

Researchers develop an integrated treatment for veterans with chronic pain and posttraumatic stress

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The wars in Iraq and Afghanistan have resulted in a growing number of soldiers evacuated to the United States for comprehensive care for physical and psychological trauma. Given the number of physical injuries often experienced by soldiers, it is not surprising that chronic pain is a frequent problem among returning soldiers from Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF).

Common sources of pain are in the head (traumatic-brain injury or post-concussion syndrome), legs (fractures, amputations, burns) and shoulders. Other physical injuries include spinal-cord and eye injuries as well as auditory trauma. In addition, veterans are reporting high rates of [mental health](#) issues, including posttraumatic stress disorder (PTSD), depression and alcohol use disorders.

Boston University School of Medicine (BUSM) researchers have developed an integrated treatment program for veterans with comorbid chronic pain and PTSD. This study appeared in the October issue of *Pain Medicine*.

BUSM researchers found in this pilot study that soldiers have shown great benefit from receiving the integrated treatment for pain and PTSD. BUSM researchers used components of cognitive processing therapy (CPT) for PTSD and [cognitive-behavioral therapy](#) (CBT) for chronic pain management. A 12-session integrated treatment for veterans was

developed including a therapist manual and patient workbook for weekly readings and homework assignments. Participants received pre and post-treatment evaluations using measures of pain, PTSD, physical disability and psychological distress.

The CBT approach has been shown to be highly effective in treating a range of disorders, from PTSD to chronic pain in children and adults. Using CBT for chronic pain involves challenging maladaptive beliefs and teaching patients' ways of safely reintroducing enjoyable activities into their lives. BUSM researchers used different methods for treating chronic pain and PTSD, including teaching veterans cognitive restructuring, relaxation training, time-based activity pacing so that veterans become more active without overdoing it, and lastly graded homework assignments designed to decrease patients' avoidance of activity and reintroduce a healthy active lifestyle.

"Several themes emerged over the course of implementing the treatment, including the importance of establishing participant trust, regular therapy attendance and addressing participant avoidance," explained lead researcher John D. Otis, PhD an assistant professor of psychiatry and psychology at Boston University School of Medicine and clinical psychologist in the Research Services at the VA Boston Healthcare System. "Participants reported that they liked the format of treatment, appreciated learning about the ways that chronic pain and PTSD share common symptoms and how the two disorders interact with one another," said Otis.

Upon completing the 12-week integrated treatment, several participants no longer met diagnostic criteria for PTSD and reported reductions in symptoms of [chronic pain](#), and disability.

Source: Boston University Medical Center

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