

HOW ARE PTSD SYMPTOMS INFLUENCED IN VETERANS DURING ACUPUNCTURE TREATMENTS, AS DOCUMENTED ON A PCL-M QUESTIONNAIRE?



Francis Yurasek, PhD (China), MSOM, LAc • Manuel Duarte, DC, MS, MSAc, DABCO, DACBSP • Cynthia Easter, BA, MSAc

ABSTRACT:

The purpose of this retrospective case series was to determine if acupuncture has an effect on PTSD symptoms in 18 veterans. This study follows our single case study that was presented at the 37th Scientific Meeting of the Midwest Pain Society,¹ and presents a picture of the effect of regular acupuncture treatments (weekly - biweekly) over a four month period in 2014. PCL-M survey (VA's assessment tool for Veterans with PTSD) initial question responses of 18 veterans were compared to their responses after 4 months of treatment. The most noteworthy results were declines in the aggregate response rate (i.e., decline of symptom severity and functional impairment) for 69% (11 of 16) of the questions, compared to an upturn in 31% of the questions (5 of 16), with one question showing no change. The total decrease in reported symptoms was 72% as compared to a 28% increase based on overall scores. The most significant decreases involved "physical responses to triggers, emotional upset over triggers, changes in sleep patterns and ability to concentrate."

OBJECTIVE:

The purpose of this retrospective case series was to determine if a 4-month course of acupuncture had an effect on the symptoms of post-traumatic stress disorder (PTSD) in veterans (N=18) as tracked with the PTSD Checklist (military) (PCL-M), developed by Weathers, Litz, Huska, & Keane for National Center for PTSD – Behavioral Science Division.

INTRODUCTION:

The PCL-M is a 17-question survey designed to identify conventional PTSD symptoms.² The PCL-M is in common use by the US Veterans Administration and related organizations. The survey contains "a list of problems and complaints that veterans sometimes have in response to stressful military experiences". The respondents indicate how much they "have been bothered by that problem in the past month" with the following choices: Not at all (1), A little bit (2), Moderately (3), Quite a bit (4), Extremely (5).

METHODS:

As part of their standard care, veterans who visited the National University of Health Sciences Veterans Clinic were asked to complete the PCL-M along with other intake forms during the initial clinic visit. The PCL-M was also administered after 4 months of treatment.

Treatment Strategy: The treatments used the National Acupuncture Detoxification Association (NADA) protocol³ and specific acupuncture points to address individual veteran's pain.

Assessment of Therapeutic Effect: The numeric responses of the PCL-M were totaled for each individual respondent to assess overall change before and after treatment. In addition, responses to individual questions were tallied to determine the areas of most notable change.

RESULTS:

Figures 1 and 2 summarize the results. The most noteworthy results were seen in the responses to individual questions. (Figure 1)

Figure 1: Response Differences to PCL-M Individual Questions (N=18)

