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Response to Letter to the Editor

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Letter to the Editor

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To the Editor,

We appreciate the discussion on the prevalence of PTSD in paramedics following the COVID-19 pandemic presented by Celen and me. However, we challenge the assertion that exposure to COVID-19 does not qualify as trauma under the DSM-5 criteria. The DSM-5 defines trauma as direct or witnessed exposure to actual or threatened death, serious injury, or sexual violence, with an exception for professionals who repeatedly encounter aversive details of trauma.[1] This framework does not explicitly exclude medical pandemics from traumatic exposure, particularly for health care workers who faced sustained and repeated exposure to death and life-threatening conditions during the COVID-19 crisis.

Emerging research suggests that the psychological toll on health care workers (HCWs) during COVID-19 closely mirrors PTSD-inducing experiences. Studies have documented PTSD symptomatology among HCWs, including intrusive thoughts, hyperarousal, and avoidance behaviors.[2,3] These findings suggest that direct exposure to severely ill COVID-19 patients, high mortality rates, and moral injury from resource allocation decisions place HCWs at risk for trauma-related psychopathology. Moreover, the DSM-5's current framework, which allows for PTSD diagnoses in first responders collecting human remains, should logically extend to HCWs exposed to overwhelming suffering and death on a daily basis.

Furthermore, research comparing PTSD symptoms across different stressors has demonstrated that pandemics can elicit distress levels comparable to those seen in other traumatic events.[4] The assertion that PTSD in paramedics cannot be reported without revising trauma definitions overlooks the historical evolution of psychiatric diagnostic criteria. PTSD definitions have been adapted over time to reflect real-world clinical observations, such as the inclusion of indirect trauma exposure for first responders.[1] The exclusion of pandemic-related trauma from PTSD criteria risks invalidating the lived experiences of HCWs and may hinder access to appropriate psychological interventions.

Therefore, we argue that exposure to COVID-19, particularly for paramedics and other HCWs, should be reconsidered as a qualifying trauma under PTSD criteria. Future research should focus on refining diagnostic frameworks to account for the unique psychological burden of health care work during pandemics. Recognizing the traumatic impact of COVID-19 exposure is essential to ensuring that HCWs receive proper mental health care and support.

References

1. **American Psychiatric Association**. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Publishing; 2013.
2. **Carmassi C**, **Foghi C**, **Dell'Oste V**, et al. PTSD symptoms in healthcare workers facing the three coronavirus outbreaks: what can we expect after the COVID-19 pandemic? *Psychiatry Res.* 2020;**292**:113312. https://doi.org/10.1016/j.psychres.2020.113312
3. **Greenberg N**, **Docherty M**, **Gnanapragasam S**, et al. Managing mental health challenges faced by healthcare workers during COVID-19 pandemic. *BMJ.* 2020;**368**:m1211. https://doi.org/10.1136/bmj.m1211
4. **Bridgland VME**, **Moeck EK**, **Green DM**, et al. Why the COVID-19 pandemic is a traumatic stressor. *PLoS One.* 2021;**16**(1):e0240146. https://doi.org/10.1371/journal.pone.0240146

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