New clinical protocol and guidelines to enable effective mental health care for adults and children exposed to trauma and loss.

GENEVA | 6 AUGUST 2013 - The World Health Organization is releasing new clinical protocols and guidelines to health care workers for treating the mental health consequences of trauma and loss.

Mental disorders are common, disabling and usually untreated, and WHO's *Mental Health Global Action Programme* (mhGAP) was developed in 2008 to scale up care for mental, neurological and substance use disorders with simple treatment protocols that can be offered by primary health care doctors and nurses.

Now, WHO is extending this programme by including care for post-traumatic stress disorder (PTSD), acute stress and bereavement within its global programme.

"We have received numerous requests for guidance for mental health care after trauma and loss" says Dr Oleg Chestnov, WHO Assistant Director-General for Noncommunicable Diseases and Mental Health "Primary health care providers will now be able to offer basic support consistent with the best available evidence.
They will also learn when to refer to more advanced treatment."

Traumatic events and loss are common in people's lives. In a previous WHO study of 21 countries, more than 10% of respondents reported witnessing violence (21.8%) or experiencing interpersonal violence (18.8%), accidents (17.7%), exposure to war (16.2%) or trauma to a loved one (12.5%). An estimated 3.6% of the world population has suffered from post-traumatic stress disorder (PTSD) in the previous year, the study showed.

Using the new protocol, which is co-published with the United Nations High Commissioner for Refugees (UNHCR), primary health care workers can offer basic psychosocial support to refugees as well as people exposed to trauma or loss in other situations.

Types of support offered can include psychological first aid, stress management and helping affected people to identify and strengthen positive coping methods and social supports.

In addition, referral for advanced treatments such as cognitive-behavioural therapy (CBT) or a new technique called eye movement desensitization and reprocessing (EMDR) should be considered for people suffering from PTSD. These techniques help people reduce vivid, unwanted, repeated recollections of traumatic events. More training and supervision is

recommended to make these techniques more widely available.

Primary health care staff are also warned against certain popular treatments. For example, benzodiazepines, which are anti-anxiety drugs, should not be offered to reduce acute traumatic stress symptoms or sleep problems in the first month after a potentially traumatic event.

"PTSD needs to be managed along with other common mental disorders" reports Dr Mark van Ommeren, Scientist in the WHO Department of Mental Health and Substance Abuse. "This new, simple WHO-UNHCR treatment protocol will guide health workers around the world to help adults and children who suffer from conditions specifically related to stress." The new guidelines and protocol were published today in an article in *The Journal of the American Medical Association*

Both the mhGAP clinical protocol on Assessment and Management of Conditions Specifically Related to Stress as well as the WHO guidelines underpinning the module are available at: http://www.who.int/mental_health/resources/emergencies/en/index.html
.

Additional information:

There is no evidence on the benefits of benzodiazepines, a common anti-anxiety drug, on symptoms of traumatic stress after a recent potentially traumatic event. Benzodiazepines may slow down the time to recover from potentially traumatic events.

Key concerns about the use of benzodiazepines are that many people develop tolerance to their effects, gain little therapeutic benefit from chronic consumption, become dependent on them and suffer a withdrawal syndrome when they stop taking them.

Thus, the WHO recommendation is that benzodiazepines should not be offered to adults to reduce acute traumatic stress symptoms associated with significant impairment in daily functioning in the first month after a potentially traumatic event.

The WHO recommendation also notes that benzodiazepines can have their use for other mental disorders.