

Effectiveness of Prolonged Exposure Therapy vs. Cognitive Processing Therapy in Veterans with Post-Traumatic Stress Disorder

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Introduction

Traumatic Experiences Among Veterans

Post-Traumatic Stress Disorder (PTSD) is defined as a mental health condition arising from exposure to life-threatening situations, leading to intense feelings of fear, horror, or helplessness (American Psychiatric Association, 2022). This condition is particularly pertinent to combat veterans, a high-risk group where recent data has revealed concerning statistics: 29.3% screening positive for PTSD, 26.3% reporting suicidal thoughts, and 26% experiencing substance use disorder (Na et al., 2023). Understanding and addressing PTSD in this population is crucial for providing comprehensive and effective healthcare.

Challenges of PTSD in Veterans

PTSD rarely stands alone and often co-occurs with mood and anxiety disorders, significantly impacting the overall functioning of veterans. Approximately 70% of veterans with PTSD receive an additional psychiatric diagnosis, with major depressive disorder and anxiety disorders being the most prevalent (Hefner & Rosenheck, 2019).

Holistic Care for Veterans

The statistics highlight the pressing need for effective treatment options, particularly for veterans from recent military campaigns. Healthcare providers can use this review to make informed decisions and provide specialized and holistic care to address the complex challenges associated with PTSD in veterans.



Purpose

This systematic review investigates the comparative effectiveness of two evidence-based trauma-focused psychotherapies: Prolonged Exposure Therapy (PE) and Cognitive Processing Therapy (CPT). Specifically tailored for veterans battling PTSD, these therapies aim to address the deep and lasting consequences of trauma, with the overarching goal of improving patient outcomes.

PICOT

"In veterans with post-traumatic stress disorder, is prolonged exposure therapy more effective than cognitive processing therapy in reducing PTSD symptoms and improving overall mental health outcomes?"

Conceptual Framework

Neuman's Systems Theory is the chosen framework, viewing veterans as complex systems affected by intrusive thoughts, hyperarousal, and other stressors. PE and CPT serve as vital tools to help veterans adapt and prevent symptom worsening, aligning with the goal of promoting health and well-being.

Methods

Search Strategy

The search strategy employed various keywords, including "prolonged exposure therapy," "cognitive processing therapy," "veterans," "post-traumatic stress disorder," "PTSD symptoms," "United States," and "US veterans." To gather reliable articles, multiple databases were explored, including CINAHL Ultimate, DSM-5 Library & DSM Legacy, Oxford Academic, ScienceDirect, PTSDpubs, Medline, and PubMed.

Inclusion

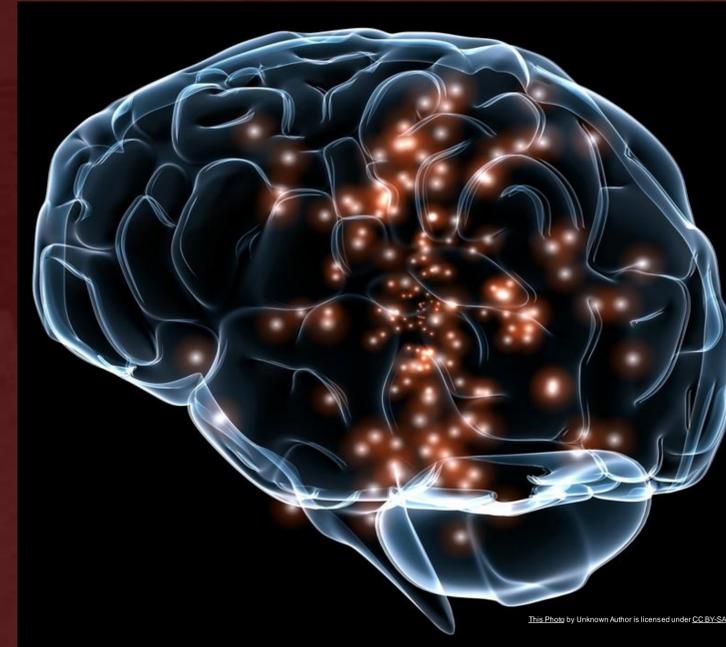
Inclusion criteria ensured that selected articles met specific quality standards. Articles considered for review were primary research published between 2017 and 2023, focusing on the key topic of PE and CPT for US veterans with PTSD. Additionally, articles needed to be published in English and peer-reviewed.

