

Summary of proposed changes to recommendations

Category of intervention	Intervention (page number in marked-up pdf of draft Guideline)	2020 Recommendation	2021 Recommendation
Early prevention intervention for adults within 3 months of a traumatic event	Brief Individual Trauma Processing therapies (pp.15, 117)	<p>Insufficient evidence</p> <p>For adults within the first three months following exposure to a potentially traumatic event, there was insufficient evidence to make a recommendation on brief individual trauma processing therapy.</p>	<p>Research recommendation</p> <p>For adults within the first three months following exposure to a potentially traumatic event, we suggest usual practice in preference to brief individual trauma processing therapy.</p> <p>There is emerging evidence for brief individual trauma processing therapy for adults within the first three months following exposure to a potentially traumatic event, and this could be used in a research context.</p>
Psychological interventions for adults with PTSD	TF-CBT for adults with PTSD delivered via telehealth (videoconferencing) (pp.40, 282-3)	N/A	<p>Conditional</p> <p>For adults with PTSD where face-to-face trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest offering TF-CBT delivered via telehealth.</p>

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			<p>Research recommendation</p> <p>Further research is needed to better understand the factors affecting patient preferences for delivery of face-to-face TF-CBT versus telehealth.</p>
<p>Non-psychological and non-pharmacological interventions for adults with PTSD</p>	<p>Exercise for adults with PTSD (pp.34, 251)</p>	<p>Research recommendation</p> <p>For adults with PTSD we recommend offering TF-CBT, PE, CT, CPT or EMDR in preference to exercise.</p> <p>There is emerging evidence for exercise and this could be used in a research context.</p>	<p>Practice statement</p> <p>The Guideline Development Group supports the use of exercise to promote general wellbeing.</p>
<p>Psychological interventions for adults with PTSD</p>	<p>3MDR for adults with PTSD (pp.27, 207)</p>	<p>N/A</p>	<p>Research recommendation</p> <p>For adults with PTSD we recommend offering TF-CBT, PE, CT, CPT, or EMDR in preference to 3MDR.</p> <p>There is emerging evidence for 3MDR and this could be used in a research context.</p>
<p>Comorbid interventions</p>	<p>TF- CBT for adults with comorbid PTSD and severe mental illness (p.36, 269)</p>	<p>N/A</p>	<p>Research recommendation</p> <p>There is emerging evidence for TF-CBT for adults with comorbid PTSD and severe mental illness,</p>

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			and this could be used in a research context.
	TF- CBT for adults with comorbid PTSD and Alcohol/Substance Use Disorder (pp.37, 265)	N/A	Conditional For adults with comorbid PTSD and Alcohol/Substance Use Disorder, we suggest TF-CBT in preference to treatment as usual.
	Non-TF-CBT for adults with comorbid PTSD and Alcohol/Substance Use Disorder (p.37, 267)	N/A	Conditional For adults with comorbid PTSD and Alcohol/Substance Use disorder, where TF-CBT is unavailable or unacceptable, we suggest non-TF-CBT (Seeking Safety or Integrated CBT).

Please note that the methodology section (p. 293 ff) has been updated to reflect the 2021 update.