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
  - 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 situations 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 re-introduction 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
- 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:**

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<thead>
<tr>
<th>Date</th>
<th>Start time</th>
<th>SUDS at start</th>
<th>PEAK SUDS</th>
<th>End time</th>
<th>SUDS at end</th>
<th>Total Time</th>
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Other Comments:
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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 about 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:
  o Continue breathing practice
  o Listen to audiotape of imaginal exposure at least daily;
    use Exposure Homework Recording Form (p 169)
  o Continue with in vivo exposure daily, working up the hierarchy with SUDS levels
  o 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?

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Ratings before and after *imaginal* exposure:

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Other Comments:

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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