# Article information:

Cognitive therapy for post-traumatic stress disorder: development and evaluation - ScienceDirect  
<https://www.sciencedirect.com/science/article/pii/S0005796704000889?casa_token=-S9ZaZcvXh0AAAAA%3ALxLg1APrFEobJIYjq9THu60bTvLqe2tSdPqX6FF1daLscgq_3SguHth89JH_KaC7u_ux0FesfTaJ>

# Article summary:

1. Cognitive therapy (CT) for post-traumatic stress disorder (PTSD) based on a recent cognitive model led to highly significant improvement in symptoms of PTSD, depression, and anxiety in a consecutive case series of 20 patients.

2. A subsequent randomized controlled trial comparing CT and a 3-month waitlist condition showed large reductions in PTSD symptoms, disability, depression, and anxiety with CT, while the waitlist group did not improve.

3. Treatment gains were well maintained at 6-month follow-up, and CT was highly acceptable with an overall dropout rate of only 3%. Patient characteristics such as comorbidity or type of trauma did not predict treatment response, but low educational attainment and low socioeconomic status were related to better outcomes.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article "Cognitive therapy for post-traumatic stress disorder: development and evaluation" presents a cognitive therapy program for PTSD based on a recent cognitive model. The study reports highly significant improvement in symptoms of PTSD, depression, and anxiety in 20 patients treated with CT. A subsequent randomized controlled trial compared CT with a waitlist condition and found large reductions in PTSD symptoms, disability, depression, and anxiety in the CT group. Treatment gains were well maintained at 6-month follow-up.

While the study provides valuable insights into the effectiveness of cognitive therapy for PTSD, there are some potential biases and limitations to consider. Firstly, the study only included a small sample size of 20 patients in the consecutive case series and 14 patients in the randomized controlled trial. This limits the generalizability of the findings to larger populations.

Secondly, while the study reports high treatment acceptability with an overall dropout rate of only 3%, it does not provide information on why patients dropped out or whether they experienced any adverse effects from treatment. This is an important consideration as trauma-focused CBT can be emotionally challenging for some patients.

Thirdly, while the study reports good treatment outcomes related to greater changes in dysfunctional post-traumatic cognitions as predicted by the cognitive model, it does not explore alternative explanations for these changes or consider other factors that may have contributed to treatment success.

Finally, while the study provides evidence for the effectiveness of cognitive therapy for PTSD compared to a waitlist condition, it does not compare its effectiveness to other established treatments such as prolonged exposure or cognitive processing therapy.

Overall, while this study provides valuable insights into the effectiveness of cognitive therapy for PTSD based on a recent cognitive model, it is important to consider its limitations and potential biases when interpreting its findings. Further research is needed to confirm these findings and compare them with other established treatments for PTSD.

# Topics for further research:

* Adverse effects of trauma-focused CBT for PTSD
* Alternative explanations for changes in dysfunctional post-traumatic cognitions
* Comparison of cognitive therapy with other established treatments for PTSD
* Generalizability of cognitive therapy findings to larger populations
* Reasons for dropout in cognitive therapy for PTSD
* Long-term maintenance of treatment gains in cognitive therapy for PTSD

# Report location:

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