

Management of Psychosocial Responses to Bio-terrorism

Areas of Focus	Acute Stress Disorder	Acute PTSD	Chronic PTSD
Onset Following Trauma	Within 26-days or Anytime	Immediately or Anytime	Immediately or Anytime
Duration	2-30 days	Up to 3-months	3-months years
Screening Questions- SNAP	<ul style="list-style-type: none"> • Startle- Do you find yourself jumpier or more easily startled? • Numbness- Are you less emotional than you would expect? • Arousal- Are you having trouble sleeping or concentrating? • Persistence- Are you having frequent or unwelcome thoughts about the event? Are you having nightmares? 		
Diagnostic Criteria (PTSD)	<ul style="list-style-type: none"> • Experienced horrific event -direct or indirect • Persistent symptoms (prolonged over 3-months) • Re-experienced event • Avoidant behaviors • Aroused responses to negatively conditioned elements of the experience • Co-Morbidity: 2 Question Depression Screen, Alcoholism & Substance Abuse-CAGE Questions 		
Rating Scales	<ul style="list-style-type: none"> • Clinically Administered PTSD Scale Part 2 (CAPS-2) • Davidson Trauma Scale (DTS) • Impact of Event Scale (IES) • Critical Global Impressions (CGI-S) and (CGI-I) 		
Stress Disorder Treatments	<p><i>Exposure Therapy</i>- Education to normalize symptoms</p> <ul style="list-style-type: none"> • Calm Breathing- to teach how to calm self when tense or stressed • Putting the experience in perspective – recounting trauma memories • Approaching safe situations – those that have been avoided because they are reminiscent of trauma <p><i>Cognitive restructuring</i></p> <ul style="list-style-type: none"> • To help survivors identify & evaluate their perceptions about the trauma, about how dangerous the world is, and about their ability to cope with stress <p><i>Cognitive Behavior Therapy</i> - Reinforcing the half-full glass</p> <ul style="list-style-type: none"> • Show the patient how thoughts affect his/her feelings • Awareness of negative thoughts that distress or are self-defeating • Challenge negative thoughts and substitute positive ones 		
Medications	<ul style="list-style-type: none"> • Few high quality studies, none in disaster per se • If symptoms warrant: <i>SSRI, TCA, MAOI, Benzodiazepine</i> 		