

Veterans and civilian patients at risk of ICU-related PTSD up to a year post discharge

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One in ten patients is at risk of having new post-traumatic stress disorder (PTSD) related to their ICU experience up to a year post-discharge. This was the finding from a multicenter, prospective cohort research study of veterans and civilians. The research was published online ahead of print in the American Thoracic Society's *American Journal of Respiratory and Critical Care Medicine*.

In the study "Incidence and Risk Factors for ICU-related Posttraumatic Stress Disorder in Veterans and Civilians," researchers led by Mayur Patel, MD, MPH, FACS, Assistant Professor of Surgery & Neurosurgery at Vanderbilt University Medical Center and Staff Surgeon and Surgical Intensivist at the Nashville VA Medical Center, analyze data from a cohort of medical and surgical ICU survivors enrolled in studies from three Veterans Affairs hospitals (MIND-ICU Study, NCT00400062) and one civilian hospital (BRAIN-ICU Study, NCT00392795). Using the PTSD Checklist for the DSM-IV to determine PTSD for this study, among PTSD measurements listed by the U.S. Department of Veteran Affairs' National Center for PTSD, a total of 181 patients were assessed at three months and 160 were further assessed at 12 months.

The cumulative incidence of PTSD was 6 percent to 12 percent within one year following hospitalization. "Although lower than prior research and public perception suggests, the rate of ICU-related PTSD is very comparable to the 8 percent PTSD rates seen in current and former service members deployed to the recent Iraq and Afghanistan conflicts,"

Patel said. "It is important to understand more about PTSD following the traumatizing events of a [critical illness](#) so we can better support the growing number of ICU survivors."

PTSD can occur in patients after the traumatizing events of critical illness, and this study provides estimates on new cases of PTSD stemming specifically from the ICU experience. Pre-existing PTSD has rarely been systematically assessed in prior cohorts, and this study took extra effort to distinguish pre-existing PTSD from new PTSD cases. Civilian populations have dominated the literature of PTSD after critical illness, and this study is the first to also include the expanding and aging Veteran population.

Assessing risk factors for ICU-related PTSD, the researchers found that pre-existing PTSD as well as prior depression were strong [risk factors](#) associated with ICU-related PTSD at three and 12 months post-discharge. Being a veteran did not increase risk of ICU-related PTSD, nor did duration of delirium, amount of pain medication, or amount of sedative.

"Currently, the international psychological aftercare for ICU survivors is not organized proactively; rather, it is largely reactive in response to disabling reports from survivors, caregivers, and primary care providers. The Institute of Medicine in the United States has recommended a systematic collection, analysis, and dissemination of data assessing the quality of post-conflict PTSD care in the military and veteran populations. We suggest that the same should apply to the large civilian and veteran populations of critically ill survivors," the authors advised.

Provided by American Thoracic Society

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