

Virtual War PTSD:

A methodological thread

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INTRODUCTION (i)

PTSD:

USA National Comorbidity Survey (NCS) & National Vietnam Veterans Readjustment Survey (NVVRS):

→lifetime prevalence of PTSD among adult Americans is 7.8%.

→lifetime prevalence of PTSD among American Vietnam theater veterans is 30.9% for men and 26.9% for women.

INTRODUCTION (ii)

PTSD:

USA National Comorbidity Survey (NCS) & National Vietnam Veterans Readjustment Survey (NVVRS):

→15.2% of all male Vietnam theater veterans and 8.1% of all female Vietnam theater veterans were diagnosed (1986-88) with PTSD.

INTRODUCTION (iii)

PTSD:

No epidemiological study for Portugal:

→ 25 000 with war PTSD

INTRODUCTION (iv)

PTSD treatment:

Available strategies:

→ Exposure (in imagination)

→ Drugs

INTRODUCTION (v)

PTSD treatment

Problems associated:

- Exposure in imagination – **not controlled environment; small effects reported**
- Drugs – **small effects reported; dependency; secondary effects**

INTRODUCTION (vi)

PTSD:

New treatment strategy:

VRE

- **Controlled environment**
- **Almost possible to simulate any scenario**
- **Cheap**
- ... and works ???

INTRODUCTION (vii)

VRE as treatment strategy:

- More than 500 papers over the last 10 years
- Several books
- International Conferences
- Scientific journals

INTRODUCTION (viii)

VRE as war PTSD treatment strategy:

- Few studies comparing VRE vs

	IE
	Drugs
- Case studies
- Low N
- Outcome based on self report measures

AIMS

VRE as war PTSD treatment strategy:

→ VRE vs Drugs

→ N = 90

→ Clinical populations

→ Physiological measures (EEG, ECG, GSR)

PARTICIPANTS (i)

→ 90 patients with PTSD,

→ DSM-IV-TR (APA, 2000) for PTSD,

→ enrolled at a PTSD specialized treatment unit (Hospital Júlio de Matos).

PARTICIPANTS (ii)

Exclusion Criteria:

- cardiovascular disease,
- epilepsy,
- substance dependence (in the last year).

TREATMENT CONDITIONS (i)

- C1 – Drugs (DT)
- C2 - Virtual Reality Exposure (VRE) + DT
- C3 – Normal procedures (DN)

Patients will be randomly assigned to one of the three groups

TREATMENT CONDITIONS (ii)

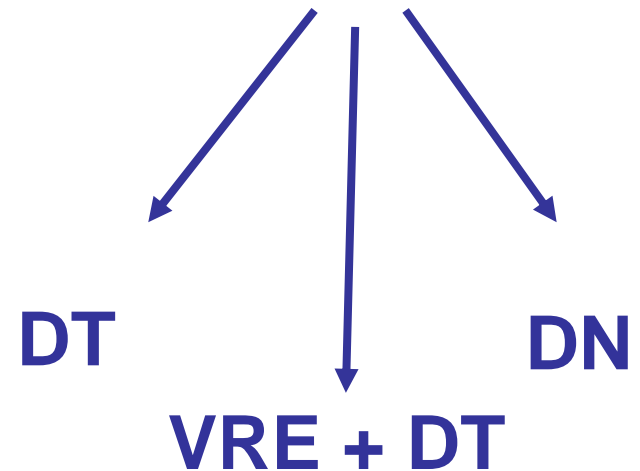
Sessions 1 to 2

Psychoeducation

Anxiety Management Skills

Cognitive Reestruturing

Sessions 3 to 14



TREATMENT CONDITIONS (iii)

Sessions 3 to 14 (C1&C2):

- Sertralina (Zoloft, Pfizer),
- initiating with 50 mg/day and fixating the doses in 100 or 200 mg/day, as required.

TREATMENT CONDITIONS (iv)

Sessions 3 to 14 (C2):

- a) Mine deflagration;
- b) Ambush;
- c) Mine deflagration + Ambush;
- d) Facing fellow soldiers death/injury situations and waiting for casualties evacuation.



TREATMENT ASSESSMENTS (i)

Specific Self-Reports:

PTSD

CAPS – Clinician-Administered PTSD Scale
(Blake *et al.*, 1990)

IES – Impact of Event Scale (Zilberg, *et al.*, 1982)

TREATMENT ASSESSMENTS (ii)

Specific Self-Reports:

Psychopathologic Comorbidity

**SCL-90 – Symptom-Check-List-90-Revised
(Derogatis, 1977)**

Personality

**MCMI-II – Millon Clinical Multiaxial Inventory-II
(Millon, 1987)**

TREATMENT ASSESSMENTS (iii)

Specific Self-Reports:

VR reactions

TAS - Tellegen Absorption Scale (Tellegen & Atkinson, 1974)

DES - Dissociative Experiences Scale (Bernstein & Putman, 1986)

SUDS – Subjective Units of Discomfort

TREATMENT ASSESSMENTS (iv)

Physiological measures:

Peripheral

→ Heart Rate (ECG)

→ Galvanic Skin Response (GSR)

Central

→ Electrophysiological Activity (EEG)

TREATMENT ASSESSMENTS (v)

Follow-Up Sessions:

