

Slide 1




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Trauma and PTSD in Older Adults

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or the **Exit** button to leave the module.*


Use the forward arrow to continue.




Trauma and PTSD in Older Adults

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Learning Objectives


After this completing this module, learners will be able to:

- Identify age-related factors that are associated with PTSD
- Describe the psychological, physiological, and cognitive impact of trauma and PTSD on older adults
- Find assessment tools to screen for and diagnose PTSD in older adults
- List evidence-based treatments for PTSD in older adults
- Make recommendations within a trauma-informed care framework

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What is Trauma?
Examples of traumatic events include physical or sexual violence, combat exposure, life-threatening illness, natural or man-made disasters, or community violence

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Posttraumatic Stress Disorder (PTSD)

- Trauma is common in the human experience
 - Normal to feel distressed and disrupted by traumatic events
- PTSD
 - Can develop after experiencing/witnessing traumatic event
 - Four symptom clusters
 - Intrusion
 - Avoidance
 - Negative cognitions and mood symptoms
 - Hyperarousal
 - Symptoms for at least one month with significant distress and functional impairment

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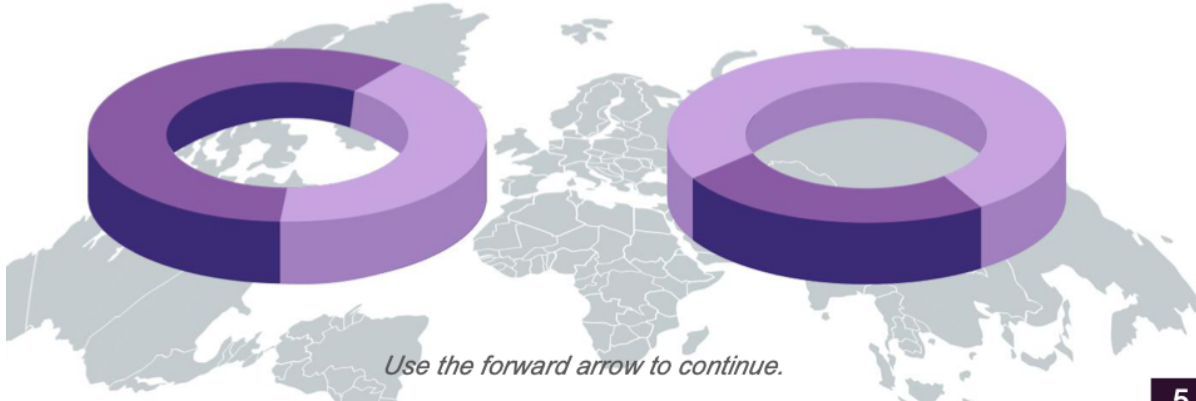
Trauma and Older Adults

70%

of adults will experience a potentially traumatic event in their lifetime

20-40%

of trauma survivors go on to develop clinically significant PTSD



Slide 7

Kate Krajci, LCSW



Prevalence of PTSD

- Older adults have lower rates of PTSD compared to younger adults
 - Lifetime prevalence in older adults is about 4.5%
 - Higher in marginalized subgroups of older adults (e.g., LGBTQ)
- Older women have higher rates compared to older men
- Less research on the consequences of trauma and PTSD among older adults than in younger groups



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Risk Factors for PTSD

- Genetic factors
- Disruptive childhood circumstances
- Prior trauma
- Severity of trauma or traumas
- Exposure to reactivating stressors
- Limited social support
- Experiencing life as part of a marginalized community
- Preexisting psychiatric conditions
- Elder abuse and mistreatment



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Who develops PTSD?

- Trauma Related factors
 - Nature
 - Severity
 - Frequency
- Individual factors
 - Personal perception
 - Interpretation
 - Meaning
 - Context
 - Developmental stage
 - Childhood traumatic events have stronger impact on PTSD symptoms later in life



Use the forward arrow to continue.

