



Clinical Considerations for Working With Our Returning Vets

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Emory Healthcare Veterans Program

March 14, 2016

- Overview of PTSD
- Standards of care in treating PTSD
- Impact of PTSD on families
- Snapshot of Emory Healthcare Veterans Program

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What are some misconceptions about PTSD?

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- Anyone with a trauma history has PTSD.
 - Many do not develop PTSD symptoms.
- On the other hand, PTSD signals weakness.
 - Susceptibility to PTSD is complex and involves biological, social, and historical factors.
- PTSD occurs instantly following trauma.
 - Delayed expression of PTSD symptoms is not infrequent.
- Recovery from PTSD is not possible.
 - Several forms of *effective* treatment are available.

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What might we expect of
someone posttrauma?

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Besides PTSD...

- Adjustment reactions
- Depression
- Anxiety
- Substance use

What *is* PTSD then?

PTSD Symptoms

- Nightmares
- Unwanted thoughts
- Avoidance
- Hypervigilance

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- Startle response
- Detachment
- Irritability
- Guilt
- Sleep problems
- Social isolation

How do we treat PTSD?

Evidence-Based Psychotherapy for PTSD:

- Prolonged Exposure (PE)
- Cognitive Processing Therapy (CPT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Virtual Reality Exposure Therapy (VRET)

Prolonged Exposure

- Key elements:
 - Psychoeducation
 - In vivo exposure
 - Imaginal exposure
- Directly targets *avoidance*
 - Clients fully process trauma memory
 - Approximately ten 90-minute sessions

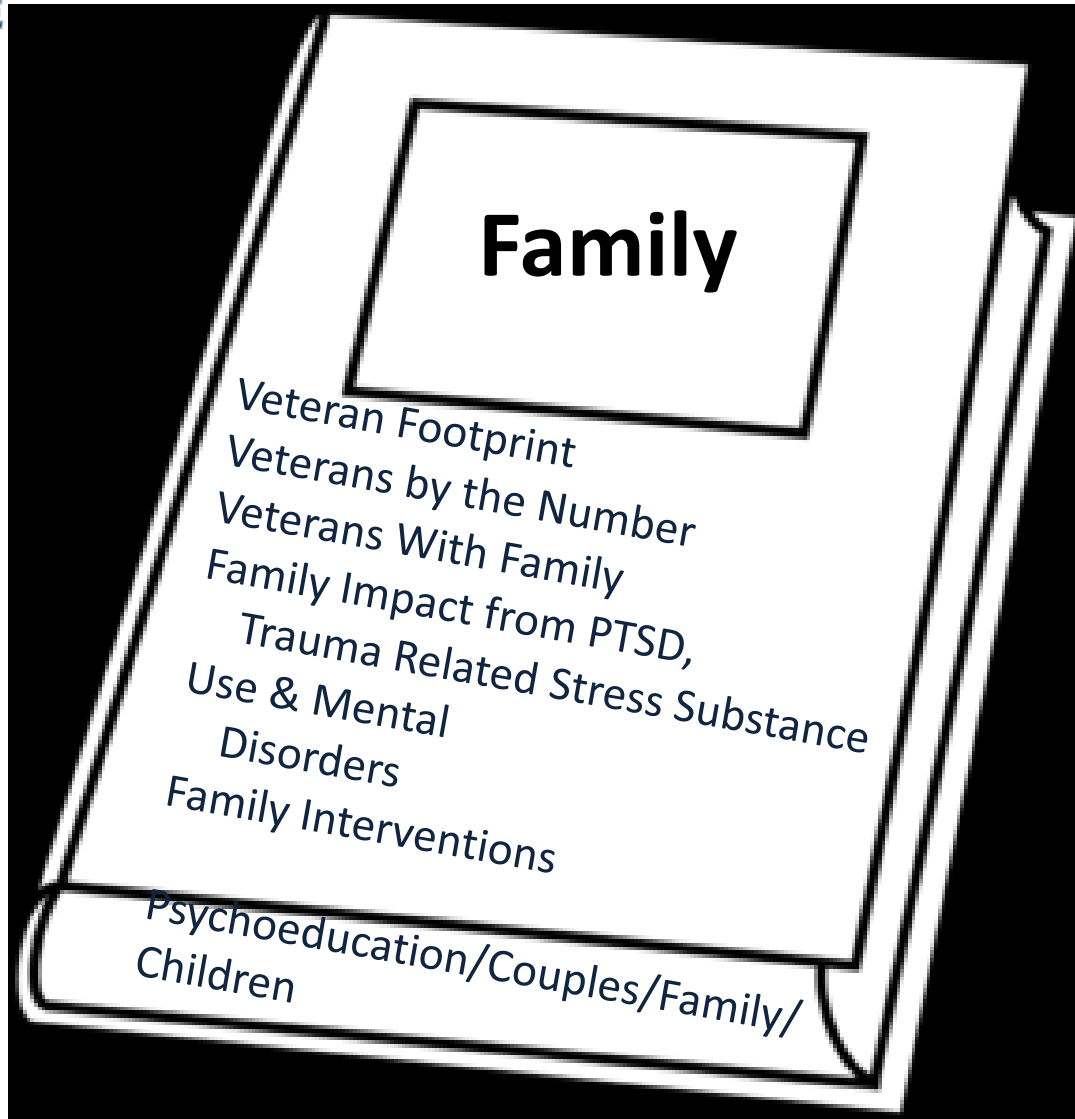
- Key elements:
 - Psychoeducation
 - Identification of “stuck points”
 - Cognitive restructuring
- Directly targets *posttraumatic cognitions*
 - 12 sessions; can be done in group format

