ثفارض

The 5th International Road Safety and Pediatric Trauma Congress

Shefa Neuroscience Research Center, Tehran, Iran, 20-22 January, 2016

The Neuroscience Journal of Shefaye Khatam

Volume 3, No. 4, Suppl. 3

Poster Presentation

Cognitive Behavioral Treatment of Post Traumatic Stress Disorder (PTSD) After a Car Accident

Maryam Mousavi Nik^{1*}, Mohammad Bagher Saberi Zafarghandi², Ali Assari³

¹Clinical Psychology, Mental Health Research Center, Tehran Institute of Psychiatry, School of Behavioral Sciences and Mental Health, Iran University of Medical Sciences, Tehran, Iran

²Department of Addiction, Mental Health Research Center, Tehran Institute of Psychiatry, School of Behavioral Sciences and Mental Health, Iran University of Medical Sciences, Tehran, Iran

³Department of Urbanism, Pardis Branch, Islamic Azad University, Tehran, Iran

Published: 20 January, 2016

Abstract

Posttraumatic stress disorder (PTSD) is a common response to traumatic events. A cognitive model proposed that PTSD becomes chronic when individuals process the trauma in a way that leads to a sense of serious, current threat. The sense of threat arises as an outcome of excessively negative appraisals of the trauma and its sequel and a disturbance of autobiographical memory. Variations in the negative evaluations and the trauma memory are prevented by a series of problematic behavioral and cognitive strategies. The aim of present study is to examine the efficacy of Cognitive Behavioral Therapy (CBT) intervention following physical injury. A purposive sample of twenty volunteer participants who had car accidents were randomly assigned to experimental (n=10) and control group (n=10). All subjects were assessed using questionnaires designed to establish basic demographic information, levels of functioning and perceptions of the trauma and its impact. The Impact of Event Scale-Revised (IES-R) and Posttraumatic Diagnostic Scale (PDS) were also completed. Experimental group received eight sessions of Cognitive Behavior Therapy (CBT), included education about post-trauma reactions, relaxation training, exposure therapy with cognitive restructuring and instruction for self-directed graduated behavior practice. Pre-assessment was carried for both the group at the beginning of the intervention. Post-assessment was done for both the groups after completing CBT intervention. Third assessment was following up assessment that was done after post-assessment. As predicted by the cognitive model, useful treatment outcome was related to greater changes in dysfunctional posttraumatic cognitions. Some characteristics such as type of trauma, history of previous trauma, or time since the traumatic event was occurred were predicted treatment response. Furthermore, Type of Personality, level of educational and level of socioeconomic status were related to better outcome.

KeyWords: Cognitive Behavior Therapy (CBT), Posttraumatic Stress Disorder (PTSD), Car Accident.

*Corresponding Author: Maryam Mousavi Nik

E-mail: Maryammousavinik@gmmail.com

Corresponding