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Many Veterans Not Getting Enough Treatment for PTSD
Barriers to care may prevent many U.S. Veterans from receiving full course of PTSD treatment

SAN FRANCISCO—February 8, 2010—Although the Department of Veteran Affairs is rolling out treatments nationwide as fast as possible to adequately provide for newly diagnosed PTSD patients, there are still significant barriers to veterans getting a full course of PTSD treatment. The study is published in the latest issue of the *Journal of Traumatic Stress*.

More than 230,000 Iraq and Afghanistan war veterans sought treatment for the first time at VA healthcare facilities nationwide between 2002 and 2008. More than 20 percent of these veterans, almost 50,000, received a new PTSD diagnosis. Treatments that have been shown to be effective for PTSD typically require 10-12 weekly sessions. VA follows these recommendations, however, fewer than ten percent of those Iraq and Afghanistan veterans with newly diagnosed PTSD complete this recommended “dose” of PTSD treatment. When the timeframe was expanded to a year rather than four months, fewer than thirty percent of the veterans completed the recommended course of treatment.

The study showed that there are groups of veterans that are less likely to receive adequate care than others, such as male veterans (compared to female veterans), veterans under twenty-five years old, veterans who received their PTSD diagnoses from primary care clinics (requiring referral to a mental health program), and veterans living in rural areas.

Dr. Karen Seal, head researcher for the study and practitioner at the San Francisco Veteran Affairs Medical Center, says that while the majority of veterans with PTSD attend at least one mental health follow-up visit, there are still substantial barriers to care that prevent the majority from completing what is considered an adequate course of PTSD treatment. Many of obstacles are system-level or are personal barriers resulting in lack of patient follow-up on appointments, etc.

The study doesn't account for care that veterans may be receiving outside of the VA, such as care received at Vet Centers or other community-based clinics. The study concludes there is further need for the VA and other healthcare systems to develop new

and innovative ways to overcome barriers to care in delivering these effective mental health treatments. The success of VA's most recent efforts to enhance PTSD care cannot be determined from the study's findings, which cover the period through 2008 only.

This study is published in the February 2010 issue of the *Journal of Traumatic Stress*. Media wishing to receive a PDF of this article may contact scholarlynews@wiley.com.

Dr. Karen Seal is an Associate Professor of Medicine and Psychiatry at University of California San Francisco and the Co-Director of the OEF/OIF Integrated Care Clinic at the SFVAMC, which provides integrated primary and mental health care to veterans of Operation Enduring Freedom (OEF, Afghanistan) and Operation Iraqi Freedom (OIF, Iraq). Dr. Seal is the recipient of several awards to investigate the prevalence of mental health disorders among veterans of Iraq and Afghanistan and to test new interventions to overcome barriers to mental health care among combat veterans. She can be reached for questions at karen.seal@va.gov.



The Journal of Traumatic Stress (JTS), the official publication for the International Society for Traumatic Stress Studies, is an interdisciplinary forum for the publication of peer-reviewed original papers on biopsychosocial aspects of trauma. Papers focus on theoretical formulations, research, treatment, prevention education/training, and legal and policy concerns. *Journal of Traumatic Stress* serves as a primary reference for professionals who study and treat people exposed to highly stressful and traumatic events (directly or through their occupational roles), such as war, disaster, accident, violence or abuse (criminal or familial), hostage-taking, or life-threatening illness. The journal publishes original articles, brief reports, review papers, commentaries, and, from time to time, special issues devoted to a single topic.

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