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PTSD Symptoms in Older Adults

- Determining differences in older and younger adult symptom presentation is difficult
 - Lower clinician detection of PTSD in older adults
 - Differing symptom manifestation in older adults
 - Generational differences in reporting of symptoms
- Little research on PTSD in older adults
 - Available research in white male US veteran samples



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Factors Contributing to PTSD in Older Adults

- Role changes
- Loss
- Illness
- Sensory changes
- Physical and cognitive decline
- Mediators linking cognitive impairment and PTSD are poorly understood
 - Hypothalamic-pituitary-adrenal axis dysfunction
 - Neurodegeneration of limbic structures
 - Executive dysfunction



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Take Home Message

- Trauma is a common human experience
- Normal to experience distress after a traumatic event, but some people develop PTSD
- Older adults tend to be very resilient and the majority recover from trauma
- Overall, older people are less likely to experience PTSD than younger people



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Impact of Trauma

Trauma can have a psychological, physiological, and cognitive impact on older adults as well as impact suicide risk, mortality and premature aging

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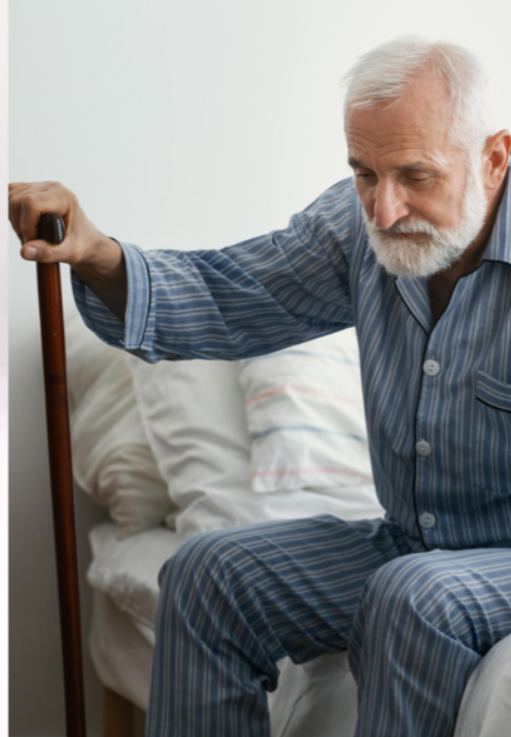
Psychological Impact of Trauma

- PTSD is highly comorbid with other psychiatric conditions
- Research suggests that trauma and PTSD can predispose one to develop other psychiatric conditions
- Dearth of research of racism, race-related stress, and PTSD in older adults



Physiological Impact of Trauma

- Older adults with PTSD are at increased risk for various health conditions
 - Injury directly associated with a physical trauma
 - Reliance on unhealthy behaviors
 - Avoidance of healthcare to cope with PTSD symptoms
 - Physiological consequences of enduring chronic stress and hyperarousal



Cognitive Impact of Trauma

- PTSD is associated with increased risk of cognitive impairment/ dementia
 - Pathways linking PTSD to dementia
 - Oxidative stress associated with psychological trauma promotes overproduction of glucocorticoids, accelerating hippocampal atrophy and neurodegeneration
 - Misuse and overuse of alcohol and substances to cope with PTSD symptoms
 - Chronic disturbed sleep
- Older adults with cognitive impairment may be particularly vulnerable to trauma risk and re-exposure



Suicidality and All-cause Mortality

- Trauma history has been associated with increased suicidal ideation and suicide attempts in older adults
- Social connectedness may buffer
- May be mediated by depression
- Utility of depression screening for those with trauma
- Trauma exposure and PTSD are associated with increased risk of all-cause mortality



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PTSD and Premature Aging

- PTSD may accelerate the aging process
 - Reduced leukocyte telomere length
 - Increased pro-inflammatory markers
 - Comorbidity with diseases of aging: cardiovascular disease, type 2 diabetes, gastrointestinal ulcer disease, and dementia.
 - Certain biomarkers of aging may predispose older adults to develop PTSD



Learning Check

True or false? Older adults with PTSD are at increased risk for health conditions such as hypertension and persistent pain.