Exclusion

Exclusion criteria were applied to maintain the validity of the review. Articles not utilizing recommended screening tools, such as the Clinician-Administered PTSD Scale for DSM-5 (CAPS-5) or Post-traumatic Stress Disorder Checklist for DSM-5 (PCL-5) were excluded. Moreover, articles falling into categories like news, editorials, case reports, brief reports, commentaries, and discussions were not considered.

Quality Assessment

Rapid Critical Appraisal Checklists were utilized to assess the selected research's quality. These checklists, tailored to evaluate randomized clinical trials and quasi-experimental articles, employed a cut-off score of 7 out of 12 to ensure the reliability of the included studies.



Results

This analysis includes diverse study designs, featuring one quasi-experimental clinical trial, six retrospective studies, and one randomized controlled trial. The sample sizes in the collection of studies show considerable variation, ranging from a relatively small sample of 296 participants to a larger sample of 265,566 participants. The studies collectively involved a substantial sample size of 305,070 individuals. The quality appraisal ratings for these studies also exhibited variability, ranging from 7 to 10 out of 12. The ratings were conducted using rapid critical appraisal questions for quasi-experimental studies and rapid critical appraisal questions for randomized clinical trial.

PE psychotherapy is slightly more effective in treating PTSD

Across the collective eight studies in this systematic review, six provide evidence suggesting that PE is more effective than CPT in the treatment of veterans with PTSD. However, the remaining two studies suggest that CPT is slightly more effective in reducing PTSD symptoms than PE, particularly in an intensive treatment setting.

Factors such as time, number of sessions, and patient choice benefit treatment

Two studies conducted incorporate factors such as the timing of treatment initiation, the number of sessions completed, and the choice between PE and CPT. These factors play a significant role in the effectiveness observed from both therapies, indicating that the choice between PE and CPT may depend on the circumstances of the traumatic event or the individual patient's specific needs.

PE and CPT are beneficial therapeutic options for treating PTSD

The collective findings illustrate the positive impact of both PE's exposure-based approach and CPT's cognitive restructuring strategies on treating PTSD. Despite varying perspectives on the comparative effectiveness of PE and CPT, the overall conclusion is that both therapeutic options offer beneficial outcomes.

Implications for Practice

Personalized Treatment Planning

The evidence suggests that treatment effectiveness may vary based on individual patient factors. Healthcare providers should adopt a personalized approach to developing treatment plans for veterans with PTSD.

Informed Decision-Making

As a provider, facilitate informed decision-making for veterans by providing comprehensive education on the potential benefits and differences between PE and CPT. Ensuring that veterans understand the nature of each therapy allows for shared decision-making, empowering the patient to actively participate in their treatment.

Collaborative Care

Encourage a collaborative approach involving the patient, mental health professionals, and healthcare providers to ensure a holistic and patient-centered approach to PTSD treatment.

Recommendations

Provider Training Programs

Develop and evaluate training programs for healthcare providers, ensuring they deliver both PE and CPT proficiently. Addressing the imbalance in training observed in some studies can contribute to the better availability of both therapies.

Implementation Studies

Research the implementation of PE and CPT head-to-head in diverse healthcare settings. Explore the challenges and facilitators of integrating these therapies into routine clinical practice.

Patient Experience Studies

Explore the lived experiences of veterans undergoing PE and CPT. Understand patient perspectives, preferences, and barriers to inform the development of patient-centered interventions.

References

- American Psychiatric Association Publishing. (2022). Trauma- and stressor-related disorders. In *Diagnostic and statistical manual of mental disorders: DSM-5-TR* (pp. 295–328).
- Hefner, K., & Rosenheck, R. (2019). Multimorbidity among veterans diagnosed with PTSD in the Veterans Health Administration nationally. *Psychiatric Quarterly*, *90*(2), 275–291. <https://doi.org/10.1007/s11126-019-09632-5>
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- Additional references available upon request

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