

Post Traumatic Stress Disorder (PTSD)

Pharmacotherapy

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Nice to “meet” you!

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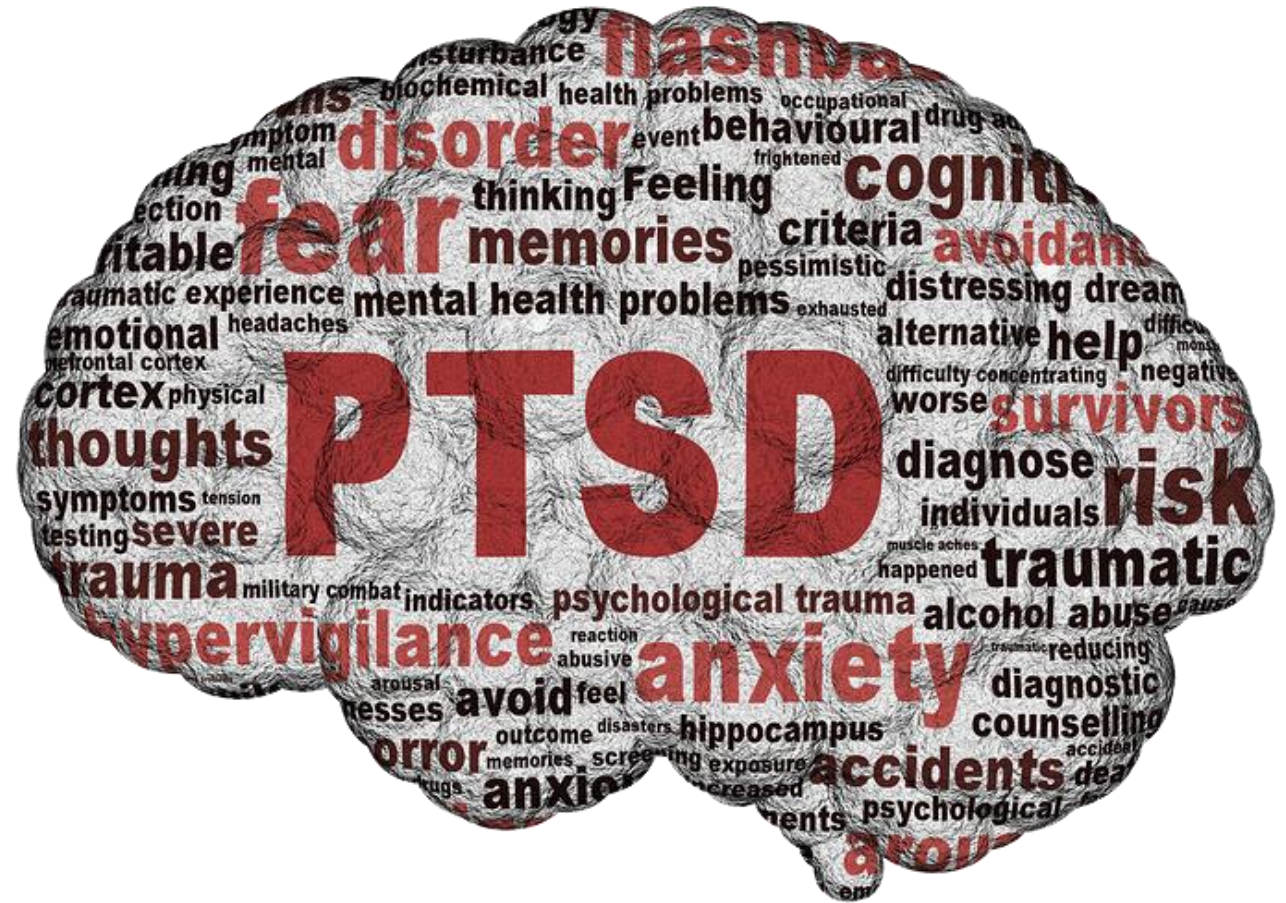
Pronouns: they/them/theirs



Objectives

Understand	Understand the etiology and pathophysiology of PTSD
Recognize	Recognize the clinical presentation and review the DSM-5 diagnostic criteria for PTSD
Summarize	Summarize both non-pharmacologic and pharmacologic treatments for PTSD
Evaluate	Evaluate a patient case and develop an initial treatment recommendation for treating PTSD

