

Can early counselling prevent post traumatic stress induced by heart attacks?

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A randomized controlled trial published in the current issue of *Psychotherapy and Psychosomatics* indicates that early counseling has a very limited role in preventing distress after heart attacks. Acute coronary syndrome (ACS)-induced posttraumatic stress disorder (PTSD) and clinically significant PTSD symptoms are found in 4 and 12 percent of patients, respectively. Hence, this randomized-controlled trial aimed to test whether early trauma-focused counseling with a psychological first-aid approach prevents the incidence of PTSD symptoms in patients with high distress during ACS.

Within 48 hours of hospital admission, 190 [patients](#) with high distress during ACS were randomized to a single-session intervention of either trauma-focused counseling or an active control intervention targeting the general role of stress in patients with heart disease. Results showed that in patients at risk to develop ACS-induced PTSD, trauma-focused counseling showed no benefit for the prevention of clinician-rated PTSD/PTSS when controlled to an active control intervention at 3 months of follow-up. Specifically, the authors found neither statistical nor clinical evidence (effect size 0.13) that a single session of individual trauma-focused counseling was more effective than stress counseling for the prevention of the primary outcome interviewer-rated PTSS. Trauma-focused counseling did also no better than the active control intervention at reducing scores of the individual PTSD symptom clusters and the prevalence of a psychiatric diagnosis of PTSD. Trial results were also negative in terms of secondary outcomes self-rated PTSS, depressive symptoms, and global psychological distress, although different from findings for interviewer-rated posttraumatic stress.

In this negative trial, the authors did not find benefits for trauma-focused counseling when compared with an active control [intervention](#). Nonetheless, in distressed ACS patients,

individual, single-session, early psychological counseling shows potential as a means to prevent posttraumatic responses, but trauma-focused early treatments should probably be avoided.

More information: Roland von Känel et al. Early Psychological Counseling for the Prevention of Posttraumatic Stress Induced by Acute Coronary Syndrome: The MI-SPRINT Randomized Controlled Trial, *Psychotherapy and Psychosomatics* (2018). [DOI: 10.1159/000486099](https://doi.org/10.1159/000486099)

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