

# Acute Stress Reactions

In your or your baby's time on the neonatal unit, you may have experienced a very stressful situation, and might describe or think about this situation as being 'traumatic'. These may be events where you feel frightened and sometimes helpless, such as:

- A difficult or frightening birth, or having complications during labour and delivery
- Your baby needing to be resuscitated
- Your baby experiencing an acute medical episode or being in distress
- Your baby changing colour or losing muscle tone
- Seeing your baby attached to medical equipment including tubes, wires or a ventilator
- Hearing frequent alarms in relation to your baby's care



Following these types of events, you may notice changes in how you think, feel and react, for example, feeling more alert and watchful, or thinking something bad may happen, which is common and can be referred to as an 'Acute Stress Reaction'.

An Acute Stress Reaction includes changes to your mood, thoughts and sensations in your body that develop following a particularly stressful event.

The word 'acute' means the symptoms develop quickly, within a few days or weeks, but typically do not last long, and often you begin to feel better in time.

# SYMPTOMS OF AN ACUTE STRESS REACTION

*Changes in how you might think, feel and react.*

*If you have experienced an event that has been extremely stressful the brain processes what happened differently to how it processes everyday events. This means that you may experience some of the following:*

## UNWANTED MEMORIES

- Experiencing unwanted thoughts or images about the experience
- Experiencing a 'flashback' where you feel as though you are back in the situation
- Experiencing nightmares

## AVOIDING

- Avoiding situations, people, places or things that remind you of the situation
- Avoiding thinking or talking about the situation
- Feeling as though you are numb or separate from your emotions

## BEING IN 'THREAT MODE'

- Feeling as though you are 'on the look-out'
- Feeling jumpy or easily startled
- Feeling irritable, angry or experiencing outbursts
- Difficulty falling / staying asleep
- Feeling symptoms such as racing heart, abdominal or chest pain and/or headaches

## CHANGES IN HOW YOU FEEL

- Sadness and/or tearfulness
- Fearful and/or anxious
- Feelings of guilt and/or blame
- Disbelief and/or shock
- Denial and/or confusion
- Self-critical thoughts
- Difficulty focussing
- Memory lapses

# ACUTE STRESS REACTIONS AND THE NNU

## *What you might notice*

*You may notice the following experiences:*

- Feeling as though you are 'on the look out' for signs of danger, such as being attuned to noises (such as changes in your baby's breathing or the sound of medical equipment), or to changes in your baby's appearance.
- Experiencing unwanted images, thoughts and memories of what happened when you see or hear things on the unit that remind you of the situation.
- Wanting to avoid members of the medical team who were present at the time of the situation.
- Experiencing upsetting thoughts, emotions or images when seeing or spending time with your baby, which can make it feel difficult to spend time with them.
- Feeling more sensitive to the environment around you, such as being sensitive to bright lights, hospital scents, and noises on the unit.
- Feeling 'jumpy', startled or that you flinch or shake more easily.
- Gaps in your memory.
- Finding it difficult to take in information or remember conversations.
- Experiencing self-critical thoughts and feelings of guilt or blame.
- Wanting to avoid talking to others, including a partner, friends or family about what happened, or about your baby.
- Feeling like you are detached from your surroundings, separate from your body, watching yourself, or feeling like you are in a dreamlike state.

# WHY DOES THIS HAPPEN?

## *Understanding our Threat Response*

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When we are in a situation our brain sees as a 'threat', or where we feel we have to protect our self or others, we experience the 'Fight, Flight, Freeze' response, which is what influences how we act and react. This is often described as our brains 'emergency alarm'. Once this has gone off the alarm system goes off more easily and can go off very quickly, even when the threat is no longer there.

### **FIGHT**

In the *Fight* response, you may notice feelings of frustration, irritability or anger. The fight response may be experienced as a strong desire or urge to protect or defend yourself or your baby. You may react by raising your voice, swearing or speaking aggressively, or lashing out at others.



### **FLIGHT**

In the *Flight* response, you may notice feelings of anxiety and fear. The flight response may be experienced as a strong desire or urge to escape from a situation, person or people. This may be the NNU environment, clinical staff, your friends, family or your baby.



### **FREEZE**

In the *Freeze* response, you may experience feeling overwhelmed, out-of-body, or not recall feeling anything at all, or remembering anything. This is often described as 'rabbit in headlights'.



# NEXT STEPS

## *What to expect and when support may be needed*

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*These experiences can be very difficult, however there are a lot of things that can help.*

*For most people these feelings will reduce in time on their own but for some people further support is needed to help with these feelings.*

*If you would like further support with any of the issues discussed in this leaflet, please let your nurse or doctor know.*

*The NNU has a Neonatal Psychology team who are here to support you throughout your baby's time on the unit.*

