

The Neurological and Psychiatric Explanation Behind Stress and Trauma

Mauritz Fensham*

Department of Neuropsychology, Hong Kong *Corresponding Author: Mauritz Fensham, Department of Neuropsychology, Hong Kong. Received: December 09, 2019; Published: January 08, 2020

How Stress Hormones Take Over From a scientific standpoint, living in stress is living in survival. When we perceive a stressful circumstance that threatens us in some way (one for which we cannot predict or control the outcome), diet, lifestyle changes, shock, etc. A primitive nervous system called the sympathetic nervous system turns on and the body mobilizes an enormous amount of energy in response to the stressor. Physiologically, the body is automatically tapping into the resources it will need to deal with the current danger. The pupils dilate so we can see better; the heart rate and respiratory rate increase so we can run, fight, or hide; more glucose is released into the bloodstream to make more energy available to our cells; and our blood flow is shunted to the extremities and away from our internal organs so we can move quickly if we need to. The immune system initially dials up and then dials down as adrenaline and cortisol flood the muscles, providing a rush of energy to either escape or fend off the stressor. Circulation moves out of our rational forebrain and is instead relayed to our hind-brain, so we have less capacity to think creatively and instead rely more on our instinct to instantly react.

Trauma

When we experience a traumatic event, we tend to think neurologically within the circuitry of that experience and we tend to feel chemically within the boundaries of the emotions from the event, so our entire state of being-how we think and how we feel-becomes biologically stuck. The emotional quotient of an experience directly effect the memory long term.

Volume 9 Issue 2 February 2020 © All rights reserved by Mauritz Fensham.