

After traumatic event, early intervention reduces odds of PTSD in children by 73 percent

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After experiencing a potentially traumatic event - a car accident, a physical or sexual assault, a sports injury, witnessing violence - as many as 1 in 5 children will develop Posttraumatic Stress Disorder (PTSD).

A new approach that helps improve communication between child and caregiver, such as recognizing and managing traumatic stress symptoms and teaching coping skills, was able to prevent chronic and sub-clinical PTSD in 73 percent of [children](#). The intervention, called the Child and Family Traumatic Stress Intervention (CFTSI) also reduced PTSD symptoms in children - which can include reliving a traumatic experience, [sleep disturbances](#), emotional numbness, angry outbursts or difficulties concentrating - and promoted recovery more quickly than a comparison intervention.

"This is the first preventative intervention to improve outcomes in children who have experienced a potentially traumatic event, and the first to reduce the onset of PTSD in kids," said lead study author Steven Berkowitz, MD, associate professor of Clinical Psychiatry at the University of Pennsylvania School of Medicine and director of the Penn Center for Youth and Family Trauma Response and Recovery. "If this study is replicated and validated in future studies, this intervention could be used nationally to help children successfully recover from a traumatic event without progressing to PTSD." The study now appears online in the [Journal of Child Psychology and Psychiatry](#).

In the study, 106 children ranging from 7 to 17 years in age and a caregiver were randomly assigned to receive the four-session Child and Family Traumatic Stress Intervention or a four-session supportive comparison intervention, both provided within 30 days following exposure to a traumatic event. Children were referred by police, a forensic sexual abuse program, or the local pediatric emergency department in an urban city in Connecticut. The CFTSI intervention began with an initial baseline assessment to measure the child's trauma history and a preliminary visit with the caregiver, focusing on their essential role in the process. Within the sessions, there is a focus on improving communication between the child and caregiver, as well as other supportive measures. At the end of the next two sessions, the clinician, caregiver and child, decide on a homework assignment to practice certain coping skills. The behavioral skill components provide techniques to recognize and manage traumatic stress symptoms.

Future studies will need to validate the effectiveness of this intervention, but researchers hope that brief and effective interventions like CFTSI can be applied early to prevent the development of PTSD.

Provided by University of Pennsylvania School of Medicine

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