6 months

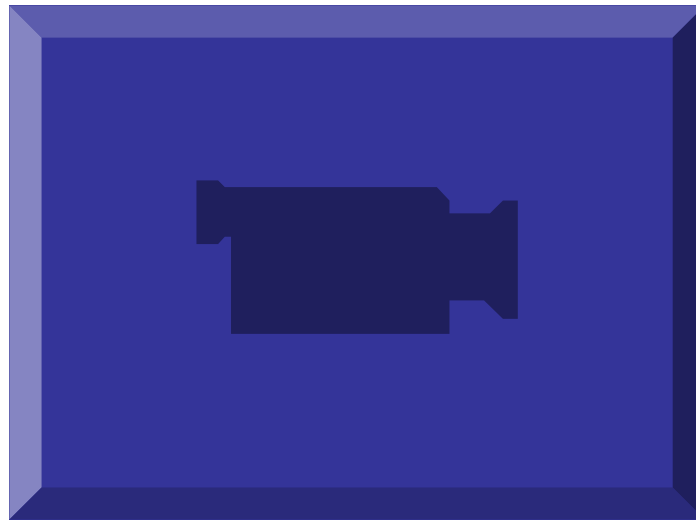
12 months

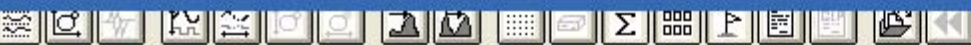
**ALL ASSESSMENTS WILL BE CONDUCTED BY
AND INDEPENDENT THERAPIST**

VIRTUAL REALITY SETUP (i) C2



VIRTUAL REALITY SETUP (ii) C2

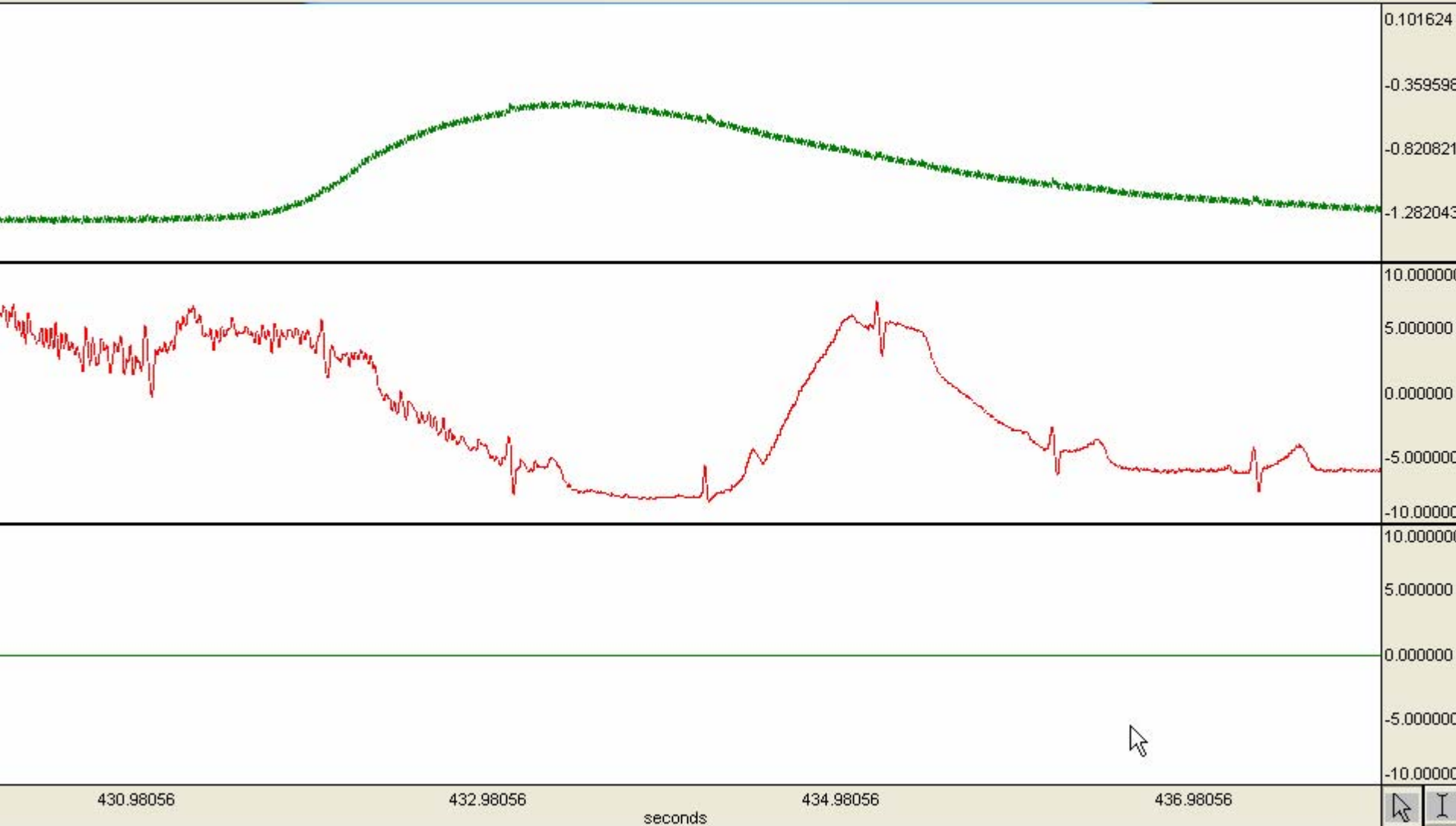




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