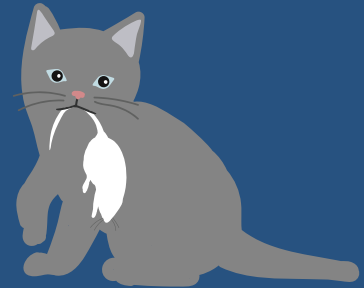


HOW TO DIFFERENTIATE FREEZE FROM SHUTDOWN

Freeze and collapse both involve the inability to move. But while they might appear similar, they are very different physiological responses to stress or trauma.

Here are some key differences:



FREEZE

The client is **HYPER**aroused.

The muscles are tense and full of energy, but can't release it.

In this stage, there are similar levels of sympathetic and parasympathetic activation.

Increased heart rate/blood pressure

The client might say, "I feel stuck," "I can't move," or "I feel like I am encased in cement."

Eyes widen

The body is ready to return to fight/flight as soon as the threat passes.

SHUTDOWN/COLLAPSE

The client is **HYPO**aroused.

The muscles are flaccid and loose.

The parasympathetic nervous system is dominant.

Decreased heart rate/blood pressure/
temperature

The client may not be able to speak at all.

Blank stare

Sensory info stops at the thalamus. It doesn't reach the cortex (so it's not integrated). The client is less aware of their internal and external world.

Endorphins release to numb pain. Dynorphins release, which can make the client feel detached from their body.

Can result in fainting

Knowing the differences between these two responses can help you determine which therapeutic strategies you should use with a given patient.