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Theoretical and empirical exploration of the similarities between emotional numbing in posttraumatic stress disorder and alexithymia

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Abstract

This study rationally and scientifically examines the similarities between the emotional numbing symptoms of posttraumatic stress disorder (PTSD) and alexithymia. A clinical database from the Iowa City Department of Veterans Affairs Medical Center consisting of data from 274 combat veterans was used. Significant positive correlations were found between measures of PTSD, alexithymia, and combat exposure. Principal components analysis supported a lack of independence between PTSD subscales and alexithymia, as all variables loaded on one factor best labeled PTSD. This article presents both theoretical and empirical evidence suggesting that in traumatized persons, alexithymia may be better conceptualized as the emotional numbing aspect of PTSD rather than as a distinct construct. © 2002 Elsevier Science Inc. All rights reserved.

Keywords: Posttraumatic stress disorder; Alexithymia; Emotional numbing

Alexithymia is a clinically derived concept referring to a cognitive-affective disturbance characterized by difficulty experiencing and expressing emotions (Taylor, 1984). Taylor, Bagby, and Parker (1991) noted that as early work on the concept began to converge, four salient features were identified: “(1) difficulty in identifying and describing feelings; (2) difficulty in distinguishing between feelings and the bodily sensations of emotional arousal; (3) constricted imagi-

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native processes, as evidenced by a paucity of fantasies; and (4) an externally oriented cognitive style” (p. 155). Each of these features continues to be important in the concept; although, a more global description of alexithymia as a difficulty experiencing and expressing emotions is commonly used (see Lesser, 1981; Taylor, 1984; Taylor et al., 1991 for reviews).

Researchers have suggested that the feelings aspect of alexithymia is better understood as a state rather than a consistent trait, and that state alexithymia is likely a response to anxiety or stress serving to counter negative affectivity (Hendryx, Haviland, & Shaw, 1991). In fact, a causal model along these lines has been tested finding that state anxiety predicted both depression and alexithymia, and that depression also predicted alexithymia (Haviland, Hendryx, Shaw, & Henry, 1994). Such findings support the possibility that alexithymia can occur as a coping response to anxiety and negative affectivity, and suggest that alexithymia might be construed as avoidance based coping in survivors of trauma.

Freyberger (1977) discussed the conceptualization of two types of alexithymia. Primary alexithymia is presumably genetic or biological in origin (Hoppe & Bogen, 1977; Nemiah, 1975), while secondary alexithymia results from experiencing traumatic events. Freyberger described the distinction between primary and secondary alexithymia after observing that severely, medically ill patients evidenced temporary alexithymic characteristics. Krystal (1968) independently described what could be termed alexithymia in his report of the limited affective presentation of concentration camp survivors in response to massive psychological trauma suffered during the Holocaust. Noting the etiologic distinctions between primary and secondary alexithymia, although the current study focuses on alexithymia as a possible sequelae of traumatic events, no clear type differentiation can be made in a previously traumatized sample. As a result of this limitation, this study will simply refer to the difficulty experiencing and expressing emotions as alexithymia.

Although development of alexithymia as a concept has progressed from innovation to acceptance by many researchers and clinicians (Taylor et al., 1991), controversy “still exists as to whether alexithymia is a distinct construct or merely a new term for a closely related or overlapping construct” (Parker, Bagby, & Taylor, 1991, p. 387). Lesser (1981) argued that alexithymia had been perceived as an established entity without much of a supporting database. More recently, the concept was referred to as still being in its infancy, having clinically descriptive power, but with limited empirical support (Stephenson, 1996). Lesser and Lesser (1983) warned that premature acceptance of the alexithymia concept would lead to a tendency to interpret data as if the concept existed, rather than establishing its validity. History suggests that alexithymia was quickly reified, and only recently researchers have supported its existence as a distinct construct separate from depression (Parker et al., 1991) and somatization (Bach, Bach, & de Zwaan, 1996). The purpose of the present study is to examine the relationship between PTSD and alexithymia, with a focus on considering the potential overlap between the two concepts.

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