A. True

B. False



Learning Check

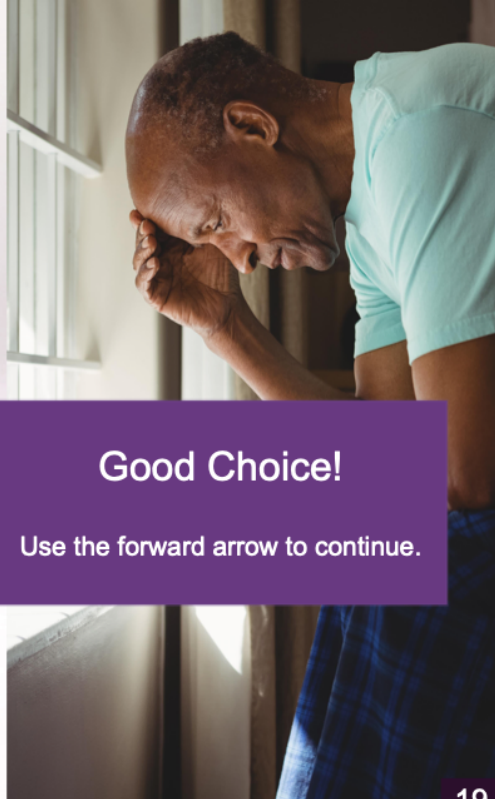
True or false? Older adults with PTSD are at increased risk for health conditions such as hypertension and persistent pain

A. True

B. False

Good Choice!

Use the forward arrow to continue.



Learning Check

True or false? Older adults with PTSD are at increased risk for health conditions such as hypertension and persistent pain

A. True

B. False

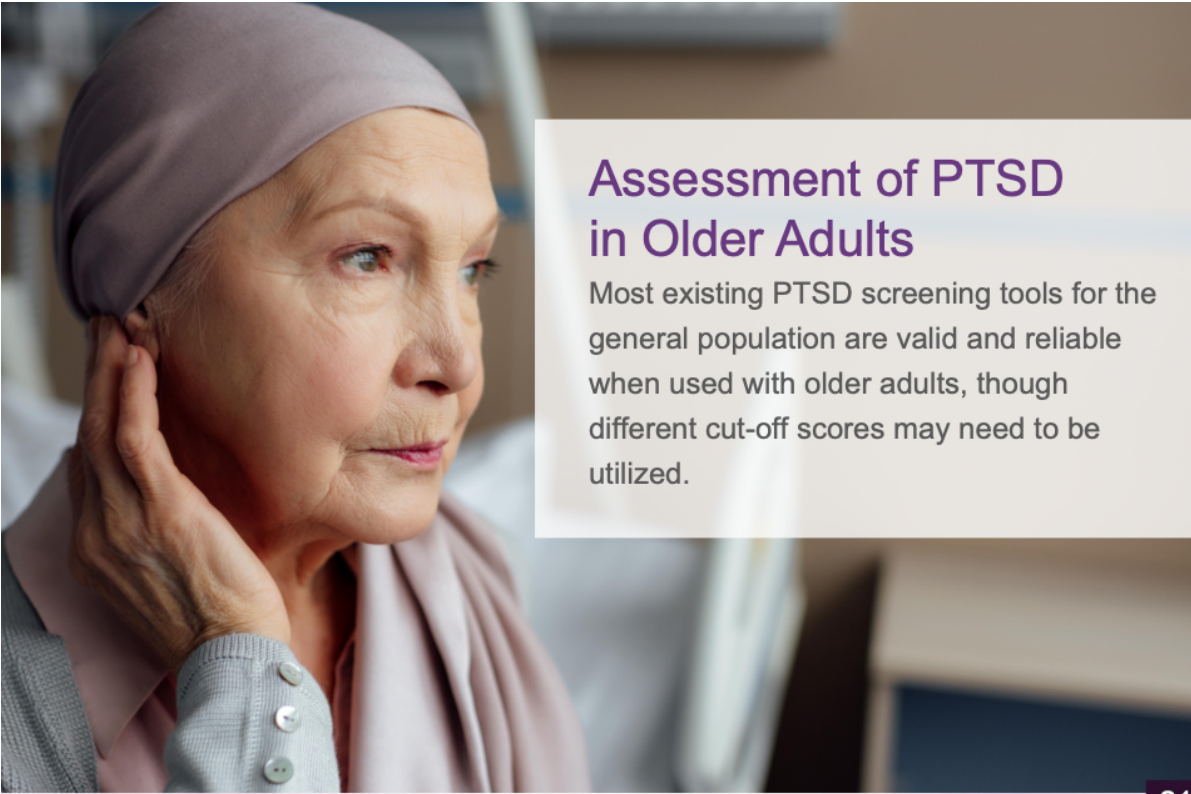
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Take Home Message

