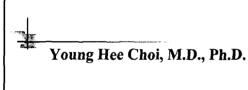
제3부: 재난 상황에서의 정신과적 개입

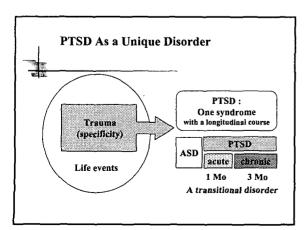


Psychological Treatment for Post Traumatic Stress Disorder

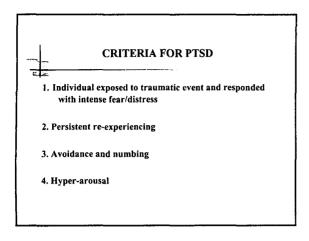


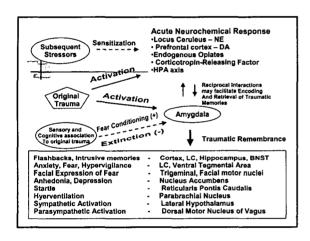
Associate Professor of Psychiatry Inje University, Seoul Paik Hospital, South Korea

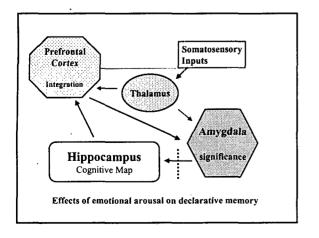
Fellow: Academy of Cognitive Therapy



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COGNITIVE MODEL OF PERSISTENT PTSD

(Ehlers & Clark, 2000, Behav. Res. Ther. 38, 319-345)

The Puzzle

Anxiety is about future threat.

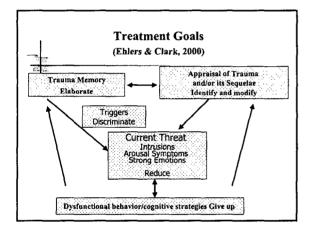
PTSD is to do with memory for a past event.

Solution

Individuals are processing the trauma and/or its sequelae in a way which poses a current threat to self.

Implications for Therapy

Aim of therapy is process the trauma so it is seen as time limited, past event which does not necessarily have global implications for one's future.



PROLONGED EXPOSURE THERAPY

(developed by Foa and Rothbaum, 1998)

- Exposure in imagination to trauma-related events
- Exposure in real-life to trauma-related events
- 9 biweekly individual sessions, 1st two sessions were devoted to information-gathering, explaining the treatment rationale, and treatment-planning including the construction of a hierarchy of feared situations for in vivo exposure.

The patient is asked to go back in his or her mind to the time of the trauma and to relive it in his or her imagination.

- He or she is asked to close his or her eyes and to describe it out loud in the present tense, as if it were happening now.
- Exposure continued for about 60 minutes and very often, this narrative is tape-recorded (audio-taped) and the tape is sent home with the patient so that he or she may practice imaginal exposure daily at home between therapy sessions.

- Although this reliving is often painful for the patient initially, it quickly becomes less painful as exposure is repeated, or digested, so that it can become less painful.
- Also, many victims with PTSD mistakenly view the process of remembering their trauma as dangerous and therefore devote much effort to avoiding thinking about or processing the trauma.
- Imaginal reliving serves to disconfirmation this mistaken belief.

Exposure in real-life to trauma-related events

 In vivo or in real life exposure involve repeatedly confronting realistically safe situations, places, or objects that are reminders of the trauma until they no longer elicit such strong emotions.

Other forms of exposure to trauma related events Some therapists have patients write repeatedly about the trauma as a form of exposure. In systematic desensitization, the patient is taught how to relax, then presented with reminders of the trauma gradually, working up a hierarchy from the least disturbing to the most disturbing. Other forms of exposure to trauma related events Virtual reality exposure (VRE) presents the user with a computer-generated view of a virtual world that changes in a natural way with head motion. Being in a 'Virtual Vietnam', patient is exposed to two virtual environments, a virtual Huey helicopter flying over a virtual Vietnam and a clearing surrounded by jungle. Anxiety Management Training (AMT) Teaching patients skills to control their anxiety Psychoeducation about the meaning of anxiety, fightflight reaction, autonomic nervous system, and safety seeking behavior, etc. Breathing retraining, PMR, Biofeedback, Meditation

THE EIGHT PHASES OF EMDR **CLIENT HISTORY** 2. PERCEPTION 3. ASSESSMENT (Setting up the specific Target) 4. DESENSITIZATION 5. INSTALLATION: AFTER SUDS=0 6. BODY SCAN 7. CLOSURE 8. RE-EVALUATION Psychodynamic Psychotherapy Post Traumatic Stress Disorder Short-term supportive and expressive psychotherapy → Crisis Intervention Intensive psychotherapy → Therapeutic relationship, imagery, personality



Conclusion

- 현재 PTSD의 심리적 치료로서 가장 효과적으로 보고 된 치료는 노출치료이다. 요즘에는 인지적인 접근도 많 은 도울이 된다고 하며, 불안대처혼편이나 EMDR 기 법이 또 다른 치료적 대안으로 떠오르고 있다. CBT를 받은 환자가 rational insight는 가지게 되었으나 true emotional insight를 가지지 못할 때에 사용할 수 있는 적절한 방법의 한가지로 생각된다.
- 만성화되어 가는 환자뿐에게는 추가적인 역동적 정신 치료도 추천된다.

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