

Myths About Exposure Therapy for PTSD

Exposure therapy is one of the best treatments for PTSD. It involves engaging in situations repeatedly that make us anxious or feel dangerous until the anxiety fades away or we can tolerate the distress. Despite its effectiveness, exposure therapy is not used as often as it should be to treat PTSD because of myths and fears about the treatment. This fact sheet discusses and addresses some misconceptions patients may have about exposure therapy.

MYTH: “I will get worse.”

FACT: While a small number of individuals may feel worse when they first start exposure therapy and begin facing their trauma reminders and memories, this does not usually last long. Those who stick with the treatment generally feel better within a few sessions and experience as good of an outcome as others who did not feel an exacerbation of symptoms early on. In the end, by facing your fears in therapy rather than avoiding them, you will regain a sense of control over your life. Patients treated with exposure therapy also report that they continue to feel better months and years after the treatment has ended. If this therapy was harmful, it would not be supported by so many experts and research studies.

MYTH: “I will be asked to relive the trauma.”

FACT: In exposure therapy you will be asked to revisit the trauma you experienced in sessions with your therapist. This is done in a safe and supportive environment. Treatment will involve facing situations or doing things that remind you of the trauma or feel unsafe. This is very different from actually going through the trauma again. Exposure therapy helps teach your brain that these reminders and memories are not actually dangerous, that the trauma happened in the past, and you can cope.

MYTH: “I will be forced to do things that I do not want to do.”

FACT: Exposure therapy is a very collaborative treatment, and you always have a choice in this therapy! Exposure therapy works by *encouraging* you to face situations and memories that you have been avoiding in a planful way so you discover first that the bad things you think will happen actually do not occur. You will start with the least upsetting fears and work up to the harder ones. When you recount

your trauma memory, you and your therapist will work at a pace that fits you. Afterwards, you will reflect on what you have learned from that experience and be supported by your therapist so you do not leave the session with high anxiety. Throughout exposure therapy, you will work together as a team.

MYTH: “It won’t work for me because PTSD is not my only problem.”

FACT: Good news! Exposure therapy will still work for you even if you have other problems. In fact, getting your PTSD under control has been shown to help other problems, like depression, anger, and sleep difficulties.

MYTH: “It will cause me to drop my guard.”

FACT: People with PTSD often are hypervigilant; it’s like their alarm system is always going off. They struggle with differentiating between what is truly dangerous versus what “feels” unsafe but is actually relatively low risk. This hypervigilance can cause wear and tear on the body and mind. Exposure therapy will help you adjust so that your level of alertness to match the real level of danger in a situation.

MYTH: “Exposure therapy may hurt my chances of getting disability benefits.”

FACT: This belief may actually be true because exposure therapy works so well that people do get better. If your symptoms go away, there is a chance it could affect your disability evaluation. For those who are involved in the medical board process, you should discuss this with your provider. If you who wish to remain in the military, exposure therapy is a good option because you have a better chance of getting healthy and returning to full duty status.