Effective Psychological Treatments for Posttraumatic Stress Disorder: Prolonged Exposure Therapy
Elizabeth Abou, BA & Gali Goldwaser, PhD
Naval Center for Combat & Operational Stress Control

What is Prolonged Exposure Therapy?

Prolonged exposure (PE) is a cognitive-behavioral therapy demonstrated to be highly effective in treating PTSD and other combat or operational stress injuries. PE is also helpful for treating common conditions associated with PTSD, such as mood and substance use disorders.\(^1\) There has been approximately 20 years of empirical research to support PE.\(^1-3\) Based on a recent meta-analysis, the average PE-treated patient fared better than 86% of patients in control conditions at post-treatment on PTSD measures.\(^4\)

What Are the Core Elements of PE?

PE is a manualized, but flexible treatment with the capacity to be modified in various ways and customized to the individual. PE consists of two fundamental components, in-vivo and imaginal exposure. During in-vivo exposure, a service member establishes an avoidance hierarchy with the provider and then faces real-life events that cause manageable levels of anxiety symptoms. In-vivo exposure is typically assigned to a service member to do outside of sessions.\(^5\) For example, the patient might agree to visit a crowded supermarket at least twice between sessions and remain there until his or her distress level stabilizes or decreases. There is an expectation that the individual will experience physiological arousal during these exercises, but not to the extent that he/she will escape the situation. The second major component is imaginal exposure, in which a service member is asked to recall a specific event as vividly as possible. The provider ensures the patient’s full engagement in processing a traumatic event by asking him or her to share it in a first-person narrative and in the present tense. Again, it is expected that the service member will experience physiological arousal, but in a safe and therapeutic setting. Both exposure techniques are designed to bring about habituation, or the lowering of anxiety experienced when one is reminded of a distressing event, such as a firefight or ambush in a war zone. The goals of PE are to allow for adequate and in-depth emotional processing of an event and to decrease avoidance behaviors commonly associated with PTSD and combat or operational stress injuries. Although PE treatment averages ten 90-minute sessions, the number and length can be modified depending on the severity of the injury. Less severe injuries might require fewer sessions, or if time in garrison is limited, treatment might be offered more frequently with less time between sessions. PE also incorporates psychoeducation and anxiety management techniques, such as breathing exercises, which teach the service member how to manage emotional distress. These interventions can have a powerful and immediate positive effect on symptoms. At this time, it is unclear whether PE is appropriate for use in-theater; further research needs to be completed.\(^6\)
How Does PE Compare to Other Psychological Treatments?

Treatments like PE, eye movement desensitization and reprocessing (EMDR), cognitive processing therapy (CPT), and cognitive therapy (CT) have all been shown to be equally effective in treating PTSD and combat or operational stress injuries. Prolonged Exposure therapy takes an average of 15 sessions to decrease PTSD symptoms. Even newly trained clinicians have seen favorable results with PE and studies suggest that no differences exist between experienced versus beginner clinicians when administering PE.

What Are PE’s Limitations?

Though PE looks promising some have voiced concern that exposure therapy like PE may exacerbate symptoms and lead to premature dropout based on a few reports. Though this is the case a comprehensive literature search published in the Journal of Traumatic Stress indicated that there were in fact no differences in dropout rates among exposure therapy, cognitive therapy, stress inoculation training, and EMDR. For PE about 25-40% of patients who receive treatment do not fully recover from PTSD, but many will experience a decrease in PTSD symptoms therefore more research is needed to aid in eliminating the presence of PTSD.

Is PE a Good Treatment Option for Service Members?

Yes. PE is a reliable, safe and effective evidence-based psychological treatment for PTSD and combat or operational stress injuries. It helps reduce symptoms and has a positive effect on other aspects of an individual’s life. It increases confidence, improves daily functioning and promotes the ability to use courage rather than fear when coping with stressful situations. Those who have received PE treatment have also reported reduced anger and guilt and an increased ability to discriminate between safe and unsafe situations. PE should be considered as one of the first-line psychological treatments for service members struggling with combat or operational stress injuries.
References


