Shared Decision-Making for PTSD

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Shared Decision Making (SDM)

Medical Conditions

Mental Health Conditions

PTSD

2402 SDM + Cancer

32 SDM + Mental Health

3 SDM + PTSD
Shared Decision Making (SDM)

- **What is SDM?**
- **Why is SDM important?**
- **How can I do SDM?**
What is Shared Decision-Making?
Shared decision-making (SDM) is an approach in which providers and patients communicate together using the best available evidence to make decisions.
## Decision Aids

Tools that help people understand treatment options, weigh benefits and risks, & participate in decisions.

<table>
<thead>
<tr>
<th>DECISION AID (tool)</th>
<th>SHARED DECISION-MAKING (process)</th>
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[Image of a tablet and two women conversing]
SDM is not:

- Giving your patient a brochure
- Telling your patient about only 1 option
- Doing whatever your patient wants
- Forcing your patient to be involved in decisions
Choice Talk
Convey that choice exists

Option Talk
Inform patients of treatment options in detail

Decision Talk
Help patients consider what matters most

Where SDM is most helpful

SDM is best for preference sensitive decisions

- more than one reasonable path forward exists
- different paths have unique benefits and risks

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First line PTSD treatments according to VA/DoD Clinical Practice Guideline (2010).
Why is Shared Decision-Making Important?
Veterans Health Administration

The patient, and whenever possible the patient’s family, should be involved in treatment decisions

Uniform Mental Health Services Handbook 1160.01

Institute of Medicine

The healthcare system should be able to accommodate differences in patients’ preferences and encourage shared decision making.

Improving the Quality of Health Care for Mental and Substance-Use Conditions, 2006
Patient Preferences for Decision-Making

Survey of 301 adults with PTSD symptoms; Harik, Hundt, Bernardy, Norman, & Hamblen, 2016
Benefits of Patient Involvement

- Promote treatment engagement
- Improve treatment outcomes
- Increase knowledge
- Improve cost-effectiveness
- Increased liability protection
Aren’t we already doing this
The Evidence

Differences between SDM patients and usual care Patients

Lack of SDM training and resources

Providers believe they are doing SDM when they are not

Most patients prefer therapy, but most receive medications
How do I engage patients in Shared Decision-Making?
Provider Actions

- Orient
- Offer choice
- Justify choice
- Assess preferred involvement
Who else do you want to be involved in the decision about which PTSD treatment you receive?

- Spouse/Partner: 41%
- PTSD Patient: 20%
- Other Family: 13%
- Friend: 6%

Harik, Hundt, Bernardy, Norman, & Hamblen, 2016
Provider Actions

- List Options
- Describe Options/Use Decision Aid
- Summarize
What do patients want to know about PTSD treatment?

✓ How well the treatment works
✓ How long benefits last

Whether I will be asked to talk about my trauma
Whether I will be asked to do homework
For every 100 people who receive the treatment, how many will no longer have PTSD after about 3 months?

- **CPT/PE/EMDR**: 53
- **SSRIs**: 42
- **SIT**: 20
- **No Treatment**: 9

PTSD
TREATMENT DECISION AID:
THE CHOICE IS YOURS

LEARN
Learn about PTSD and how this decision aid can help

COMPARE
Compare effective PTSD treatment options

ACT
Take action to start treatment

National Center for PTSD

Coming Soon! www ptsd va gov apps decision aid
Prolonged Exposure

What type of treatment is this?

Prolonged Exposure (PE) is a psychotherapy for PTSD. It is one specific type of Cognitive Behavioral Therapy. PE teaches you to gradually approach trauma-related memories, feelings, and situations that you have been avoiding since your trauma. By confronting these challenges, you can actually decrease your PTSD symptoms.

What is Prolonged Exposure?
Watch this video for a more in-depth description.

How does it work?

People with PTSD often try to avoid anything that reminds them of the trauma. This can help you feel better in the moment, but not in the long term. Avoiding these feelings and situations actually keeps you from recovering from PTSD. PE works by helping you face your fears. By talking about the details of the trauma and by confronting safe situations that you have been avoiding, you can decrease your PTSD symptoms and regain more control of your life.
VIDEO GALLERY

Take the mystery out of PTSD treatment. These providers will tell you what to expect in clear and simple language.

Cognitive Processing Therapy (CPT)

What type of treatment is this?  

How does it work?  

What can I expect?  

Will I need to talk about my trauma?  

Is it effective?  

Listen to how a person was helped
# Treatment Comparison Chart

## Psychotherapy vs. Medication

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<th></th>
<th>Cognitive Processing Therapy</th>
<th>Prolonged Exposure</th>
<th>SSRI/SNRI</th>
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| **What type of treatment is this?** | Psychotherapy (a type of trauma-focused CBT) | Psychotherapy (a type of trauma-focused CBT) | Antidepressant medications:  
  - SSRI: Prozac, Paxil & Zoloft  
  - SNRI: Effexor |
| **How does it work?** | Teaches you to reframe negative thoughts about the trauma | Teaches you how to gain control by facing your fears | Restores the balance of naturally occurring chemicals in your brain |
| **What will I do?**  | • Talk about your thoughts  
  • Writing assignments and worksheets | • Talk about the trauma  
  • Start doing safe things you have been avoiding | Take a pill at regular time(s) each day |
| **Is it effective?**  | Yes                          | Yes                | Yes                |
| **How long does it last?** | Weekly sessions for around 3 months | Weekly sessions for around 3 months | Variable (symptoms may return if you stop taking the medication) |
FAQs

I have questions about...

How to get started

How do I know if I am ready for PTSD treatment?

Which PTSD treatments are most effective?

What PTSD treatments are offered at the VA?

How do I find a provider?

Can I schedule my treatment visits after hours or on weekends?

What if I live far away from the VA?

How much does treatment cost?

Can I do psychotherapy and medications at the same time?

What treatment will be like

How long does treatment last?

Will I need to practice anything between sessions?
Provider Actions

☐ Help patient consider needs/values

☐ Assess decision-making needs

☐ Elicit treatment preference (or defer)

☐ Offer review
How much time do you want to spend talking about PTSD treatment options?

- 30-60 min. (64%)
- <30 min. (11%)
- 60 min. (25%)

How much time would you need to consider your options?

- None (19%)
- <1 week (31%)
- 1-3 days (50%)

Harik, Hundt, Bernardy, Norman, & Hamblen, 2016

**Choice Talk**
Convey that choice exists

**Option Talk**
Inform patients of treatment options in detail

**Decision Talk**
Help patients consider what matters most

**What if my patient doesn’t want to be involved?**

**Do I have to tell my patients about all options?**

**Can I share my opinion?**
Questions?

Thank you!

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FOR PROVIDERS WHO TREAT VETERANS

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<td>PTSD: From Neurobiology to Treatment</td>
<td>John Krystal, MD</td>
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<td>October 19</td>
<td>Treating Anger and Aggression in Populations with PTSD</td>
<td>Leslie Morland, PhD</td>
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<td>November 16</td>
<td>Cannabis and PTSD</td>
<td>Marcel Bonn-Miller, PhD</td>
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<td>December 21</td>
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