

New Study Demonstrates Long-Term Benefits of Psychotherapy for PTSD among Traumatized Adolescents after Natural Disaster

LOS ANGELES, CA (December 1, 2005) Young survivors of the recent Indian Ocean tsunami, Kashmir earthquake, Gulf Coast hurricanes and other natural disasters face high risk of chronic posttraumatic stress disorder (PTSD) and depression if left untreated, according to a new study by a UCLA-based research team.

Detailed in the December 2005 edition of the peer-reviewed American Journal of Psychiatry, the study examined the impact of the catastrophic 1988 Spitak earthquake in Armenia on adolescents near the temblor's epicenter. Researchers found untreated adolescents had significantly higher levels of PTSD and depressive symptoms than peers who received treatment.

"Chronic PTSD and depression can impair the psychosocial development and behavior of children and adolescents, which in turn can have a detrimental effect on their families and communities," said lead author Dr. Armen K. Goenjian, a researcher and psychiatrist at the Semel Institute for Neuroscience and Human Behavior at UCLA and the National Center for Child Traumatic Stress.

"The findings unequivocally show the sustained benefits of specific types of therapy, even when provided 1½ years after the earthquake" according to Dr. Goenjian who is also the director of the Armenian Relief Society's Mental Health Clinics in Gumri and Spitak.

Signs of the psychological effects of trauma in children include fear of abandonment and recurrence of the horrors of the trauma, anger, withdrawal, trouble with concentration, recurrent fearful memories of the trauma and nightmares. Children feel vulnerable, view the world as unsafe and adults unable to protect them. These signs are not always apparent to caregivers and teachers.

Over time the condition can lead to depression, substance abuse, promiscuity, reckless and aggressive behavior, academic impairment, and future marital and employment difficulties.

The study examined the impact of the Spitak earthquake that struck northern Armenia on Dec. 7, 1988, killing more than 25,000 people and causing massive destruction in four cities and numerous villages. In Spitak and Gumri, two of the hardest hit cities, nearly everyone experienced direct threats to their lives and witnessed mutilating injuries and grotesque deaths. Five years later, just 15 percent of the cities had been rebuilt and piles of debris and destroyed buildings served as constant reminders, making psychological recovery even harder.

(By comparison, the recent Indian Ocean tsunami killed more than 170,000 people and left more than 1 million homeless. The earthquake in Kashmir killed an estimated 50,000 people and left hundreds of thousands without shelter as winter begins in this mountainous region of Kashmir. Hurricanes Katrina and Rita killed more than 1,000 people along the Gulf Coast of the United States and left well over half a million people homeless.)

The research team evaluated the natural course of posttraumatic stress and depressive symptoms among untreated adolescents from Spitak and Gumri. In addition the research team examined the effectiveness of brief trauma and grief-focused psychotherapy among adolescents from Gumri.

A total of 125 adolescents were assessed using separate PTSD and depression self-rating scales at 1.5 years and five years after the earthquake. At 1.5 years a group of students in Gumri underwent six weeks of group and individual psychotherapy.

PTSD scores among untreated adolescents from Gumri and Spitak subsided significantly but mildly at five year follow-up. The average scores at Spitak, the city at the epicenter, remained above the cutoff for a diagnosis of PTSD. Depression scores increased mildly in both cities.

Among adolescents in Gumri, those who received treatment saw three times the improvement in PTSD scores compared to the adolescents who went untreated. In addition, depression scores of treated adolescents improved over time while those of untreated teens worsened.

The study used data provided by the psychiatric Outreach Program of the Armenian Relief Society of the Western United States. The Bing Fund also provided support.

Study co-authors were David Walling, Alan M. Steinberg, Ida Karayan, Louis M. Najarian and Robert Pynoos, representing the National Center for Child Traumatic Stress, the Semel Institute for Neuroscience and Human Behavior at UCLA, and the Department of Psychiatry and Biobehavioral Sciences at the David Geffen School of Medicine at UCLA, Collaborative Neuroscience Network and New York University School of Medicine.

Based at UCLA's Semel Institute and Duke University Medical Center, the National Center for Child Traumatic Stress is an umbrella organization that encompasses more than 50 sites making up the National Child Traumatic Stress network. Funded through the federal Substance Abuse and Mental Health Services Administration, the network works to improve the quality, effectiveness and availability of services for traumatized youth. More information is available at www.NCTSN.org.

The Semel Institute for Neuroscience and Human Behavior is an interdisciplinary research and education institute devoted to the understanding of complex human behavior, including the genetic, biological, behavioral and sociocultural underpinnings of normal behavior, and the causes and consequences of neuropsychiatric disorders. In addition to conducting fundamental research, the institute faculty seeks to develop effective treatments for neurological and psychiatric disorders, improve access to mental health services, and shape national health policy regarding neuropsychiatric disorders. More information is available at <http://www.npi.ucla.edu/>.

The National Child Traumatic Stress Network works to improve the quality, effectiveness, and availability of services for traumatized youth. The Network includes over 50 sites and the National Center for Child Traumatic Stress, based out of UCLA Neuropsychiatric Institute and the Duke University Medical Center. The NCTSN is funded through the Substance Abuse and Mental Health Services Administration.

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