

Prolonged Exposure Therapy for PTSD

FACT SHEET FOR VA PROVIDERS



Visit our Prolonged Exposure Mental Health Training Initiative Intranet SharePoint Website for more information

<http://vaww.infoshare.va.gov/sites/pe/default.aspx>

- Training information
- Journal references and articles
- PE provider discussion forums
- Outcomes of treatment as reported by PE providers
- Updates on the Prolonged Exposure Mental Health Training Initiative
- Videos for both providers and Veterans about PE and its benefits

What is Prolonged Exposure Therapy?

Prolonged Exposure (PE) Therapy is a cognitive-behavioral treatment for PTSD and related problems and is one of the most effective therapies recommended by the VA/DoD Clinical Practice Guideline for the treatment of PTSD for our Veterans.

Prolonged Exposure is:

- An individual therapy that consists of four primary components designed to reduce PTSD symptoms:
 - Education
 - Imaginal exposure
 - In vivo exposure
 - Breathing retraining

Prolonged Exposure is based on the theory that two factors maintain trauma-related difficulties: avoidance and negative beliefs.

- **Avoidance:** This includes avoidance of the trauma memories, thoughts, feelings, and situations related to the trauma. Avoidance perpetuates symptoms of PTSD by preventing Veterans from emotionally processing the memory and making sense of what happened.
- **Negative beliefs:** These typically involve beliefs that the world is extremely dangerous, other people are untrustworthy, and the self is incompetent.

Through the processes of imaginal and in vivo exposure, Veterans have an opportunity to learn they can face their trauma memory and activities in their life related to trauma while tolerating their distress. When they do this, they gain an increased sense of mastery over their lives and observe a shift in their thoughts about the trauma.



PE Components

Education about Trauma and PTSD: In the initial sessions, Veterans are provided with information about the recovery and treatment process and learn about common reactions to trauma. They also learn how these reactions (e.g., avoidance) can maintain PTSD symptoms.

Imaginal Exposure: This involves repeated and prolonged exposure to the trauma memory. Through repeatedly approaching the memory, Veterans have the opportunity to process the painful experience. Over time, Veterans learn that they can tolerate the memory, experience less distress, and have greater control over symptoms of PTSD and the trauma.

In Vivo Exposure: This involves repeated exposure to distressing and/or avoided activities in daily life related to the trauma. By engaging in these situations and activities, Veterans re-engage with life and increase their sense of self-mastery.

Breathing Retraining: A simple exercise is taught as a form of relaxation to help with acute anxiety.

Who Does PE Work for?

PE can benefit Veterans with all types of trauma, including trauma due to combat or military sexual trauma, and a range of comorbid problems including:

- Depression
- Substance use difficulties
- Anxiety

Veterans who present with current suicidal or homicidal intent, severe self-injurious behavior, or psychosis, and those who are at high risk of being assaulted should not be treated with PE until primary clinical concerns are addressed.



Discussing PE with Your Veterans

- PE is an established, research-based treatment that has been shown to be effective for both Veterans and civilians
- PE reduces PTSD symptoms
- Many Veterans are seeing real benefits
- PE can help you get your life back

Additional Benefits May Include:

- Reduction in anger, guilt, and depression
- Improvement in sleep
- Improvement in general health

References

- Foa, E. B., Hembree, E. A., & Rothbaum, B. O. (2007). *Prolonged exposure therapy for PTSD: Emotional processing of traumatic experiences*. Oxford: Oxford University Press.
- Hembree, E. A., Marshall, R. D., Fitzgibbons, L. E., & Foa, E. B. (2001). The difficult-to-treat patient with Posttraumatic Stress Disorder. In M. J. Dewan & R. W. Pies (Eds.), *The difficult-to-treat psychiatric patient*. (pp. 149-178). Washington, DC: American Psychiatric Press.
- Rauch, S. A. M., Defever, E., Favorite, T., Duroe, A., Garrity, C., Martis, B., & Liberzon, I. (2009). Prolonged exposure for PTSD in a Veterans Health Administration PTSD clinic. *Journal of Traumatic Stress, 22*, 60-64.
- Department of Veterans Affairs/Department of Defense. (2004) VA/DoD clinical practice guideline for the management of post-traumatic stress. Version 1.0. Washington (DC): Department of Veterans Affairs/Department of Defense.



How to Get More Information?

Consult with your Local Evidence-Based Psychotherapy (EBP) Coordinator or contact any of the trained PE Providers in your area. Visit our Sharepoint site for materials on Prolonged Exposure that you can easily access.

For specific questions about Veteran **referrals**, contact the Veteran's mental

health provider to make sure that any treatment recommendations are appropriate for his or her treatment plan.

Unsure about what to do next? Consult with the Behavioral Health Integrated Primary Care Team, general Mental Health Clinic, PTSD Clinical Team (PCT), or PTSD specialist at your facility.

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While you are at our Sharepoint site, click on the "PE Provider Videos" link to hear what Prolonged Exposure is like from both providers and Veterans.