EVIDENCE- BASED TREATMENTS



Treatment Considerations

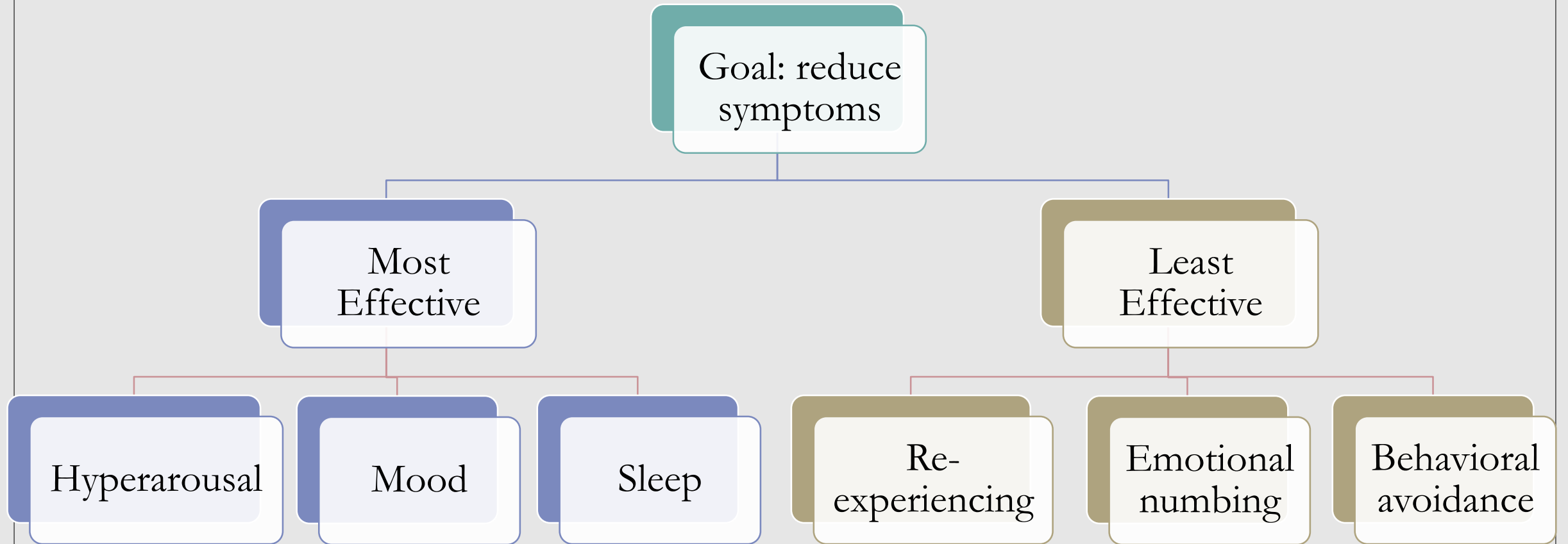
Psychotherapy

