

Posttraumatic Stress Disorder: Definition



Posttraumatic stress disorder (PTSD) is an anxiety disorder that a person may develop after experiencing or witnessing an extreme, overwhelming traumatic event during which s/he felt intense fear, helplessness, or horror.

Posttraumatic Stress Disorder: Trauma



A trauma is an intensely stressful event during which a person suffers serious harm or the threat of serious harm or death or witnesses an event during which another person (or persons) is killed, seriously injured, or threatened.

Posttraumatic Stress Disorder: Trauma Types

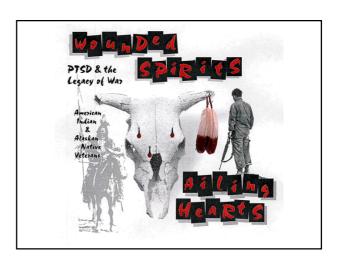


- Abuse: mental, physical, sexual, verbal (i.e., sexual and/or violent content)
- Catastrophe: harmful and fatal accidents, natural disasters, terrorism
- Violent attack: animal attack, assault, battery, domestic violence, rape
- War, battle, and combat: death, explosion, gunfire

Posttraumatic Stress Disorder: Prevalence



The literature reveals that traumatic events – the etiological stressor central to the diagnosis of PTSD -- are not random, vary in frequency across population subgroups, and are related to the conditional risk for this disorder.



American Indian Vietnam Veterans Project



- Congressionally mandated replication of the National Vietnam Veterans Readjustment Study (Kulka et al, 1989)
- Department of Veterans Affairs-sponsored, cross-sectional study of 621 American Indian Vietnam theater military veterans

American Indian Vietnam Veterans Project: Design



- Two reservation-based, tribal communities: Southwest and Northern Plains
- Representative samples of tribally enrolled, male, Vietnam theater military veterans, residing within or near (50 miles) of reservation boundaries

Relevant Publications



Beals J, Holmes T, Ashcraft M, Fairbank J, Friedman M, Jones M, Schlenger W, Shore J, Manson SM. A comparison of the prevalence of post-traumatic stress disorder across five racially and ethnically distinct samples of Vietnam theater veterans. *Journal of Traumatic Stress*, 2002; 15(2): 89-97.

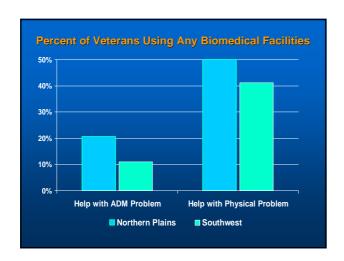
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Prevalence of PTSD 40.0% 40.0% 20.0% 10.0% Northern Plains Hispanic Black White

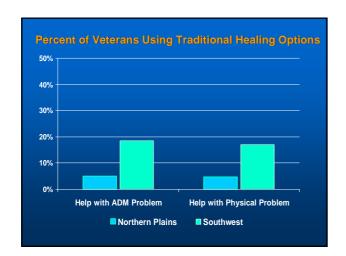
Relevant Publications

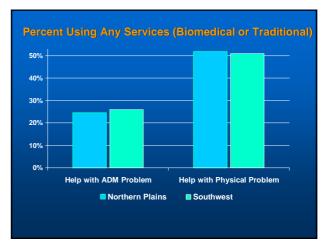


Gurley D, Novins DK, Jones MC, Beals J, Shore JH, Manson SM. Comparative use of biomedical services and traditional healing options by American Indian veterans. *Psychiatric Services*, 2001; 52(1): 68-74.











AI-SUPERPFP



- 5 year, \$7.2 million NIMH-sponsored study
- Large community-based investigation of the epidemiology of major mental illness employing DSM-IIIR and DSM-IV criteria
- Multi-method approach to estimating service utilization patterns and rates

AI-SUPERPFP: Design



- Enrolled members of a Northern Plains and a Southwest tribe who were 15-54 years old, lived on or within 20 miles of their reservations (N=3,180)
- Stratified random sampling of tribal rolls by age (4 categories) and gender (2 categories)
- Data collected between 1997 and 1999

Relevant Publications



Manson SM, Beals J, Klein S, Croy C, et al. The social epidemiology of trauma in two American Indian reservation populations. American Journal of Public Health, 2005; 95(5): 851-859.

AI-SUPERPFP: Results



Lifetime exposure to at least one traumatic event reached 69.8% among American Indian men.

AI-SUPERPFP: Results



- The National Comorbidity Study estimated the lifetime prevalence of exposure to any trauma for US men at 60.7%.
- Australian National Mental Health Survey using methods akin to the NCS, reported remarkably similar lifetime rates: 64.6% for men.

Relevant Publications



Beals J, Manson SM, Whitesell NR, Spicer P, Novins DK, Mitchell CM, et al. Prevalence of DSM-IV disorders and attendant help-seeking in two American Indian reservation populations. Archives of General Psychiatry, 2005; 62: 99-108.



Manson SM, Beals J, Klein S, Croy C, et al. The prevalence of Post-traumatic Stress Disorder in two American Indian reservation populations. Archives of General Psychiatry. In press.

AI-SUPERPFP: Results



- In AI-SUPERPFP, 9.6% of men were diagnosed with lifetime DSM-IV PTSD.
- The Detroit Area Survey estimated the lifetime prevalence of DSM-IV PTSD at 9.5% for men.

