Department of Veterans Affairs

Medical Center

[redacted]

October 24, 2018

[redacted]

Veterans Affairs Office

[redacted]

To whom it may concern:

This is to acknowledge that Ms. [redacted] has been diagnosed with and is being treated for chronic post-traumatic stress disorder (PTSD) in the Key Largo VA community-based outpatient clinic. Her diagnosis of PTSD is related to military sexual trauma experienced during her military service.

Ms. [redacted] has been receiving outpatient treatment at the Key Largo clinic since May 2017. Ms. [redacted] continues to suffer from chronic, daily PTSD symptoms. She exhibits symptoms of distressing trauma-related memories and nightmares, avoidance behaviors, hypervigilance, sleep disturbance, exaggerated startle response, poor concentration, decreased interest and negative cognitions. Ms. [redacted] has comorbid generalized anxiety disorder, anorexia nervosa, body dysmorphic disorder, excoriation disorder, obsessive compulsive disorder and depressive disorder. Ms. [redacted] has also been diagnosed with fibromyalgia. This condition is likely related to PTSD as several studies have shown that female veterans with PTSD due to MST have a higher prevalence of chronic pain conditions, including fibromyalgia. There is an established bidirectional relationship between chronic pain and mental health conditions (including PTSD) where each condition, if not well controlled, can exacerbate the other (i.e. uncontrolled pain leads to worsening PTSD symptoms and/or uncontrolled PTSD symptoms leads to worsening pain).

Thus, it is my opinion that Ms. [redacted] fibromyalgia is at least as likely as not caused by PTSD due to military sexual trauma. It is felt that Ms. [redacted] mental health conditions and medical conditions affect her ability to function in her social, interpersonal and occupational roles.

Should you have any further questions, please do not hesitate to contact the undersigned at [redacted]

Sincerely,

[redacted]