- PTSD has psychiatric, medical, and cognitive consequences
- PTSD can also accelerate aging and mortality
- There are age-related issues that confer risk for trauma exposure and PTSD onset and reactivation






Assessment of PTSD in Older Adults

Most existing PTSD screening tools for the general population are valid and reliable when used with older adults, though different cut-off scores may need to be utilized.

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Screening Tools

Please click on a screening instrument below for more details

PTSD Checklist for DSM-5 (PCL-5)

Clinician-Administered PTSD Scale for DSM-5 (CAPS-5)

Screening Tools

Please click on a screening instrument below for more details

PTSD Checklist for DSM-5 (PCL-5)

- 20-item self-report measure
- Rate symptoms severity over past month on a 5-point Likert scale
- Can be used to screen for PTSD, monitor symptoms, make a provisional diagnosis for PTSD
- Good psychometric properties in older adults
- Research suggests lowering the cut-off points to reduce false negatives
- There is a 4-item short form

Clinician-Administered PTSD Scale for DSM-5 (CAPS-5)

Screening Tools

Please click on a screening instrument below for more details

PTSD Checklist for DSM-5 (PCL-5)

Clinician-Administered PTSD Scale for DSM-5 (CAPS-5)

- Considered the gold standard PTSD assessment tool
- Not formally validated in samples of older adults
- Has been used in research about older adults and PTSD
- Clinician-administered structured interview
- 30 items
- Three versions
 1. Current diagnosis of PTSD
 2. Lifetime diagnosis of PTSD
 3. Assesses PTSD symptoms over the last week

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Assessment Considerations in Older Adults

- Older adults with PTSD symptoms
 - May be more likely to present to primary care or other physical health care settings
 - May not freely disclose traumatic events
 - Some may minimize the events
 - The focus may be on physical symptoms
 - May not report emotional symptoms
 - May not readily link their symptoms to traumatic events, especially remote events
- PTSD often goes under-detected and under-diagnosed
- Suicide risk assessment is key part in trauma assessment





Take Home Message

- The research on PTSD assessment in older adults is limited
- Available PTSD assessment tools have shown reliability and validity for use in older adults
- More research is needed for development of instruments specifically for older adults, particularly those with moderate to severe cognitive impairment





Treatment of Trauma and PTSD in Older Adults

There are effective interventions available for older adults who need specialized treatment for PTSD symptoms

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Evidence-based Treatments for PTSD

- Trauma-focused psychotherapy is more efficacious than medication
- Few randomized clinical trials of PTSD treatments in older adults
- Cognitive behavioral trauma-focused therapies as the preferred treatment for PTSD



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Exposure Therapies

- Prolonged Exposure (PE)
 - Manualized intervention that involves exposing clients to feared, but safe, situations
 - In vivo exposure
 - Imaginal exposure
 - PE is safe, acceptable, and efficacious for older adults with PTSD



Narrative Exposure Therapy

- Similar to imaginal exposure therapies
- Manualized therapy
- Develop a chronological narrative of the older adult's life with emphasis of traumatic events and perceived supports
- Allows for repeated exposure
- May be especially well-suited for older adults



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Cognitive Processing Therapy

- Cognitive therapy focused on identifying and modifying dysfunctional thoughts, beliefs, and expectations associated with trauma
- Considered an evidence based psychotherapy
- Further research is needed to determine its efficacy and effectiveness in older adults