AI-SUPERPFP



- The NCS estimated that 5% of men qualified for a DSM-III-R PTSD.
- The earlier Epidemiological Catchment Area Survey found that less than 1% of men had experienced PTSD in their lifetimes.



Relevant Publications



■ Libby AM, Orton HD, Novins DK, Beals J, Manson SM, et al. Childhood physical and sexual abuse and subsequent depressive and anxiety disorders for American Indians. *Psychological Medicine*, 2005; 34: 1-12.

Relevant Publications



Libby AM, Orton HD, Novins DK, Spicer P, Buchwald D, Manson SM, et al. Childhood abuse and lifetime alcohol and drug disorders for American Indians. Journal of Studies on Alcohol, 2004; 65(1): 74-83.



Libby AM, Orton HD, Novins DK, Beals J, Manson SM, et al. Childhood abuse and later parenting outcomes in two American Indian tribes. Child Abuse & Neglect, 2008;32, 195-211.



New Lines of Inquiry



- Alterations in central and autonomic nervous system function and hormonal dysregulation are associated with trauma, which, in turn, increase risk for CVD.
- It may be that high rates of trauma exposure contribute to the increasing prevalence of CVD among American Indian men: their leading cause of death.

Relevant Publications



Sawchuk CN, Roy-Byrne P, Goldberg J, Manson SM, Buchwald D. The relationship between post-traumatic stress disorder and cardiovascular disease in an American Indian tribe. Psychological Medicine, 2005; 35: 1785-1794.



New Lines of Inquiry



- Similarly, trauma is closely linked to pain; a relationship verified in our own work among Native people.
- Pain affects help-seeking behavior, adherence to treatment recommendations, and speed of surgical recovery, all often compromised in American Indians.



Buchwald D, Goldberg J, Noonan C, Beals J, Manson SM, et al. Relationship between Posttraumatic Stress Disorder and pain in American Indians. *Pain Medicine*, 2005; 6(1): 72-9.

New Lines of Inquiry



And trauma is associated with the onset as well as progression of diabetes

Relevant Publications



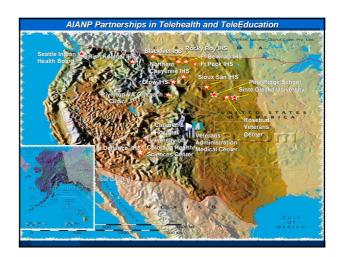
- Jiang L, Beals J, Whitesell, N.R., Roubideaux, Y., Manson, S.M. & the Al-SUPERPFP Team. Stress burden and diabetes in two American Indian reservation communities. *Diabetes Care*, 2008;31(3), 427-9.
- Jiang, L., Beals, J., Whitesell, N.R., Roubideaux, Y., Manson, S.M. & the Al-SUPERPFP Team. Association between diabetes and mental disorders in two American Indian reservation communities. *Diabetes Care*, 2007;30(9), 2228-9.

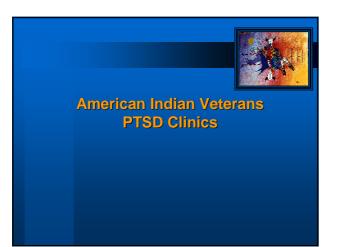


New Lines of Inquiry



- Real-time, interactive videoconferencing offers effective means – clinically and fiscally -- of bridging treatment gaps in geography and cultural.
- Home-based telecommunication technologies, promise more continuous, responsive care.





Program Need Approximately 60% rate of the state of the



- Approximately 60% rate of PTSD among Lakota military combat veterans, 3 times that of their White counterparts
- Local stigma and poor confidentiality
- Inadequate clinical expertise among IHS personnel

Program Need



- VA facilities 180-300 miles distant and lack transportation
- Distrust federal government

PTSD Services



- Weekly clinics offering initial assessment, medication management, individual and group psychotherapy
- 10 active; 6 more to be implemented July 2008
- Community liaison (TeleHealth Outreach Workers)
- Different models and partnerships

Relevant Publications



Shore JH, Manson SM. The American Indian Veteran and Post-traumatic Stress Disorder: A telehealth assessment and formulation. *Culture, Medicine and Psychiatry*, 2004; 28: 231-243.

Relevant Publications



Shore JH, Manson SM. Telepsychiatric care of American Indian veterans with post traumatic stress disorder: Bridging gaps in geography, organizations, and culture. *Journal of Telemedicine and Telecare*, 2004; 10(2): S64-S69



- Shore JH, Manson SM. Rural telepsychiatry: A developmental model. *Psychiatric Services*, 2005; 56(8): 976-980.
- Shore JH, Savin D, Novins DK, Manson SM. Cultural aspects of Telepsychiatry: Spanning distance and culture. *Journal of Telemedicine and Telecare*, 2006; 12(3): 116-121.

Relevant Publications



- Shore JH, Savin D, Orton H, Beals J, Manson SM. Diagnostic reliability of telepsychiatry in American Indian veterans. *American Journal of Psychiatry*, 2007; 164:115-118.
- Shore JH, Savin D, Orton H, Grigsby J, Manson SM. Acceptability of telepsychiatry among American Indian veterans. Psychiatric Services. In press.

Relevant Publications



■ Shore JH, Brooks E, Savin D, Manson SM, Libby A. An economic evaluation of telehealth and in-person data collection with rural and frontier populations: Structured clinical interviews with reservation-based American Indians. *Psychiatric Services*, 2007;58(6), 830-835.

