

Understanding your medical report

Diagnoses

Your report may contain a mental health diagnosis such as ‘post-traumatic stress disorder’ (PTSD) or ‘depression’.

A mental health diagnosis is just a shorthand label for problems that you may be experiencing at the moment. It is not the same as a diagnosis of a physical illness. It does not tell you anything that you don’t already know. It does not usually tell you what has caused the problem. It does not mean there is something wrong with your brain. It does not mean that you can’t get better!

PTSD is a diagnosis used when someone has lived through a frightening experience and is now having difficulties such as nightmares, vivid memories, poor sleep, and feeling frightened even when safe.

Depression is a diagnosis used when someone feels down most of the time and has other problems too, such as feeling tired and unable to enjoy things, not feeling interested or motivated or being unable to concentrate, sleep or eat properly.

Dissociation is a word used for experiences such as losing awareness of your current surroundings and feelings.

Somatic symptoms and somatisation are words used for physical symptoms that are made worse by or caused by psychological problems.

Psychosis is a word sometimes used to describe changes in what feels real, for example hearing voices when no one is there, or mistakenly believing that people are trying to hurt you.

Psychological therapy

Your report may suggest that you try psychological therapy.

Psychological therapy may also be called ‘counselling’, ‘psychotherapy’ or ‘talking treatment’. It involves talking to a trained professional regularly, usually for several weeks or months. This can feel difficult, especially at first. However, for many people it is the most effective kind of help.

There are different kinds of therapy. Different people find different types of therapy helpful. Psychological therapy works best when you feel confidence and trust in your therapist. If the first therapy you try doesn’t help, it is worth trying again with a different therapy or a different therapist.

Social prescribing and social changes

Your report may suggest social prescribing. ‘Social prescribing’ means suggesting some practical change that could help you.

If you have PTSD or depression symptoms, the most effective treatment may be changing aspects of your life. Some changes that would help you feel better are outside your control, for example getting a positive asylum decision. But there are almost always practical changes that are possible, and that can help. For example, taking more exercise or taking up voluntary work can be very helpful.

Medications

Your report may suggest that your doctor prescribes medication for you.

'Antidepressants' are a group of medications that help some people with depression, anxiety or PTSD. They include medications such as sertraline, citalopram and mirtazapine.

To help depression, anxiety or PTSD you need to take these medications every day for at least several weeks. If you stop the medication before you have taken it for long enough, it is impossible to know if it would have helped. If the medication is helping you, doctors usually advise that you continue to take it every day for six months, or longer.

All these medications can have side effects (unintended effects). The side effects are usually worse when you first start the medication. For example, you might feel restless or nauseous. Some antidepressants (not all) have the useful side effect of helping you sleep, especially when you first start them. If you are getting unpleasant side effects, tell your doctor. There may be another medication you can try that does not have these side effects.

When you have been taking an antidepressant regularly, you can also get side effects when you stop taking it. For example, you might feel anxious or have difficulty sleeping. This can happen even if you miss one or two tablets. It is usually best to stop antidepressants gradually not suddenly. Stopping gradually can help avoid side effects.

Medications for sleep and anxiety. Many people have difficulty sleeping. Doctors can prescribe medication for sleep, and these can help for a short time. However, it is usually not helpful to take them for more than a week or two. If you take these medications for longer, they become less effective, you can become addicted to them, and you are likely to find it very hard to stop taking them. The same is true of many anti-anxiety medications, such as diazepam. There are also sleep medications that you can buy from a pharmacy, for example antihistamine and herbal medications. These are less powerful and less addictive. They help some people, especially if you just use them occasionally.

If you have sleep and anxiety problems along with symptoms of PTSD or depression, the best way to help your sleep is to find treatment that helps the PTSD or depression.

Note We recommend that you only take medications for your mental health if your doctor prescribes this for you.