

Pilot feasibility trial of Cognitive Processing Therapy for young people with comorbid Posttraumatic Stress and Substance Use Disorders in residential substance use treatment

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Introduction and Aims: Research demonstrates that treating Posttraumatic Stress Disorder (PTSD) alongside Substance Use Disorder (SUD) is more effective in reducing symptoms of both disorders than when the disorders are treated sequentially. Providing therapy for SUD/PTSD in residential treatment for Alcohol and Other Drug (AOD) use may be feasible, as the environment has the capability to provide ongoing mental health support in a safe environment. However, the effectiveness of integrated PTSD treatment in residential AOD settings is yet to be determined. We aimed to trial the effectiveness of Cognitive Processing Therapy (CPT; a 'gold-standard' therapy for PTSD) within the residential AOD setting for young people with the SUD/PTSD comorbidity.

Design and Methods: Recruitment is currently underway and commenced in February 2021. Clients entering a residential service in Queensland, Australia with a provisional DSM-5 diagnosis of PTSD are eligible. CPT has been delivered through face-to-face and telehealth format. Amendments were made to the original CPT protocol to meet the needs of the service and its clients.

Key Findings: Clients who completed at least five sessions of CPT displayed clinically meaningful reductions in PTSD symptoms. Key challenges of implementing CPT include emotional dysregulation throughout PTSD treatment, a vast variety of comorbid psychiatric conditions alongside SUD/PTSD that interfere with treatment, and implementation at a service-level.

Discussions and Conclusions: Results support the preliminary feasibility of CPT as a novel treatment for reducing PTSD symptoms in those who have the SUD/PTSD comorbidity. Novel aspects of implementing CPT at a service level, amendments to the original CPT structure, and clinical implications are discussed.