

Summary of Recommendations

of the APA Guideline Development Panel for the Treatment of PTSD

Psychotherapy	Strength of Recommendation
<p>For adult patients with PTSD, the panel strongly recommends that clinicians offer one of the following psychotherapies/interventions (listed alphabetically):</p> <ul style="list-style-type: none"> • cognitive behavioral therapy (CBT) • cognitive processing therapy (CPT) • cognitive therapy (CT) • prolonged exposure therapy (PE) 	Strong For
<p>For adult patients with PTSD, the panel suggests that clinicians offer one of the following psychotherapies/interventions (listed alphabetically):</p> <ul style="list-style-type: none"> • brief eclectic psychotherapy (BEP) • eye movement desensitization and reprocessing therapy (EMDR) • narrative exposure therapy (NET) 	Conditional For
<p>For adult patients with PTSD, there is insufficient evidence to recommend for or against clinicians offering the following psychotherapies/interventions (listed alphabetically):</p> <ul style="list-style-type: none"> • relaxation (RX) • seeking safety (SS) 	Insufficient
Pharmacotherapy	Strength of Recommendation
<p>For adult patients with PTSD, the panel suggests that clinicians offer one of the following (listed alphabetically):</p> <ul style="list-style-type: none"> • fluoxetine • paroxetine • sertraline • venlafaxine 	Conditional For
<p>For adult patients with PTSD, there is insufficient evidence to recommend for or against clinicians offering the following medications (listed alphabetically):</p> <ul style="list-style-type: none"> • risperidone • topiramate 	Insufficient

Comparative Effectiveness	Strength of Recommendation
For adult patients with PTSD, the panel recommends clinicians offer either prolonged exposure or prolonged exposure plus cognitive restructuring when both are being considered.	Strong For
For adult patients with PTSD, the panel recommends clinicians offering either venlafaxine ER or sertraline when both are being considered.	Strong For
For adult patients with PTSD, the panel suggests clinicians offer CBT rather than relaxation when both CBT and relaxation are being considered.	Conditional For
For adult patients with PTSD, the panel suggests clinicians offer prolonged exposure therapy rather than relaxation when both prolonged exposure therapy and relaxation are being considered.	Conditional For
For adult patients with PTSD, the panel concludes that the evidence is insufficient to recommend for or against clinicians offering seeking safety versus active controls.	Insufficient

These recommendations are intended to be a general guide to best practices and are not intended to set a standard of care. A clinical practice guideline can facilitate decision making for both provider and patient.