

Treatment Recommendations for Adults

Grade Methodology - Key	
Strong Recommendation FOR	Strong Recommendation AGAINST
Conditional Recommendation FOR	Conditional Recommendation AGAINST

Interventions within the first three months of trauma

Universal interventions (for all adults who experience trauma)	Conditional recommendation AGAINST individual psychological debriefing For adults within the first three months of trauma, we suggest providing information, emotional support, and practical assistance in preference to individual psychological debriefing.
	Conditional recommendation AGAINST group psychological debriefing For adults within the first three months of trauma, we suggest providing information, emotional support, and practical assistance in preference to group psychological debriefing.
Indicated interventions (for adults with PTSD symptoms within the first three months of trauma)	Strong recommendation FOR a stepped/collaborative care model For adults with PTSD symptoms within the first three months of trauma, we recommend a stepped/collaborative care model. In this, individuals receive evidence-based care commensurate with the severity and complexity of their need.
	Conditional recommendation FOR trauma-focused CBT For adults with PTSD symptoms within the first three months of trauma, we suggest offering trauma-focused cognitive behavioural therapies (includes prolonged exposure, cognitive processing therapy, cognitive therapy) in preference to doing nothing.
	Conditional recommendation FOR brief eye movement desensitisation and reprocessing (EMDR) For adults with PTSD symptoms within the first three months of trauma, we suggest offering brief EMDR in preference to doing nothing.

Interventions for adults with PTSD

Psychological interventions	Strong recommendation FOR cognitive processing therapy (CPT) For adults with PTSD, we recommend cognitive processing therapy (CPT).
	Strong recommendation FOR cognitive therapy (trauma-focused) (CT) For adults with PTSD, we recommend cognitive therapy (trauma-focused) (CT).
	Strong recommendation FOR EMDR For adults with PTSD, we recommend EMDR.
	Strong recommendation FOR prolonged exposure (PE) For adults with PTSD, we recommend prolonged exposure (PE).
	Strong recommendation FOR trauma-focused CBT For adults with PTSD, we recommend trauma-focused CBT.
	Conditional recommendation FOR guided internet-based trauma-focused CBT For adults with PTSD where trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest guided internet-based trauma-focused CBT.
	Conditional recommendation FOR guided trauma-focused CBT via telehealth (video conferencing) For adults with PTSD where face-to-face trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest offering guided trauma-focused CBT delivered via telehealth.
	Conditional recommendation FOR narrative exposure therapy (NET) For adults with PTSD where trauma is linked to genocide, civil conflict, torture, political detention, or displacement, we suggest narrative exposure therapy (NET).
	Conditional recommendation FOR present-centred therapy (PCT) For adults with PTSD where trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest present-centred therapy (PCT).
Conditional recommendation FOR stress inoculation training (SIT) For adults with PTSD where trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest stress inoculation training (SIT).	
Conditional recommendation FOR trauma-focused CBT (group) For adults with PTSD where individual trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest group trauma-focused CBT.	

Pharmacological interventions	<p>Conditional recommendation FOR SSRIs (sertraline, paroxetine or fluoxetine) or venlafaxine (an SNRI)</p> <p>For adults with PTSD, we suggest SSRIs (sertraline, paroxetine or fluoxetine) or venlafaxine (an SNRI) in circumstances where any of the following applies:</p> <ul style="list-style-type: none"> • The person is unwilling or not in a position to engage in or access recommended psychological therapy (trauma-focused CBT, PE, CT, CPT, EMDR). • The person has a comorbid condition or associated symptoms (e.g. clinically significant depression and high levels of dissociation) where SSRIs are indicated. • The person’s circumstances are not sufficiently stable to commence recommended psychological therapy (for example as a result of significant ongoing life stress such as domestic violence). • The person has not gained significant benefit from recommended psychological therapy. • There is a significant wait time before psychological treatment is available.
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Interventions for adults with comorbid PTSD

Psychological interventions (for comorbid PTSD and Substance Use Disorder)	<p>Conditional recommendation FOR trauma-focused CBT</p> <p>For adults with comorbid PTSD and Substance Use Disorder, we suggest trauma-focused CBT in preference to treatment as usual.</p>
	<p>Conditional recommendation FOR non-trauma-focused CBT</p> <p>For adults with comorbid PTSD and Substance Use Disorder, where trauma-focused CBT is unavailable or unacceptable, we suggest non-trauma-focused CBT (Seeking Safety or Integrated CBT).</p>

Alternative treatment delivery modalities

Psychological interventions (for adults with PTSD)	<p>Conditional recommendation FOR guided internet-based trauma-focused CBT</p> <p>For adults with PTSD where trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest guided internet-based trauma-focused CBT.</p>
	<p>Conditional recommendation FOR trauma-focused CBT via telehealth (video conferencing)</p> <p>For adults with PTSD where face-to-face trauma-focused cognitive behavioural therapies or EMDR are unavailable or unacceptable, we suggest offering trauma-focused CBT delivered via telehealth.</p>

View the [Australian PTSD Guidelines](http://app.magicapp.org) (app.magicapp.org) for full details of the research studies included in the systematic review, summaries of the evidence for each research question and the rationale behind recommendations.

Please visit [Phoenix Australia](http://phoenixaustralia.org/australian-guidelines-for-ptsd) (phoenixaustralia.org/australian-guidelines-for-ptsd) for further supporting information and helpful resources.