

Reducing post-traumatic stress after intensive care unit

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Women are more likely to suffer post-traumatic stress than men after leaving an intensive care unit (ICU), finds a new study published in BioMed Central's open access journal *Critical Care*. However, psychological and physical 'follow-up' can reduce both this and post-ICU depression.

Patients in the ICU often suffer post-traumatic stress, anxiety, or depression due, not only to the illness or trauma that put them there, but to the very nature of the ICU and life-saving treatment. As a result, follow-up schemes have been put in to place to help alleviate these [psychological problems](#). Researchers from the Karolinska University Hospital Solna and the Karolinska Institutet compared patient's recovery from 2006, before a follow-up scheme was started, with that of patients in 2007 and 2008.

The scheme consisted of non-compulsory meetings at three, six and 12 months after being discharged from ICU with a nurse, physician and a [physiotherapist](#), revisiting the ICU, and in severe cases being referred to a psychiatric unit for further therapy.

Before the use of the follow-up scheme women had much higher scores on the [Impact Event Scale](#) (IES), which measures post-traumatic stress, than men. For women, after the introduction of follow-up, these scores were significantly reduced. However, the scheme had no effect on the IES score of men.

Dr Peter Sackey, who led this study, explained, "In general, for the same event, women are twice as likely to suffer post-traumatic stress disorder, recover more slowly, and are more prone to suffer long-term effects. We found this was also true in ICU survivors. The women with the highest IES scores were the ones who were most helped by the follow-up scheme. While it is not clear whether the scheme only helps patients at severe risk of PTSD, it does mean that these people have

access to the treatment they need."

More information: Gender differences in psychological morbidity and treatment in intensive care survivors - a cohort study Anna Schandl, Matteo Bottai, Elisabeth Hellgren, Örjan Sundin and Peter Sackey, *Critical Care* (in press)

Provided by BioMed Central

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