Mental health following trauma

N Paunovic et al. Behavioural Research and Therapy. October (2001) Vol. 39 #10 p 1183.

A small study of alternate therapies for PTSD. Exposure therapy (ET) is essentially a process of reliving the event in safe surroundings, this approach has been criticised and strong evidence has been found that it is worse than neutral. Cognitive Behavioral therapy actively addresses beliefs and actions.

16 DSM iv PTSD outpatients were randomised into Cognitive Behavioural Therapy vs. exposure therapy. Cases were all refugees.

There was no control group.

16 to 20 weeks of treatment.

PTSD symptoms, generalised anxiety, depression Quality of Life and cognitive schemas were assessed using validated tools before, immediately after and 6 months after treatment.

No difference was found between ET and CBT in any measure.

50% reductions in PTSD, anxiety and depression were achieved and maintained at 6 months. But without a control group it is not clear what the scores would have been without either intervention.

Comment

One suggestion is that treatment may need to be specific to the type of cause as opposed to the current state of the victim. Another is that neither treatment was done well in this study, yet another is that neither actually works.

Duty of care for PTSD victims is still uncertain. Cause specific treatment would prove a great seal more difficult to apply in practice.