patient to justify the prescription. It strongly cautioned against benzo-diazepines and atypical antipsychotics, saying that they do more harm than good. There is evidence now to suggest that benzodiazepines may actually potentiate the acquisition of fear responses and worsen recovery from trauma."

### AND, FINALLY...

We live in a time when many veterans from WW II, Korea, Vietnam, Bosnia, Desert Storm, and currently from Iraq and Afghanistan, are still around. Many have fought more than one war or have done multiple deployments during the same war. We can never forget that what happened on the battlefields was done with the best intentions under the worst of circumstances.

American soldiers who were picked to fight have every right to a good life after deployment. We owe it to them to help them bring peace back into their bodies and souls. A friendly word, a handshake, a listening ear, will help to recreate "the village" of old. It's time that their internal battles come to an end. It's time that we finally pull them out of harm's way. ■

#### NOTES:

- 1) [www.military.com/video](http://www.military.com/video)
- 2) [http://articles.mercola.com/sites/archive/2012/05/14/mercks-adhd-drugs-unsafe.aspx?e\\_cid=20120514\\_DNL\\_art\\_1](http://articles.mercola.com/sites/archive/2012/05/14/mercks-adhd-drugs-unsafe.aspx?e_cid=20120514_DNL_art_1)
- 3) [www.ericnewhouse.com](http://www.ericnewhouse.com)

a Vietnam vet who healed his PTSD after 35 years of coping. C.J. Puotinen in Helena is a world-class expert on EFT and co-wrote the book, "EFT for Post-Traumatic Stress Disorder" (914-523-3063). Jacque Chapman in Bozeman does RET (406-570-4440). The resources are there for you.

The inner battle for wholeness is the greatest challenge and achievement for any of us. You just got the crash course, but don't let it crash you! It may require going against your training by asking for help, being vulnerable and releasing, in the safety of the right support systems, including family, fellow vets, and health practitioners. It may require stepping out from under the V.A.'s wing, and searching where they are unwilling or unable to go with you—into new, spiritual and emotional areas of your life. It's a grand journey, requiring just as much courage as what you've already shown that you have.

Thank you for serving the cause of freedom. As a Navy vet myself, **I salute you!**

Denis Ouellette, BA, BS, LMT, OBDS

Read "Getting the War Out" and Dustin's story under Articles and Stories at [IntegralBreathwork.com](http://IntegralBreathwork.com).