

Editorial

## Psychotherapeutic Treatments for Posttraumatic Stress Disorder

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Posttraumatic stress disorder (PTSD) is a severe anxiety disorder involving intense fear, hopelessness, and horror. PTSD develops after patients experience traumatic events such as actual or threatened death, serious injury, military combat, natural disaster, or sexual violation. Patients with PTSD usually show three main types of symptoms: reexperiencing the traumatic events, avoiding reminders of the trauma, and increased anxiety and emotional arousal. The lifetime prevalence of PTSD is 6.8%, and the 12-month prevalence is 3.5% among general adults in the United States [1]. Moreover, patients with PTSD have high rates of comorbid psychiatric disorders (e.g., depressive disorders, anxiety disorders, substance use disorders, and personality disorders, etc) [2,3]. The magnitude of the disability and suffering attributable to PTSD has proved a great need for efficient treatment of PTSD and PTSD-associated psychiatric disorders.

The primary treatment methods for PTSD are psychotherapy and medication. Psychotherapy is usually the first choice for PTSD treatment, especially in PTSD-affected children for whom pharmacological treatments are not appropriate. Psychotherapy is often used to treat emotional problems and mental health conditions. Two types of psychotherapy have been applied in PTSD treatment. One is trauma-focused cognitive behavioral therapy (TF-CBT) [4] and another is eye movement desensitization and reprocessing (EMDR) [5]. TF-CBT involves (1) carefully and gradually "exposing" PTSD patients to thought, feelings, and situations that remind them of the trauma, (2) identifying upsetting thoughts about the traumatic event, and (3) helping patients return to healthy states of functionality. EMDR incorporates elements of TF-CBT with eve movements that are thought to "unfreeze" the brain's information processing system, which is inhibited by PTSD. If psychotherapy is ineffective in treating PTSD in adults, antidepressant medications such as paroxetine [6], mirtazapine [7], amitriptyline [8] or phenelzine [9] are sometimes also used while taking into consideration the medicinal side effects. To maximize treatment success, an integrative approach by combining pharmacotherapy and psychotherapy has also been applied in PTSD treatment [10,11].

The current issue of the Journal of Trauma and Treatment is publishing research articles about the effectiveness of PTSD treatment using psychotherapy. EMDR was found to be effective in treating PTSD in children who were victims of a serious car accident. EMDR was also found to be effective in treating PTSD and comorbid disorders such as paranoid, depressive and borderline traits in adults. These studies provide evidence that early intervention with EMDR is most beneficial for patients with PTSD. Another type of psychotherapy called hypnotic abreaction, which is based on the Ego State Theory (EST) [12], was shown to be an effective and durable treatment for PTSD. Additionally, another study analyzed the association between trauma history and juvenile sexual offending, showing that sexual victimization may result in sexually abusive behaviors.

In conclusion, PTSD is a mental illness triggered by major trauma. The high prevalence and economic burden of PTSD provide strong incentives for the science community to develop novel and more effective treatment methods for PTSD. Furthermore, both psychotherapy and medication may need to consider the influence of genetic background of patients on the outcome of PTSD treatment.

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Received December 24, 2013; Accepted December 26, 2013; Published December 28, 2013

Citation: Zhang H (2013) Psychotherapeutic Treatments for Posttraumatic Stress Disorder. J Trauma Treat S4: e001. doi:10.4172/2167-1222.S4-e001

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