

# POST-TRAUMATIC STRESS DISORDER Factsheet

#### What is prevalence?

Prevalence represents the overall proportion of individuals in a population who have the disorder of interest. It is different from incidence, which represents only the new cases that have developed over a particular time period. Point prevalence is the proportion of individuals in a population who have the disorder at a given point in time (e.g., at one-month post-trauma), while period prevalence is the proportion of individuals in a population who have the disorder over specific time periods (e.g., one to two months post-trauma). Lifetime prevalence is the proportion of individuals in a population who have ever had the disorder and lifetime morbid risk also includes those who had the disorder but were deceased at the time of the survey.

### What is the evidence for the prevalence of PTSD in healthcare workers?

Moderate quality evidence finds the mean prevalence of PTSD in doctors is 14.8%, with rates highest in doctors treating trauma patients (21.5%), and lowest in doctors practicing medicine in rural areas (4.4%). The mean prevalence of PTSD in ambulance personnel is 11%, with rates reducing over time from 20% in 1985 to 0.05% in 2017, perhaps due to improved mental health training and post-incident support processes in that profession over time. Moderate to low quality evidence finds the mean prevalence of PTSD in medical responders during a disaster is 20.5%.

Moderate to high quality evidence finds the mean prevalence of PTSD in healthcare workers during a coronavirus outbreak is around 18%. Rates were higher during the Middle East respiratory syndrome (MERS; 2017-2020) outbreak than during the severe acute respiratory syndrome (SARS; 2004-2009) or Coronavirus disease 2019 (COVID-19; 2020 only) outbreaks. Rates were higher when PTSD was measured during an outbreak rather than after an outbreak and were higher in cross-sectional than in cohort studies.

Moderate to low quality evidence finds the prevalence of PTSD in healthcare workers after exposure to workplace violence is between 5% and 32%.

## For more information see the technical table

# HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at **neura.edu.au/donate** 

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# August 2021



NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about PTSD and its treatment with your doctor or other health care provider.