Safety of Trauma-focused Therapies in Older Adults

- Therapies are generally safe in older adults
- Unlikely to trigger dangerous or harmful physiological responses
- May benefit those with certain health problems
- Those with elevated risk for certain health problems should consult their physician



Cognition and PTSD Treatment

- Consider cognitive function when choosing treatment for older adults
- Older adults with minimal cognitive impairments may benefit from PTSD treatments
- Older adults with moderate to severe impairments may not benefit
- Enlisting caregiver involvement in treatment may be indicated
- Formal and informal caregivers can learn strategies to manage trauma-related behaviors and symptoms at home and reinforce use of learned coping skills

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PTSD and Medications

- Treatment often focuses on comorbid depressive/anxiety
- Prazosin sometimes used to treat nightmares in PTSD
 - Use with caution in older adults with certain cardiac conditions
- Prescribers must consider unique pharmacokinetics when prescribing such medications to older adults
- Medications to avoid or use with caution
 - Tricyclics with anticholinergic properties
 - Antipsychotics
 - Benzodiazepines



Learning Check

Which of the following is not an evidence-based therapy for PTSD in older adults?

- A. Cognitive Processing Therapy
- B. Exposure Therapy
- c. Interpersonal Psychotherapy
- d. Narrative Exposure Therapy



Learning Check

Which of the following is not an evidence-based therapy for PTSD in older adults?

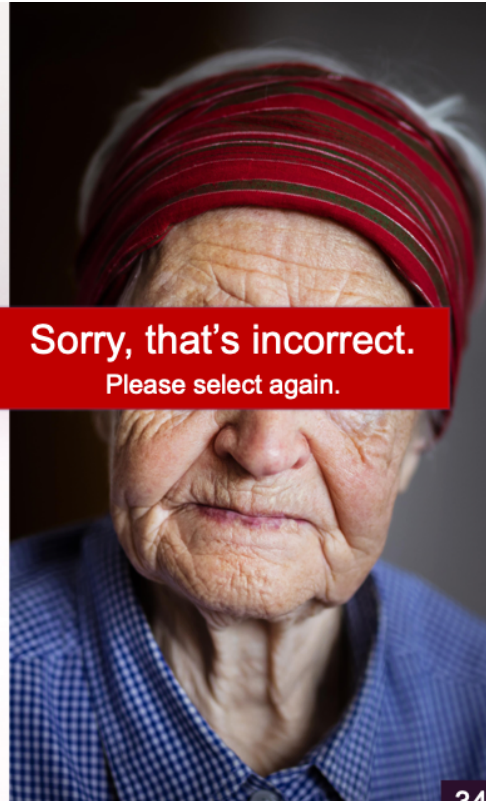
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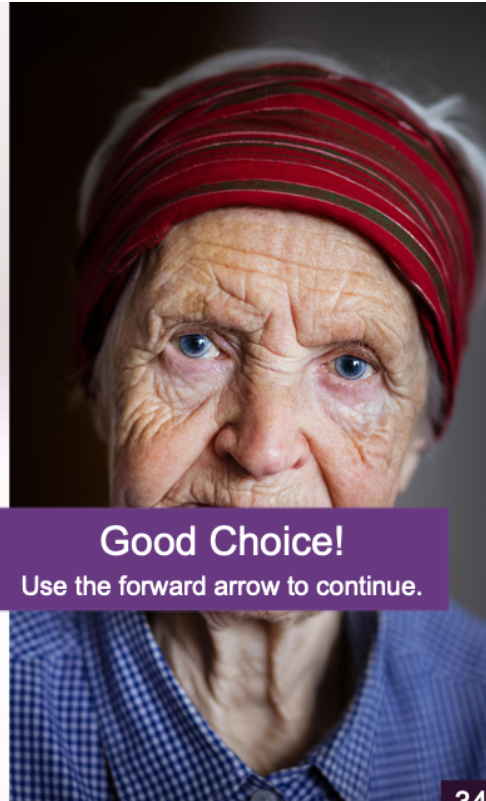


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Learning Check

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Good Choice!

