

Hearing Voices in Patients with Trauma

Auditory hallucinations are common in women with severe PTSD, especially among those who were younger at the initial trauma.

Clinically, auditory hallucinations are most often linked to psychotic disorders, such as schizophrenia, severe bipolar disorders, drug-induced psychoses, and neurodegenerative diseases. However, patients with trauma-spectrum disorders (e.g., post-traumatic stress disorder [PTSD], complex PTSD, and dissociative disorders), who do not meet criteria for other psychotic disorders also report hearing voices. To study the frequency and nature of voice hearing in 70 women with PTSD, investigators administered a large battery of tests including two distinct measures for assessing auditory hallucinations.

Participants were recruited primarily from an academic hospital's program specializing in treating women with trauma-related problems; over 80% experienced childhood sexual abuse, with high levels of physical and verbal abuse, generally of a prolonged nature starting early in life. Exclusions included other psychotic disorders, as well as medical, neurological, and substance-related conditions.

Overall, 46% of patients reported unequivocal voice hearing (i.e., according to both measures), 46% reported ambiguous voice hearing (according to only one measure), and only 8% reported unequivocal no hearing of voices. Compared with the ambiguous group, the unequivocal group had more-frequent Schneiderian first-rank auditory hallucinations (ordinarily indicative of psychotic disorder) and higher rates of "hearing a lot of noise or yelling in your head" and "hearing voices crying in your head." Although the three groups were similar in overall lifetime trauma exposure, women with physical abuse at earlier ages were more likely to experience voice hearing. Patients with unequivocal voice hearing had higher dissociation scores than those with no voice hearing.

COMMENT

These findings challenge the idea that Schneiderian hallucinations are limited to psychotic, substance-related, or neurodegenerative disorders or delirium. Revisions to DSM-5 criteria might include auditory hallucinations for trauma-spectrum disorders. The authors encourage studies of how psychotic and trauma-spectrum disorders overlap, but they also caution clinicians against reflexively diagnosing psychosis when traumatized patients report hearing voices. —*Joel Yager, MD*

Dr. Yager is Professor, Department of Psychiatry, School of Medicine, University of Colorado.

Shinn AK et al. Assessing voice hearing in trauma spectrum disorders: A comparison of two measures and a review of the literature. Front Psychiatry 2020 Feb 24; 10:1011. (<https://doi.org/10.3389/fpsy.2019.01011>)