Brief Trauma-focused Therapy for Co-morbid Posttraumatic Stress Disorder and Low Back Pain – preliminary results.

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Background

Posttraumatic stress disorder (PTSD) and chronic pain often co-occur and higher levels of pain and disability are found in patients with low back pain (LBP) and co-morbid PTSD. PTSD and pain are mutually maintained, why both conditions may need to be targeted for successful outcome.

Aim & Methods

- 1. To assess the prevalence and impact of PTSD on LBP pain and disability.
- 2. To investigate the effectiveness of additional brief trauma-focused therapy for PTSD, pain and disability compared to treatment-as-usual (TAU).
- A one-year cohort of consecutive patients with LBP referred to the Spine Center was screened for PTSD.
- Patients fulfilling the DSM-IV criteria for PTSD or subclinical PTSD where randomised to either TAU or TAU + brief trauma-focused psychotherapy (6-10 sessions).

Results

In total, 27.6% had experienced a traumatic event and 9% had clinical or sub-clinical PTSD. Patients with PTSD suffered from significantly higher levels of pain (NRS) d = 0.19, p < .01, lower levels of physical functioning (Roland Morris) d = 0.20, p < .01, and health related quality of life (HRQOL) d = 0.21, p < .01.

Conclusion

Follow-up data are still collected. Hence, the results are only preliminary. However, the results are promising for brief trauma-focused therapy for patients with LPB and co-morbid PTSD.