Use the forward arrow to continue.

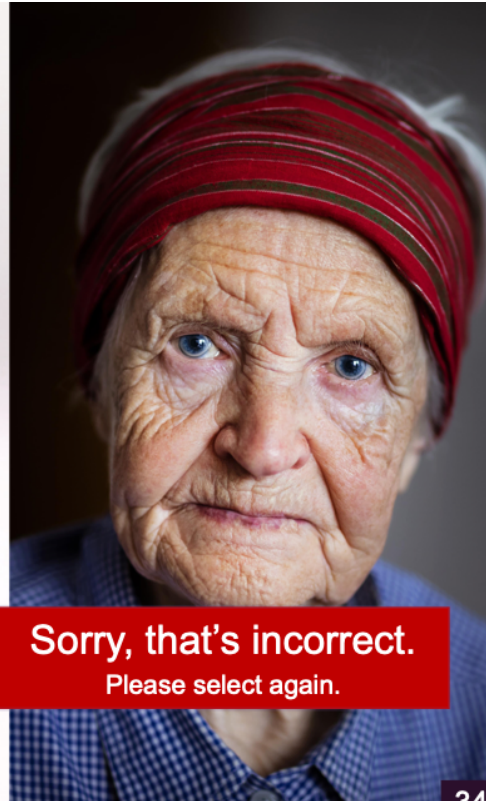
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Learning Check

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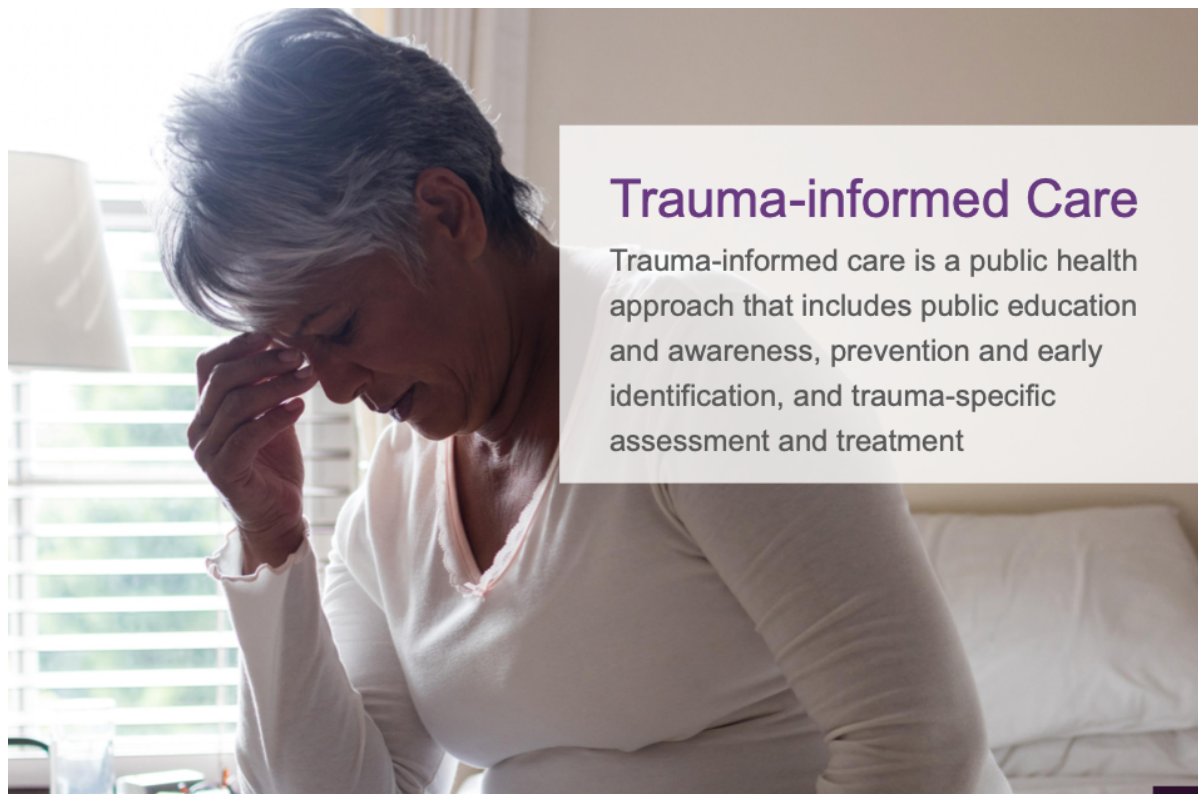


