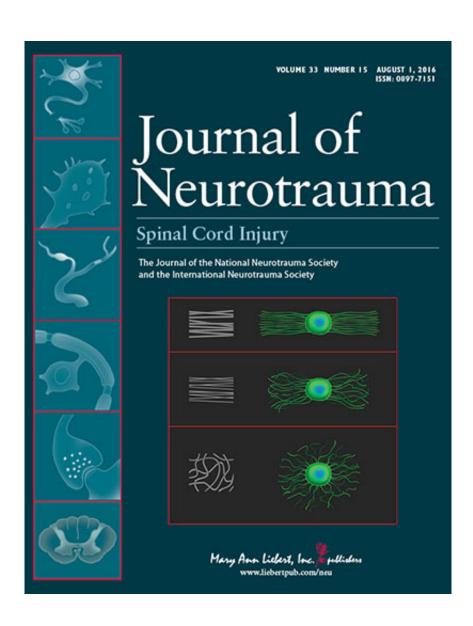


CDC study identifies patients with mild traumatic brain injury at increased risk of PTSD

August 16 2016



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A new study identified risk factors for the development of post-traumatic stress disorder (PTSD) following a mild traumatic brain injury (mTBI), making it possible to screen for PTSD symptoms among at-risk populations. Unlike much previous research that has focused on TBI and PTSD in military personnel, the current study focused on civilian emergency services providers, and the findings are published in *Journal of Neurotrauma*.

The study "Screening for Post-Traumatic Stress Disorder in a Civilian Emergency Department Population with Traumatic Brain Injury", found that about 27% of the patients with mTBI who returned for follow-up care at 6 months post-injury and underwent screening were positive for PTSD.

Juliet Haarbauer-Krupa and coauthors from the Centers for Disease Control and Prevention (Atlanta, GA), University of California, San Francisco, San Francisco General Hospital, and Washington University in St. Louis (MO), evaluated factors including functional disability, psychiatric symptoms, satisfaction with life, and performance on measures of visual processing and mental flexibility. They also assessed the predictive value of pre-injury education, psychiatric history, and cause of the TBI.

"This study represents yet another important communication originating from the CDC and the TRACK-TBI study group that now reframes PTSD within the context of civilian TBI," says John T. Povlishock, PhD, Editor-in-Chief of *Journal of Neurotrauma* and Professor, Medical College of Virginia Campus of Virginia Commonwealth University, Richmond. "The finding of a relatively significant proportion of civilian patients experiencing PTSD following mild TBI calls for its more routine evaluation, particularly in those patients with the added comorbid



factors identified in this report."

Research reported in this publication was supported by the National Institutes of Health under Award Numbers RC2 NS069409, RC2 NS064909-02S1, and U01 NS086090-01. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

More information: Juliet Haarbauer-Krupa et al, Screening for Post-Traumatic Stress Disorder in a Civilian Emergency Department Population with Traumatic Brain Injury, *Journal of Neurotrauma* (2016). DOI: 10.1089/neu.2015.4158

Provided by Mary Ann Liebert, Inc

Citation: CDC study identifies patients with mild traumatic brain injury at increased risk of PTSD (2016, August 16) retrieved 19 April 2024 from https://medicalxpress.com/news/2016-08-cdc-patients-mild-traumatic-brain.html

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