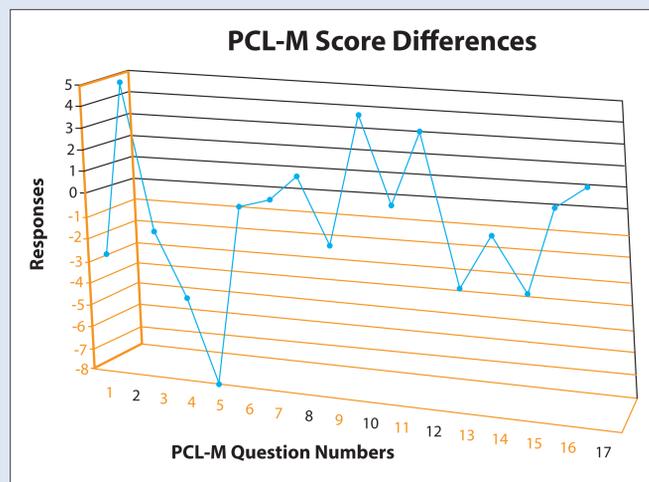
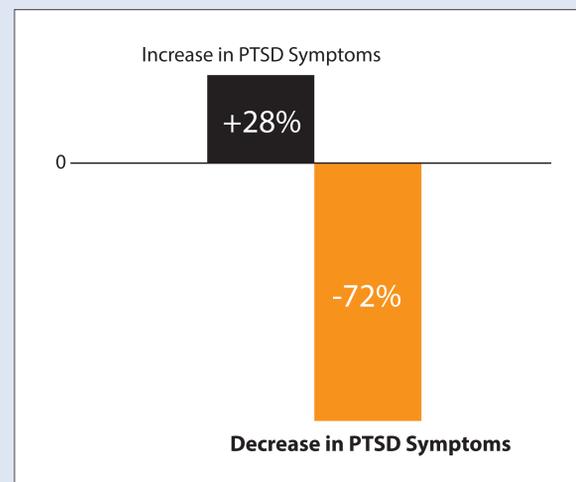


Figure 2: Magnitude of Changes*



The following eleven (11) questions showed response reductions: 1, 3, 4, 5, 6, 7, 9, 11, 13, 14, and 15 (69%) with upturns in five questions: 2, 8, 10, 12 and 17 (31%). There was no change in the aggregate response rate to question #16. (See FIGURE 2.) The total decrease in symptoms as reported was 72% as compared to a 28% symptoms increase based on overall scores, with no change in one question. The most significant decreases involved physical responses to triggers, emotional upset over triggers, changes in sleep patterns and ability to concentrate.

The most significant reduction in the aggregate response rate was on question #5, "Having physical reactions (e.g., heart pounding, trouble breathing, sweating) when something reminded you of a stressful military experience?" with a decrease of 8 points. A decline of 4.5 points on question #4, "Feeling very upset when something reminded you of a stressful military experience" displayed the second largest reduction followed by a 4 point decrease on questions #13, "Trouble falling or staying asleep?" and #15, "Having difficulty concentrating?"

The most notable upturn (4.5 points) in the aggregate response rate was on question #2, "Repeated, disturbing dreams of a stressful military experience?" followed by an increase of 3.5 points on question #10: "Feeling distant or cut off from other people?"

We feel the changes to question #2 may be the result of the veterans' improved sleep (see question #13, above) and the changes to question #10 may possibly be related to the veterans' increased ability to concentrate (question #15) allowing the veterans to more critically assess their social interactions. Further research is needed to clarify the meaning of these response differences.

CONCLUSION:

This study demonstrates that acupuncture has the potential to affect physical, cognitive and emotional responses as tracked using the PCL-M, the VA's assessment tool, for veterans with PTSD. Future research should include additional case studies as well as a pilot study to assess the feasibility of a larger clinical study. Acupuncture, which has few documented side effects, (e.g., the rare occurrence of pneumothorax, potential for infection from needles, bruising) could also be considered as a viable companion to conventional drug therapy, in those areas in this study and in future studies where the PCL-M results indicate that acupuncture performed effectively.

REFERENCES:

¹ Yurasek F, Anton J (October 25-26, 2013) Case Study: Are Post Traumatic Stress Disorder (PTSD) Symptoms Also Influenced When Treating A Veteran's Chronic Back Pain With Acupuncture? Poster presented at the 37th Scientific Meeting of the Midwest Pain Society, Chicago, IL

² PCL-M FOR DSM-IV (National Center for PTSD – Behavioral Science Division) Weathers F, Litz B, Herman D, Huska J, & Keane T (October, 1993) The PTSD Checklist (PCL): Reliability, Validity, and Diagnostic Utility, Paper presented at the Annual Convention of the International Society for Traumatic Stress Studies, San Antonio, TX

³ NADA (National Acupuncture Detoxification Association); <http://www.acudetox.com/>