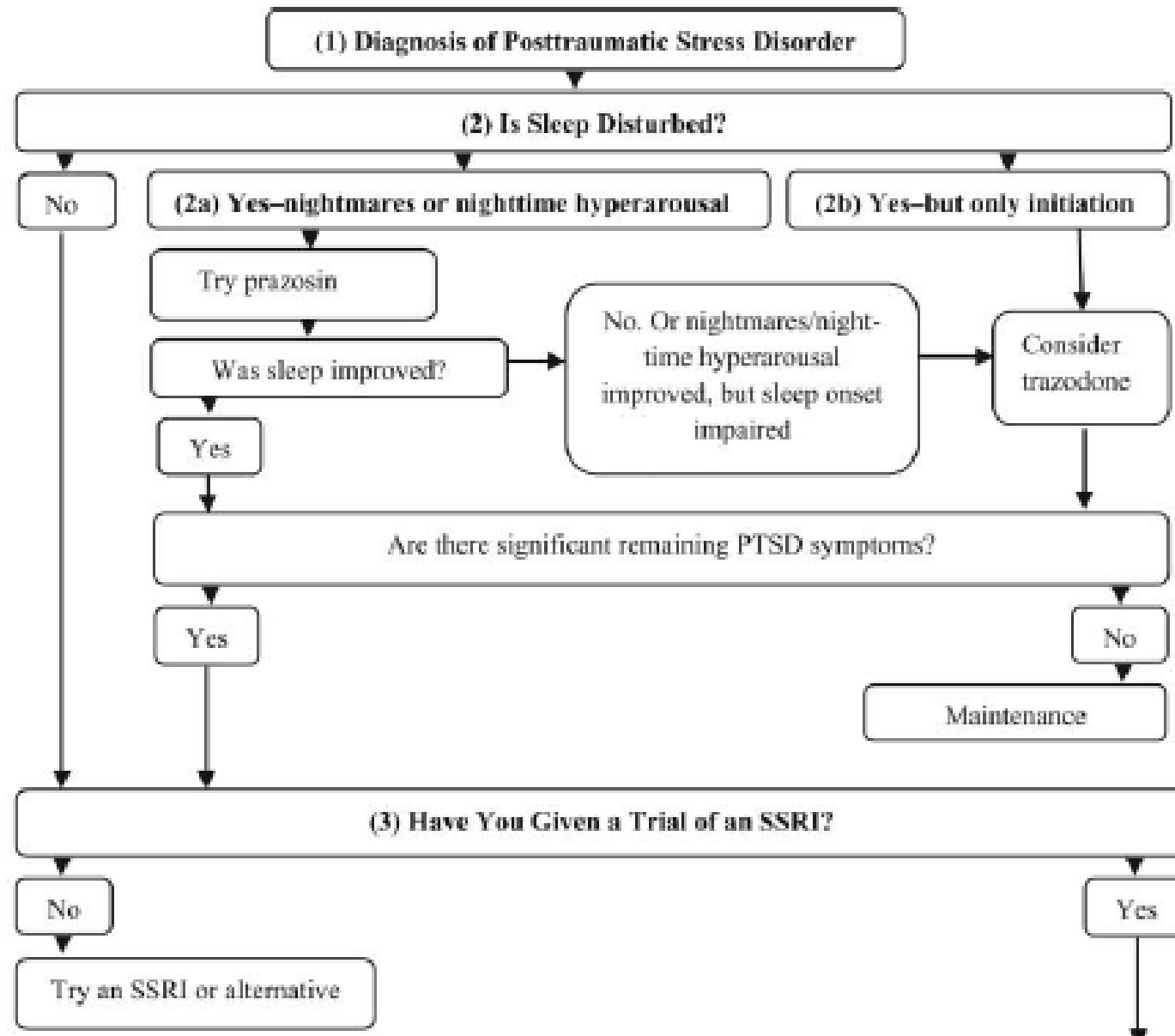
- Exposure therapy
- Cognitive processing therapy
- Eye movement desensitizing and reprocessing (EMDR)

