

## PTSD Treatment VA/DoD Guideline for the Management of PTSD

What are the treatments with the most scientific evidence?

In 2017, a task force sponsored by the Veterans Health Administration and the Department of Defense gathered experts in the assessment and treatment of PTSD to review and update recommendations about best practices. A summary of the recommendations are listed below.

### Recommended



#### Trauma-Focused Psychotherapy

Manualized, trauma-focused psychotherapies (TFP) such as Cognitive Processing Therapy, Prolonged Exposure Therapy, and Eye-Movement and Desensitization and Reprocessing have the **most robust scientific support**.



Use of secure video conferencing is recommended if in-person therapy is not feasible.

If TFP is not available or not preferred by your client...



#### Individual Psychotherapy

Manualized, individual psychotherapies such as Stress-Inoculation Treatment and Present Centered Therapy.

OR



#### Pharmacotherapy

Certain medications such as paroxetine, sertraline, venlafaxine, and fluoxetine are recommended.

These treatments are likely to offer some relief from PTSD symptoms, but it is not clear that they are as effective as TFPs

### Suggested



#### Some Other Types of Psychotherapy

If TFP, pharmacotherapy, and manualized, non-TFP are all unavailable or not preferred, there is moderate scientific support for some other types of treatments when compared to no treatment at all.

#### Internet-Based CBT

Self-directed, internet-based cognitive behavioral therapy with feedback from a qualified facilitator may be better than no treatment.

#### Group Psychotherapy

Manualized, group therapy may be helpful. There is insufficient evidence to recommend one type of group therapy over another.



#### What about comorbidities?

1

The presence of comorbid conditions *should not* prevent clients from recommended treatments



2

Recommended treatments of PTSD *should* be offered in presence of Substance Use Disorders



3

Independent assessment for possible sleep disorders, especially after successful treatment of PTSD



4

Cognitive Behavioral Treatment for Insomnia for clients who have an additional diagnosis of Insomnia Disorder



#### SOURCES

<https://www.healthquality.va.gov/guidelines/MH/ptsd/VADoDPTSDCPGFinal012418.pdf>

<https://www.healthquality.va.gov/guidelines/MH/ptsd/VADoDPTSDCPGCLinicianSummaryFinal.pdf>