- Key elements:
 - Focusing on images from index trauma
 - Repetitive eye movements
 - Body scan
- Directly targets *posttraumatic cognitions*
 - Approximately 4 to 12 sessions

- Based on Prolonged Exposure Therapy
 - Virtual reality boosts level of engagement
 - Therapist matches in VR scene the content of client's memory
- <https://www.youtube.com/watch?v=c-jq36RKVa8>

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- Sertraline (Zoloft)
- Paroxetine (Paxil)
- Fluoxetine (Prozac)
- Venlafaxine (Effexor)
- Prazosin for nightmares



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The family is a unit of moving parts and countless components that work collectively creating good/bad synergy, whereby each individual is searching for some form of equilibrium.

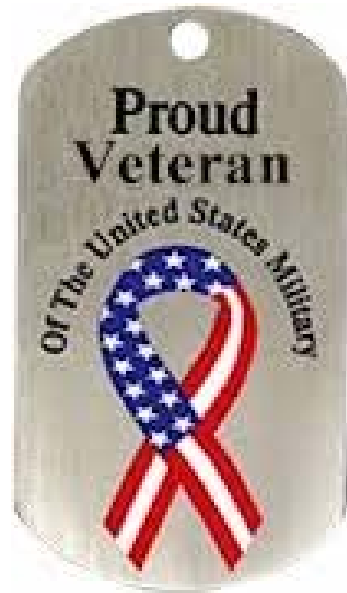


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Veterans by the numbers-how many?

19.3 Million-
U.S. In 2014



1.6 Million-
Females U.S. In
2014

Factfinder2.census.gov

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2010 NSV National Survey Veteran Reports

- Most Veterans are 55 years of age or older (63.9%)
- Veterans are generally non-Hispanic (94.9%), White-only (84.7%) males (91.9%)
- Marital Status and Dependent Children- About 31 percent of Veterans reported that they have dependent children (either minors or young adults attending school). The majority of Veterans reported that they were married (69.7%)
- In terms of military experience, about one-third (33.9%) report having served in combat or a war zone and a similar percentage (33.9%) report having been exposed to dead, dying, or wounded.

PTSD Impact on Family Members

Fear & Worry

Depression

Sleep problems

Substance use

Anger

Sympathy/negative feelings

Guilt and Shame



Impact on Children When Parent Has PTSD

- Social and Behavioral Problems
- Emotional problems
- Withdrawal/loneliness/pulling away
- School problems
- Getting into trouble
- Anger/acting out
- Mood changes/irritability
- Taking on adult roles within the family
- Diet changes

Psychoeducation & Family Skill Building

- Building resilience in veteran/military families
- Couples skills building, spouses, partners
- Parenting tools
- Learn to identify individual and family strengths
- Craft conversations to help manage emotions

Psychoeducation & Family Skill Building

- Talk about difficult subjects
- Clarify misunderstandings in communication
- Respect individual points of view
- Improve family communication
- Gain practical skills to manage family transitions
- Problem solving in safe environments

Psychoeducation & Family Skill Building

What are the benefits of family involvement?



<https://www.youtube.com/watch?v=PA56dcdBLKw&index=27&list=PL8FBF506DEC670ADF>

Veterans Health Administration

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Philosophy of Family Intervention & Family FOCUS (UCLA)

8 Session program

Can be implemented prior to, or concurrent with, other MH treatment

Serves couples and families with children > 5 years

Philosophy of Family Intervention & Family FOCUS (UCLA)

Creating your narrative timeline

Help family to identify their goals/home family activities

Feeling thermometer/degrees of functioning
help family to track progress

Our Program

- Open to post-9/11 veterans and service members
- Treating PTSD, TBI, and related conditions
- Treatment is at *no cost* to veteran/service member

Program Statistics

Opened our doors September 1, 2015

September 2015-January 2016

| | |
|----------------------|-----|
| New Patient Visits | 59 |
| Web Form Completions | 91 |
| Call Volumes | 120 |

Veterans Program

- Family support/Psychoeducation/family FOCUS model/family workshops
- Employment support
- Case Management
- Training of community mental health providers

Veterans Program

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