Pharmacotherapy

- SSRIs
- SNRIs
- Trazodone
- Prazosin
- Atypical antipsychotics

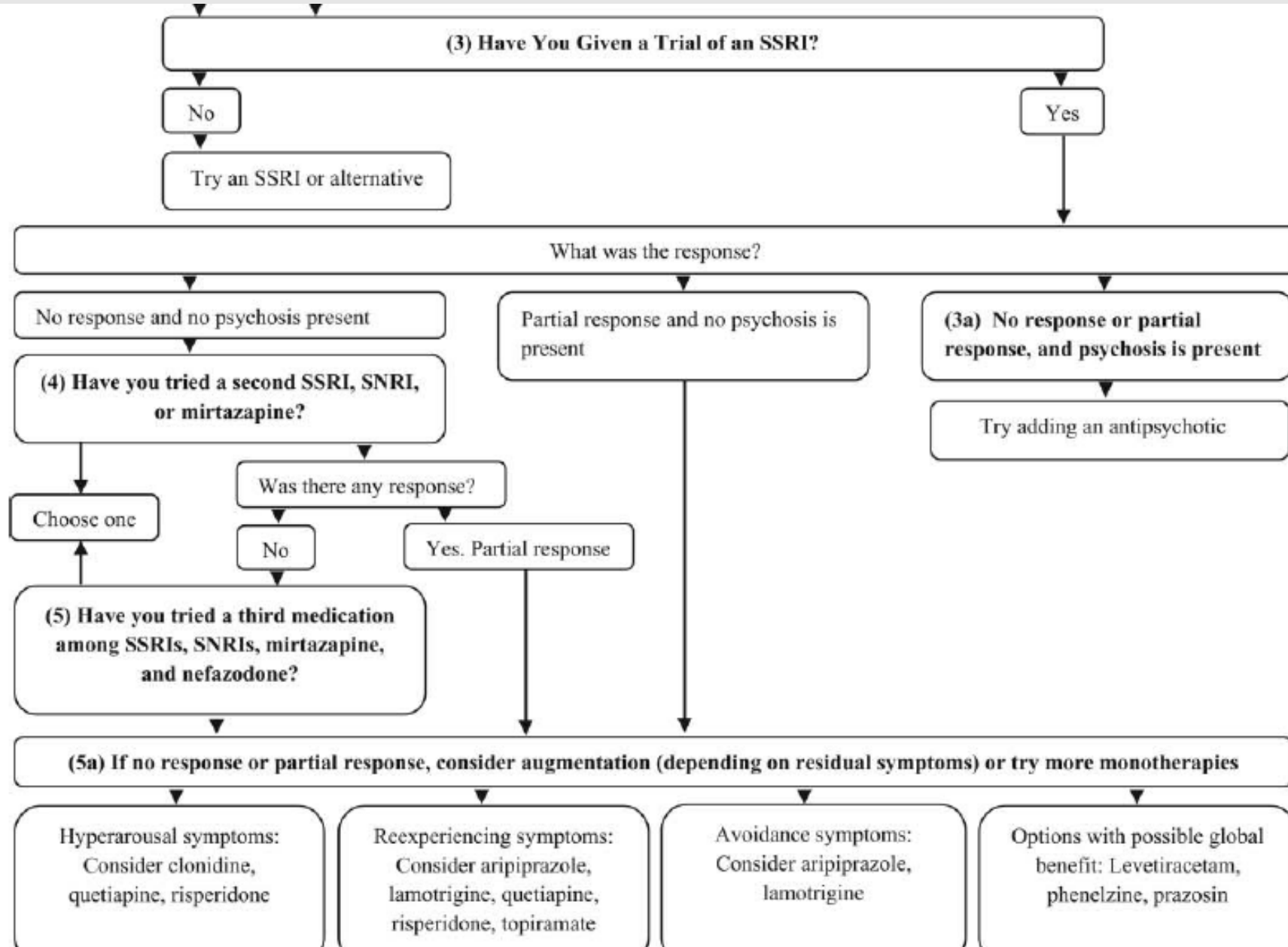
Pharmacotherapy Options





Treating Sleep Symptoms

Medication	MOA	Side Effects	Benefits	Dosing
Prazosin	<ul style="list-style-type: none"> Alpha-1 agonist Inhibits “fight or flight” response 	<ul style="list-style-type: none"> Orthostatic hypotension (1st dose effect) Nasal congestion 	<ul style="list-style-type: none"> Nightmares Hyperarousal 	<u>Titration:</u> <ul style="list-style-type: none"> 1mg at bedtime x3 days, then 2mg at bedtime x3 days, then 3mg at bedtime x 3 days, then 5 mg at bedtime
Trazodone	<ul style="list-style-type: none"> Activity at 5-HT, NE, H, alpha-1 receptors 	<ul style="list-style-type: none"> Sedation Dry eyes Priapism 	<ul style="list-style-type: none"> Sleep initiation 	<ul style="list-style-type: none"> 25 to 200 mg at bedtime

