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## Unresolved grief in combat veterans with PTSD

Ilona L. Pivar<sup>a</sup>, Nigel P. Field<sup>b,\*</sup>

<sup>a</sup>National Center for PTSD, VA-Palo Alto, CA, USA

<sup>b</sup>Pacific Graduate School of Psychology, 935 E. Meadow Drive, Palo Alto, CA, 94303, USA

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### Abstract

Clinicians have documented the importance of loss of comrades during combat as a significant source of distress. However, empirical studies have not focused on unresolved grief as a possible outcome of combat experiences. Consequently, unresolved grief has often been treated “after the fact” in the context of treating PTSD and depressive symptoms. In this study, we therefore, sought to demonstrate the prominence of combat-related grief-specific symptoms in a sample of Vietnam veterans being treated for PTSD. Our results indicated that indeed this sample of veterans reported high levels of grief-specific symptoms comparable to that found in bereaved individuals whose spouse had recently died, verifying its prominence as an important component of combat-related stress. Furthermore, grief severity was uniquely associated with losses of comrades during combat whereas no such relationship was shown for trauma or depressive symptoms. The latter finding suggested that in fact higher levels of grief stemmed from interpersonal losses during the war and was not simply an artifact of current general distress level.

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The unique conditions of the Vietnam War, fought mainly with guerrilla tactics, resulted in massive psychiatric casualties demanding focus on the post-war syndrome of combat veterans. Horowitz and Solomon (1975) were among the first to describe symptoms in Vietnam veterans including “nightmares, painful

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\* Corresponding author.

*E-mail address:* Ilona.Pivar@med.va.gov (I.L. Pivar), nfield@pgsp.edu (N.P. Field).

moods and emotional storms, direct or symbolic behavioral repetitions, and secondary signs such as impaired social relationships, aggressive and self-destructive behavior, and fear of loss of control over hostile impulses (p. 67).” Subsequent research with combat veterans focused on measuring behavioral symptoms of combat distress according to the diagnosis of PTSD, standardized in the DSM-III.

While clinicians have long recognized the importance of loss of comrades in the clinical presentation of combat veterans, and despite some albeit limited research findings showing that such losses are associated with elevated trauma symptoms, the prominence of grief-specific symptoms in Vietnam veterans with PTSD has been surprisingly overlooked. This oversight may be partly attributable to the salience of trauma symptoms in this population and past disagreement as to whether grief-specific symptoms constitute a unique symptom configuration that is distinct from trauma symptoms or other symptom constellations stemming from exposure to a highly stressful life event. Given the growing recognition in the bereavement literature on the importance of distinguishing grief-specific symptoms from anxiety and depression in assessing adjustment to interpersonal loss, however, there is good justification for investigating the co-morbidity of unresolved grief in Vietnam veterans with PTSD. Knowing whether elevated grief-specific symptoms were a prominent feature in this population could have important treatment implications.

## **1. Distinguishing grief from PTSD and depression**

Grief-specific symptoms were initially identified as virtually indistinguishable from trauma symptoms (see *Anderson, 1949; Lindemann, 1944*). Despite the overlap in the features of trauma and grief-specific symptoms, *Raphael and Martinek (1997)* have outlined a number of important differences in the symptom patterns between the two. Bereaved persons are more likely to seek out rather than to avoid reminders of the deceased; more likely to feel sadness and longing rather than fear; more likely to feel anxiety generated by separation from the lost person rather than anxiety generated by threat; and more likely to experience intrusive thoughts and images of the lost person rather than of traumatic events. *Raphael and Martinek* have also noted that because a traumatic event often involves an interpersonal loss component, grief-specific symptoms may be superimposed upon trauma symptoms.

Grief-specific symptoms have similarly been distinguished from bereavement-related depression. In a longitudinal study of bereaved spouses, *Jacobs et al. (1986)* identified aspects of grief that were distinguishable from depression; these included loneliness and crying, numbness and disbelief, distractibility, and distressful yearning and searching. *Horowitz et al. (1997)* obtained comparable findings in which they identified similar cardinal symptoms unique to

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