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Take Home Message

- Trauma-focused therapies are preferred treatment for older adults with PTSD
- Support for use of Cognitive Behavioral therapies in older adults
- These therapies are safe and can be adapted for individuals with mild cognitive impairments
- Certain medications may be used with caution to address specific symptoms or comorbid disorders that exacerbate PTSD






Trauma-informed Care

Trauma-informed care is a public health approach that includes public education and awareness, prevention and early identification, and trauma-specific assessment and treatment

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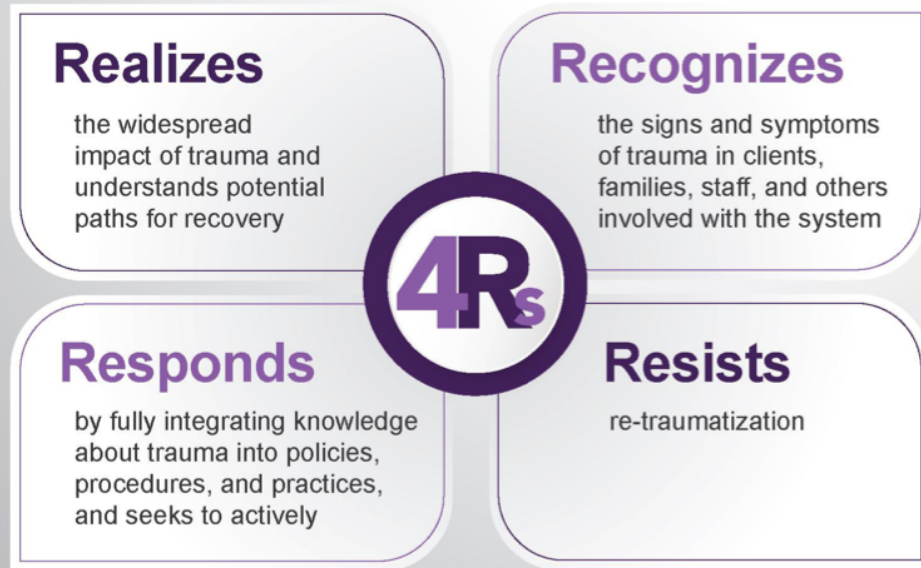
What is Trauma-Informed Care?

- Addressing trauma must extend beyond trauma-focused interventions
- Trauma-informed care involves a multi-pronged, multi-agency public health approach
 - Public education and awareness
 - Prevention and early identification
 - Effective trauma-specific assessment and treatment at the organizational and community context
- Creates an environment where organizations incorporate awareness, education, and referral sources in general practice
- Can be applied when treating chronic medical conditions
- Useful approach for marginalized communities

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The Four Rs of Trauma-informed Care



Six Principles of a Trauma-informed Approach

- 1— Safety
- 2— Trustworthiness and transparency
- 3— Peer support
- 4— Collaboration and mutuality
- 5— Empowerment and agency
- 6— Cultural, historical, and gender issues



Trauma-informed care with older adults

- Older adults in residential care are vulnerable to abuse
- Hospital admissions can be extremely traumatic
 - Feeling a loss of control
 - Physical touch
 - Personal care
 - Being physically exposed to staff
 - Being physically restrained
 - Unfamiliar sounds inside and outside the hospital
 - Pain associated with certain procedures
 - Isolation
- Few studies examining trauma-informed approaches for older adults





