

Exposure therapy appears helpful in treating patients with prolonged grief

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Cognitive behavioral therapy with exposure therapy (CBT/exposure), where patients relive the experience of a death of a loved one, resulted in greater reductions in measures of prolonged grief disorder (PGD) than CBT alone.

PGD involves persistent yearning for the deceased and the associated emotional pain, difficulty in accepting the [death](#), a sense of meaninglessness, bitterness about the death and difficulty in engaging in new activities. To diagnose PGD, the symptoms need to last at least six months. PGD is distinct from depression because of a person's preoccupation with yearning for the deceased.

: A [randomized clinical trial](#) of 80 patients with PGD was conducted to determine the effectiveness of CBT/exposure (n=41) or CBT alone (n=39). All patients received 10 weekly two-hour group therapy sessions of CBT techniques. Patients also had four individual sessions where they received [exposure therapy](#) (reliving the time they experienced the death of their loved one) or patients receiving CBT alone could discuss whatever they liked. Outcome measures were depression, cognitive appraisals and functioning at the six-month follow-up.

The analyses indicate that CBT/exposure resulted in greater PGD reductions than CBT alone: there were greater reductions in [depression](#), negative appraisals and functional impairment at follow-up. Fewer patients in the CBT/exposure group at follow-up (14.8 percent) met the criteria for PGD than those in the group who received CBT alone (37.9

percent).

"In the most valuable lesson from this study, optimal gains with PGD patients are achieved when the emotions associated with the memories of the death and the sequelae of the loss are fully accessed. ... Despite the distress elicited by engaging with memories of the death, this strategy does not lead to aversive responses. In light of evidence that many interventions provided to grieving people are not empirically supported, the challenge is to foster better education of clinicians through evidence-supported interventions to optimize adaptation to the loss as effectively as possible."

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