

# Evidence Update

## Mental Health Series

### Do psychological treatments reduce symptoms of post-traumatic stress disorder?

Trauma focused cognitive behavioural therapy (TFCBT), eye movement desensitisation and reprocessing (EMDR), stress management, and group TFCBT reduce traumatic symptoms in post-traumatic stress disorder.

#### Inclusion criteria

**Studies:**

Randomized controlled trials.

**Participants:**

Adults experiencing traumatic stress symptoms for at least 3 months.

**Intervention:**

Any psychological treatment for post-traumatic stress disorder (PTSD).

**Outcomes:**

Clinician-rated traumatic stress symptoms (primary); treatment drop out; adverse effects.

#### Results

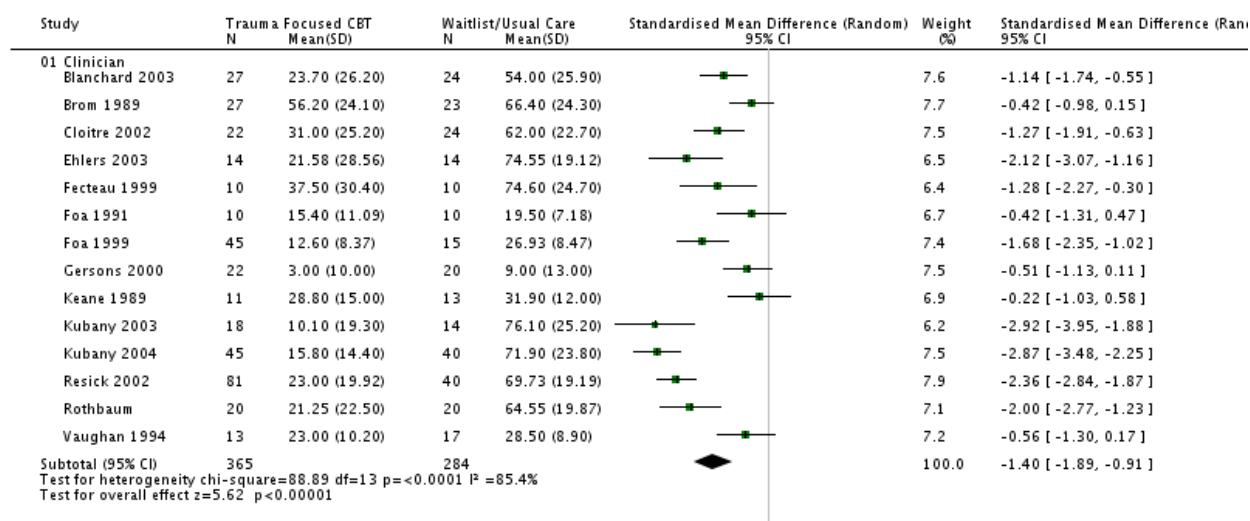
- Thirty-three trials were included; one was adequately concealed.
- Compared to usual care, symptoms were lower in people receiving TFCBT (standardized mean difference -1.36, 95% confidence interval -1.88 to -0.84; 649 participants, 14 trials), EMDR (SMD -1.51, 95%CI -1.87 to -1.15; 162 participants, 5 trials), stress management (SMD -1.14, 95% CI -1.62 to -0.67; 86 participants, 3 trials), or group TFCBT (SMD -0.72, 95% CI -1.14 to -0.31; 97 participants, 1 trial).
- There was no significant difference in symptoms immediately after treatment in comparisons between TFCBT and stress management or TFBT and EMDR; but those receiving TFCBT did better at 2 to 5 months compared with stress management (SMD -0.48, 95% CI -0.84 to -0.12; 127 participants, 5 trials).
- Compared with other therapies (psychodynamic therapy, hypnotherapy and supportive counselling), people receiving TFCBT did better immediately after treatment (SMD -0.81, 95% CI -1.19 to -0.42; 120 participants, 3 trials), as did people receiving stress management, and those receiving EMDR.
- Drop-out rates were higher with TFCBT compared to usual care (RR 1.42, 95% CI 1.05 to 1.94; 861 participants, 15 trials) and other therapies compared to usual care. Drop out from stress management and group TFCBT was no different to usual care.
- No studies reported on adverse effects.



Adapted from Bisson J, Andrew M. Psychological treatment of post-traumatic stress disorder (PTSD). Cochrane Database of Systematic Reviews 2007, Issue 3. Art. No.: CD003388. DOI: 10.1002/14651858.CD003388.pub3. *Evidence Update* published in August 2008.

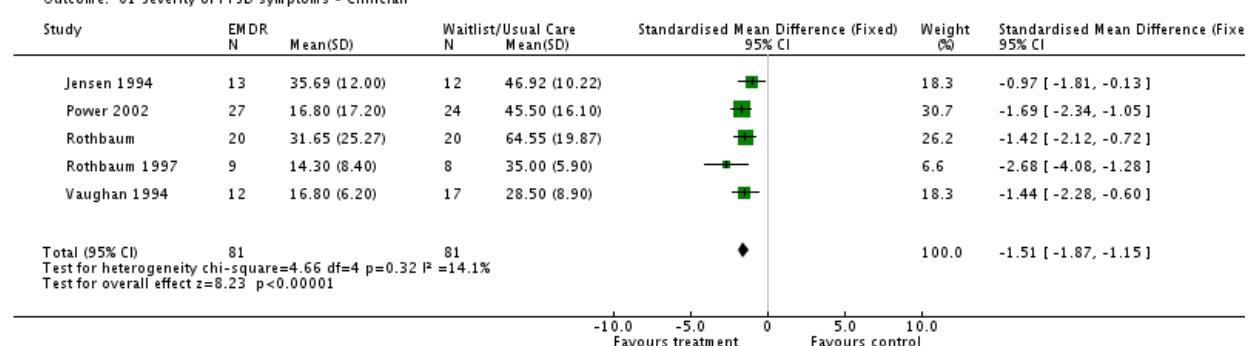
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## TFCBT vs usual care: severity of PTSD symptoms (clinician assessed)



## EMDR vs usual care: severity of PTSD symptoms (clinician assessed)

Review: Psychological treatment of post-traumatic stress disorder (PTSD)  
 Comparison: 09 EMDR vs Waitlist/Usual Care  
 Outcome: 01 Severity of PTSD symptoms - Clinician



## Authors' conclusions

### Implications for practice:

Psychological treatment can reduce traumatic stress symptoms in people with PTSD, although effectiveness of different approaches varies. Data on adverse effects of psychological treatments for PTSD are limited.

### Implications for research:

Further trials, comparing one type of psychological treatment with another, treatments in combination, and psychological treatment as an alternative to medication are needed. Future trials should report adverse effects as well as treatment tolerability.