Ms. Reynolds

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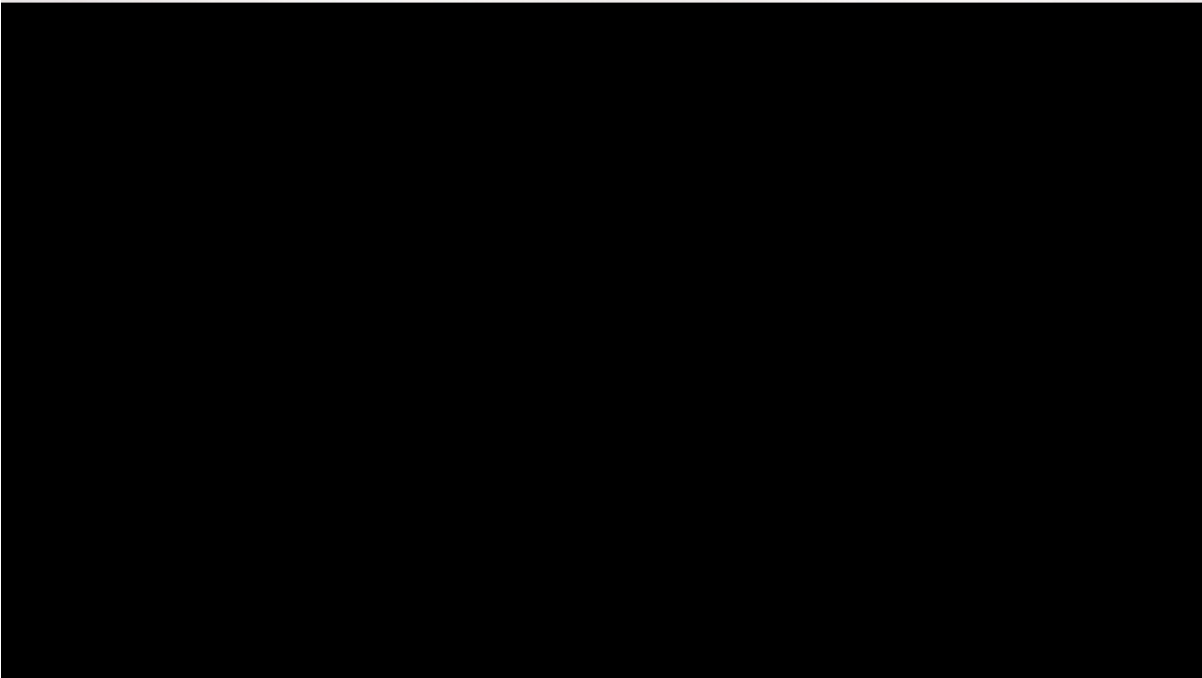
Trauma-informed Care Strategies in the Healthcare Setting

- Create a calm environment
 - Pleasant color schemes and limit clutter
- Establish visiting hours and quiet hours for inpatient rooms
- Knock gently when entering patient spaces
- Introduce oneself with each encounter
- Ask for permission and narrate what is being done when personal care or physical touch is necessary
- Elicit older adult's preferences about staff
- Providing delirium precautions for at risk older adults
- Have mental health staff involved in the treatment team for support and to help identify specific triggers

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Brian Sims, MD



Take Home Message

- Given the extensive impact of trauma on individuals and communities, a multi-pronged, multi-agency public health approach is required
- Trauma-informed care promotes organizational and individual awareness of the impact of trauma and a roadmap for assessing trauma, managing trauma exposure/ reactivation, and referring out for specialized treatment as necessary




In Summary

In this module, we discussed:

- ✓ 90% of people experience trauma, older adults have lower rates of PTSD than younger adults
- ✓ Life changes may increase the likelihood of symptom activation & reactivation
- ✓ PTSD is associated with psychiatric and health morbidity, cognitive impairment, and accelerated aging
- ✓ PTSD treatment is effective in older adults
- ✓ Research on older adult trauma assessment & treatment is limited especially in minority populations
- ✓ Trauma-informed care is important in addressing the pervasive impact of trauma





Next Steps

- Please see the reference list for more information about trauma and PTSD in older adults

[Click here to end presentation](#)

Then click the close button to proceed to the post test

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