Childhood Trauma: An Analysis Of Associated Co-Morbidities And Various Psychotherapies

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Research Questions

What are the effects of Adverse Childhood Experiences (ACEs) and childhood trauma on children with PTSD? How are various treatment modalities commonly used to treat PTSD? In children who are victims of trauma and/or adults who suffer from childhood maltreatment, is CBT, EMDR, CPT, or prolonged exposure the best therapy to treat their PTSD?

Literature Review

Effects of trauma

- Research shows that the timing in which the trauma is experienced changes with the degree of adverse events. Repetitive retraumatization and transforming the dysfunctional cognitions or thoughts about the traumatic event.
- "Gold standard" for psychopathology.
- Eye Movement Desensitization and Reprocessing (EMDR)
  - 16-40% of children treated with CBT still meet diagnostic criteria for PTSD post-treatment.
- Psycho-education about the trauma, preparation of the target memory, desensitization of that specific memory, identifying various body sensations, and guided visualization.
- Cognitively-Based Treatment
  - Two studies were performed on event or memory with disintegrating the strong negative thoughts associated with that memory through homework.
  - Prolonged exposure therapy was found to be effective for children who are not experiencing global lockdown.

Comparing psychotherapies in children

- A systematic review of 758 children compared exposure therapy, CBT, and EMDR found improvement of PTSD symptoms with each type of therapy. The most improved was seen with CBT. Objective measures of improvement demonstrated that EMDR was more effective than CBT in reducing symptoms.

Applicability to Clinical Practice

Although the research seems to favor CBT as a first line treatment for children with PTSD, it is important to keep in mind that different factors such as age, gender, and cultural background can influence the treatment response. Therefore, it is crucial for therapists to remain open-minded and flexible in their treatment approaches.

Another important factor is to question children while the parent is not in the room, taking into account the unique experiences and needs of each child. It is also important to consider the long-term effects of childhood trauma and how ACEs can impact an individual's development throughout their lifetime. Mental health professionals need to be aware of the various treatment options that can be effective for children with PTSD, including CBT, EMDR, and prolonged exposure therapy. Furthermore, it is essential to assess the child's readiness and willingness to engage in these treatments, as well as their potential for improvement and resilience.