

Treatment for PTSD at the Madison VA

Lori Phelps, PhD
Wm S Middleton Memorial Veterans
Hospital
Madison, WI

What is PTSD?

- Symptom clusters following exposure to traumatic event
 - Re-experiencing
 - Hyper-arousal
 - Avoidance
 - Emotional numbing
- Avoidance hypothesized to aid in the development/maintenance of PTSD

General findings about treatment options for PTSD

- Most support found for exposure/trauma-focused treatments
 - Meta-analysis of 38 randomized psychotherapy trials for PTSD (Bisson et al., 2007)
 - Based on existing treatment outcome studies (Keane et al., 2006)
 - Lit review of 53 psychotherapy studies (Institute of Medicine, 2007)
 - ISTSS Guidelines on Treating PTSD (in press, 2000)
- Other treatments of interest
 - Pharmacotherapy
 - Mindfulness/acceptance

Exposure/trauma-focused treatment for PTSD

- Includes prolonged exposure (PE), cognitive processing therapy (CPT), and eye movement desensitization and reprocessing (EMDR)
 - Addresses an individual's troubling memories of a trauma and personal meaning ascribed to the trauma and its consequences
 - "A course of trauma-focused psychological treatment should be offered to everyone with chronic PTSD." (Bisson et al., 2007)
- Some "concerns" with PE and EMDR
 - Exposure can be a hard sale for a disorder characterized by avoidance
 - What is the mechanism by which EMDR works?

PTSD treatments offered at the Madison VA

- Imagery Rehearsal Therapy (IRT)
 - "IRT is a brief treatment that appears to decrease chronic nightmares, improve sleep quality, and decrease PTSD symptom severity" (Krakow et al., 2001)
- Cognitive Processing Therapy (CPT)
 - "significant improvements in PTSD and comorbid symptoms in the CPT condition compared with the wait-list condition" (Monson et al., 2006)

PTSD treatments offered at the Madison VA

- Currently offering
 - Mindfulness-Based Stress Reduction (Kabat-Zinn, 1990)
 - Seeking Safety (Najavits, 2002)
 - ACT (Walser & Westrup, 2007)
- Future options
 - Prolonged exposure
 - EMDR

Imagery Rehearsal Therapy (IRT)

- 4-session treatment
- Focus on both improving sleep hygiene and training in imagery techniques to change nightmare content
- Based on assumption that PTSD-related nightmares do not reflect some sort of processing of trauma-related content but are instead a learned behavior that can be reinforced (and therefore “unlearned”)

Cognitive Processing Therapy (CPT)

- A 12-session treatment (although can be modified)
- A cognitive approach
 - Explore how the trauma has affected the way in which the individual thinks about himself, others, and the world
 - Identify “stuck points” that likely keep individuals “stuck” in PTSD symptoms
 - Teach the individual to become his/her own cognitive therapist

Cognitive Processing Therapy (CPT)

- Stuck points explored within the following areas:
 - Safety
 - Trust
 - Power/control
 - Esteem
 - Intimacy
- Notion that trauma can lead to:
 - Assimilation
 - Change interpretation of trauma in order to save pre-existing beliefs
 - Accommodation
 - Change beliefs in order to jibe with what happened (e.g., the trauma)

CPT Sessions 1-3

- Session 1
 - Discuss PTSD, cognitive therapy, CPT
 - Assign Impact Statement for next time (how do you think the trauma affected the way you think about safety, trust, power/control, esteem, intimacy)
- Session 2
 - Review Impact Statement and start to explore meaning ascribed to the trauma
 - Introduce ABC Sheets (become aware of connections between thoughts/interpretations and emotions)
 - Assign ABC Sheets for next time
- Session 3
 - Review ABC Sheets
 - Assign Trauma Account for next time

CPT Sessions 4-5

- Session 4
 - Review Trauma Account
 - Discuss goals of exposure component
 - Identify stuck points and challenge self-blame and other assimilation
 - Assign re-writing of trauma account for next time
- Session 5
 - Review second Trauma Account
 - Involve veteran in challenging stuck points
 - Introduce Challenging Questions Worksheet
 - Assign Challenging Questions Worksheet

CPT Sessions 6-8

- Session 6
 - Review Challenging Questions Worksheet
 - Introduce Patterns of Problematic Thinking Worksheet
 - Assign Patterns of Problematic Thinking Worksheet for next time
- Session 7
 - Review Patterns of Problematic Thinking Worksheet
 - Introduce Challenging Beliefs Worksheet
 - Introduce first of five problem areas: Safety issues related to self and others
 - Assign Challenging Beliefs Worksheet (Safety)
- Session 8
 - Review Challenging Beliefs Worksheet
 - Assist veteran in confronting problematic cognitions and generate alternate beliefs using Challenging Beliefs Worksheet
 - Introduce second of five problem areas: Trust issues related to self and others
 - Assign Challenging Beliefs Worksheet (Trust)

CPT Sessions 9-10

- Session 9
 - Review Challenging Beliefs Worksheet
 - Assist veteran in confronting problematic cognitions and generate alternate beliefs using Challenging Beliefs Worksheet
 - Introduce third of five problem areas: Power/control issues related to self and others
 - Assign Challenging Beliefs Worksheet (Power/control)
- Session 10
 - Review Challenging Beliefs Worksheet
 - Assist veteran in confronting problematic cognitions and generate alternate beliefs using Challenging Beliefs Worksheet
 - Introduce fourth of five problem areas: Esteem issues related to self and others
 - Assign Challenging Beliefs Worksheet (Esteem)
 - Assign giving/receiving compliments and engaging in pleasant activities

CPT Sessions 11-12

- Session 11
 - Review reactions to compliments/pleasant activities
 - Review Challenging Beliefs Worksheet
 - Assist veteran in confronting problematic cognitions and generate alternate beliefs using Challenging Beliefs Worksheet
 - Introduce fifth of five problem areas: Intimacy issues related to self and others
 - Assign Challenging Beliefs Worksheet (Intimacy)
 - Assign second writing of Impact Statement
- Session 12
 - Review Challenging Beliefs Worksheet
 - Assist veteran in confronting problematic cognitions and generate alternate beliefs using Challenging Beliefs Worksheet
 - Therapist reads initial Impact Statement and veteran reads newly-written Statement; discuss any differences
 - Review course of treatment
 - Identify goals for the future
