## **Prolonged Exposure Protocol**

#### **SESSION 1 – Rationale for program**

- Rationale for the program (see handout)
  - Explain treatment procedures
    - imaginal exposure process the memory repeatedly for 30-60 min
    - *in vivo* Approach situations that you have been avoiding because the situations are reminders
    - predict discomfort during and between sessions available by phone
    - breathing retraining
    - (cognitive restructuring: teach you to evaluate how realistic are your beliefs about self and world, including beliefs about yourself for your thoughts/feelings/reactions)
  - Explain focus is on PTSD symptoms
- Collect info relevant to the assault (See AIHI in Appendix of book)
- Introduce breathing retraining
  - Purpose: Slow down breathing → decreased O2 in blood → decreased anxiety
  - Breathing instructions: (see handout)
- Assign homework
  - Practice breathing retraining for 10 minutes, 3x/day
  - o Listen to audiotape of session once
  - Read treatment rationale handout once

#### SESSION 2 – Introduction to In Vivo and SUDS

- Review HW (breathing exercise and listening to tape of session)
- Present agenda
- Common Reactions to Assault handout (education re PTSD)
- *In vivo* exposure explained
  - Rationale
    - Distress is related to avoidance of situations and memories that remind you of the assault. However, avoidance prolongs the reactions.
    - Elicit examples of client avoidance
    - Confronting painful experiences allows one to process the experience and for pain to lessen
    - Avoidance of situations that are realistically safe b/c of the related anxiety only reinforces belief that the situaions are unsafe and that the anxiety is unrelenting
  - **Habituation** --Repeated exposure to anxiety-producing situations results in decrease in anxiety

#### Examples:

- Child and ocean wave and gradual reintroduction to ocean
- Taxi-driver overcoming fear of bridges
- Dogs, etc
- Explain *in vivo* hierarchy will be identified according to levels of distress. This will be a list of situations and/or people that were once enjoyable or important to you that you now avoid
  - SUDS (0 to 100) Explain scale, including level now and at time of assault. Use anchors as needed to develop sense of ratings.
  - Construct hierarchy of avoided situations elicit specific examples of the situations, people, places avoided since the trauma incident Use the *In Vivo* Hierarchy Form to make list
- Select *in vivo* assignments for hw

Start with situation that have SUDS of 40-60

Can review sample exercise (from page 155)

By end of treatment, client should do daily practice of all that are listed.

- Instructions for procedure:
  - Begin with situation that evoke moderate anxiety (eg SUDS = 50)
  - Client puts self in anxiety provoking but safe situation
  - Client records time and initial SUDS rating on the *In Vivo* Exposure Homework Recording Form
  - Client must remain in situation for 30-45 min or until anxiety decreases by at least 50%
  - Client records endpoint SUDS for this situation
- Assign HW:
  - Read Common Reactions Handout
  - Continue to practice Breathing retraining
  - Review list of avoided situations at home and add to list
  - Begin *in vivo* exposure assignments

 $\circ$   $\;$  Listen to audiotape of session once

# In Vivo Exposure Homework

Situation to be	
practiced:	

#### Before performing the *in-vivo* exposure, answer the following questions:

1. What's the worst that could happen in this situation?\_\_\_\_\_

2. What is the likelihood that this could happen?

3. Evaluate the evidence for and against the likelihood of this happening?

Ratings before and after *in-vivo* exposure:

Date	Start	SUDS	PEAK	End	SUDS	Total	Comments
	time	at start	SUDS	time	at end	Time	

Other Comments:

CF Figure 9.4 In Vivo Exposure Homework Recoding Form

#### **SESSION 3** Introduction to Imaginal Exposure

• Review HW

(Re-read Common Reactions, Breathing retraining, In Vivo assignment, add to list as needed, listen once to tape of session)

- Present agenda
- Rationale for imaginal exposure
  - Avoidance of memory, while understandable, maintains (or increases) anxiety (may be expressed through nightmares as well as day-time anxieties)
  - Staying with the memories will decrease fear, anxiety associated with memories. Gain control of memories instead of memories being in control of you.
  - Analogies:
    - Digestion
    - Filing
    - Loss and grief experiencing feelings of loss, grief, lead to decrease of distress
  - GOAL: Enable you to have thoughts, conversation about the trauma and experience triggers associated with the trauma without experiencing the intense anxiety that disrupts your life.
  - PROCESS: Confront situations (*in vivo*) and memories (imaginal exposure) that generate anxiety and avoidance until memories become less painful (habituation).
    - **Emotional Processing**: repeated exposure helps organize memory and you learn that thinking aout the trauma is not dangerous and feeling anxious in not dangerous
    - **Habituation**: repeated remembering/reliving will disconfirm the belief that anxiety lasts forever and will decrease the anxiety
    - **Discrimination between remembering and being retraumatized**: Helps you realize that remembering the trauma is not the same as experiencing the trauma.
    - **Increased Mastery**: Repeated exposure enhances sense of self-control and personal competence as you stop avoiding and begin mastering your fears
    - **Differentiation**: Exposure will decrease generalization of fear from the specific trauma to similar but safe situations.
- Conduct imaginal exposure
  - Remember the trauma as vividly as possible
  - Eyes closed
  - Present tense
  - Stay with emotions
  - Audiotape narrative
  - Every 10 min or so rating SUDS for present (in office)
  - Keep repeating up to 60 minutes
  - Open eyes, take several deep breaths
  - Discussion:
    - Remember things not previously recalled?
    - Easier or more difficult than anticipated?
    - Would anything else have helped?
    - Feeling in present?
    - Any other thoughts

#### SEE BACK FOR HOMEWORK

- Assign homework:
  - Continue breathing practice
  - Listen to audiotape of imaginal exposure at least daily; use Exposure Homework Recording Form (p 169)
  - Continue with *in vivo* exposure daily, working up the hierarchy with SUDS levels
  - Listen to audiotape of session once

## **Imaginal** Exposure Homework

Situation to be practiced:\_\_\_\_\_

### Before performing the *imaginal* exposure, answer the following questions:

1. What's the worst that could happen in this situation?\_\_\_\_\_

2. What is the likelihood that this could happen?

3. Evaluate the evidence for and against the likelihood of this happening?

Ratings before and after *imaginal* exposure:

Date	Start time	SUDS at start	PEAK SUDS	End time	SUDS at end	Total Time	Comments
	ume	at start	3005	ume	atenu	Time	

Other Comments:

CF Figure 10.2, p. 169

#### **SESSION 4-8 (or 4-11)**

- Review HW
- Present agenda
- Conduct imaginal exposure; focus on hot spots progressively
- Conduct *in vivo* exposure discussion/implementation
- Assign homework:
  - Continue breathing practice
  - Listen to imaginal exposure tape daily
  - Continue to perform *in vivo* exposure exercises
  - Listen to audiotape of the session once
- Last session of series only: Re-administer measure to determine whether tx ends or continues

#### FINAL SESSION (9 or 12)

- Review HW
- Present agenda
- Conduct imaginal exposure
- Review progress in detail, make suggestions for continued practice
- End