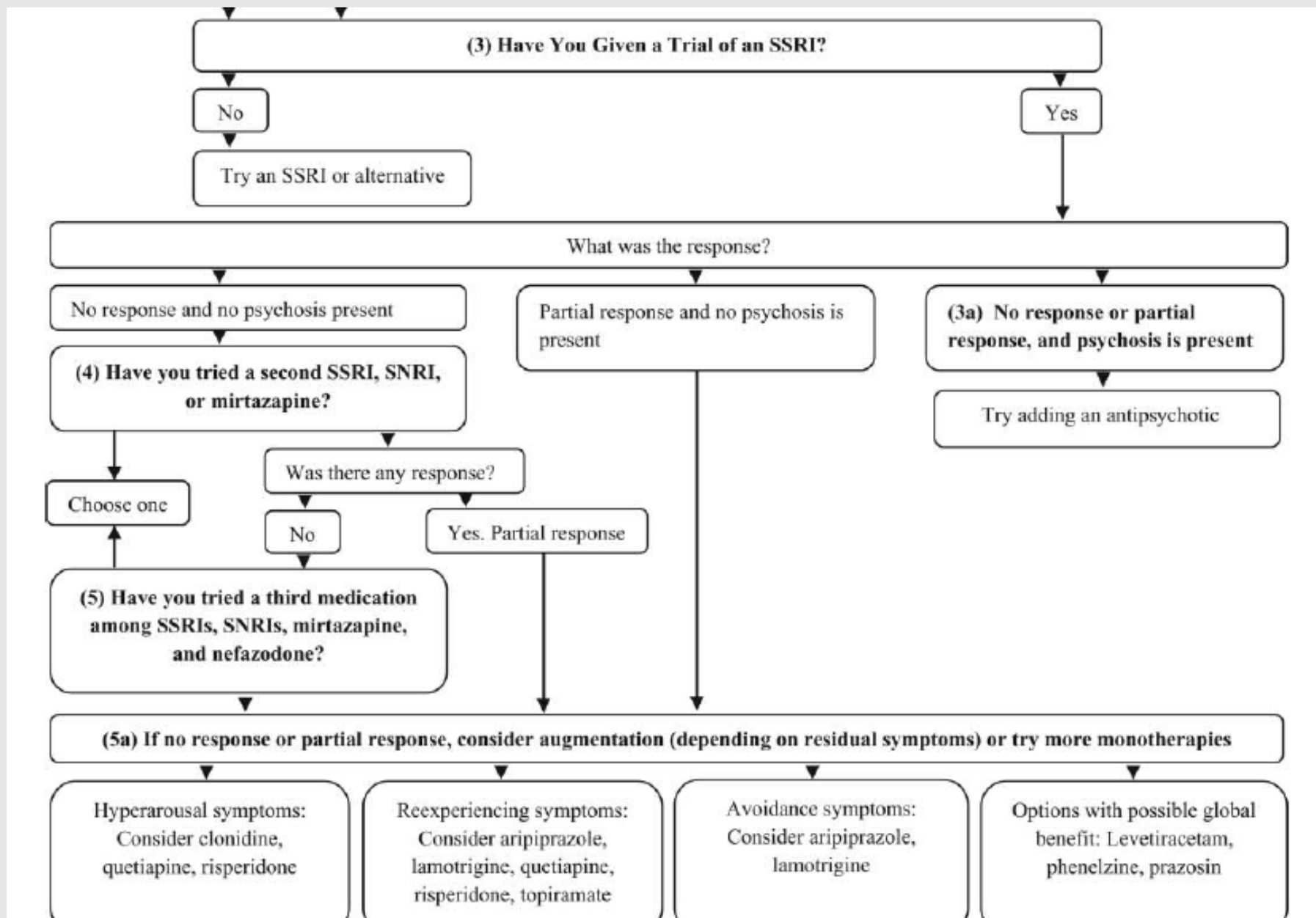


Treating the Mood Symptoms

Selective Serotonin Reuptake Inhibitors (SSRIs)				
Medication	Clinical Pearls	Side Effects	Benefits	Dosing
Paroxetine	<ul style="list-style-type: none"> Avoid in elderly d/t anticholinergic effects Short $t_{1/2}$ 	<ul style="list-style-type: none"> Sexual dysfunction Sedation or insomnia GI upset Serotonin syndrome (rare) Increased risk for suicidal ideation in younger patients 	<ul style="list-style-type: none"> Treat comorbid depression and anxiety 	<ul style="list-style-type: none"> Start at low end of dosing range for tolerability Titrate until therapeutic response achieved
Fluoxetine	<ul style="list-style-type: none"> “Energizing” Long $t_{1/2}$ 			
Sertraline	<ul style="list-style-type: none"> Diarrhea initially, generally improves within 2 weeks 			
Citalopram	<ul style="list-style-type: none"> Well-tolerated Requires EKG monitoring 			
Escitalopram				

Treating the Mood Symptoms

Serotonin and Norepinephrine Reuptake Inhibitors (SNRIs)				
Medication	Clinical Pearls	Side Effects	Benefits	Dosing
Venlafaxine	<ul style="list-style-type: none">• Short $t_{1/2}$	<ul style="list-style-type: none">• Same as SSRIs• Increased BP• Diaphoresis	<ul style="list-style-type: none">• Treat comorbid pain	<ul style="list-style-type: none">• Start at low end of dosing range for tolerability• Titrate until therapeutic response achieved



Adjunctive Treatment

Atypical Antipsychotics			
Medication	Side Effects	Benefits	Dosing
Aripiprazole Quetiapine Risperidone	<ul style="list-style-type: none">• Metabolic syndrome• Extrapiramidal symptoms• Increased risk of death in patients with dementia-related psychosis	<ul style="list-style-type: none">• Treat positive psychotic symptoms (hallucinations, delusions)• Treat re-experiencing (flashbacks)• Treat hyperarousal	<ul style="list-style-type: none">• Start at low end of dosing range for tolerability• Titrate until therapeutic response achieved

Benzodiazepines

No long-term improvement in PTSD symptoms



Prevents psychotherapy progress

Pharmacologic form of avoidance



Significant risk associated

Abuse

Falls risk

Sedation

Rebound
symptoms upon
discontinuation

2017 VA/DoD Guidelines

Medication Monotherapy for Treatment of PTSD					
Quality of Evidence	Recommended For	Suggest For	Suggest Against	Recommend Against	No Recommendation For or Against
Moderate	Sertraline Paroxetine Fluoxetine Venlafaxine		Prazosin (excluding the treatment of PTSD associated nightmares)		Prazosin for the treatment of PTSD associated nightmares

Key Takeaways:

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