Introduction: Post-traumatic stress disorder (PTSD) is often a chronic condition, despite the existence of evidence-based treatment options. Psychotherapy is the designated first line treatment for PTSD, although high rates of psychiatric and medical comorbidity are observed among patients who have undergone treatment. The psychoactive properties of psychedelics may be of particular interest within a substance-assisted psychotherapy approach, offering new treatment opportunities for this debilitating disorder.

Objectives: Review current evidence, therapeutic context, and possible mechanisms of action of different types of psychedelics in the treatment of PTSD.

Methods: Literature review using Medline database.

Results: 3,4-methylenedioxymethamphetamine (MDMA)-assisted psychotherapy appears to be a potentially safe, effective, and durable treatment for individuals with treatment-refractory PTSD. Based on a small number of studies, ketamine administration appears to result in temporary symptom relief and may, in combination with psychotherapy, lead to lasting reductions in PTSD symptoms. Although these have not yet been investigated in controlled studies, it is known that psilocybin and LSD induce psychoactive effects that could as well contribute to the psychotherapeutic treatment of PTSD.

Conclusions: The use of psychedelic compounds within a substance-assisted psychotherapy framework offers a novel method for pharmacotherapy-psychotherapy integration, although there is still much to learn from both a clinical and neurobiological perspective. It is necessary to generate more data regarding the safety and efficacy of psychedelics, in addition to research on cost-effectiveness, its use in mental health care infrastructure and also regarding the training of specialized therapists.

Keywords: psychedelics; MDMA; Ketamine; Posttraumatic Stress Disorder

EPP0950

Rorschach test with exner cs in assessing damage and trauma in suspected cases of abuse. Traumatic intrusions in thinking: Ptsd and adaptation disorder

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Introduction: This study wants to identify elements that could be informative in diagnosis and prognosis process of all those subjects who, following traumatic experiences, may develop PTSD, or even show signs of a more general and pervasive adaptation disorder, allowing a more precise damage assessment.

Objectives: In this perspective, the analysis of the Rorschach test according to the comprehensive system of Exner, reading Structural Summary and the analysis of the constellations, allows to make interesting inferences, in all the descriptive areas associated with the key variables as regards not only the cognitive area (Processing >> Mediation >> Ideation) but also the affective and relational area (Interpersonal Perception >> Self-Perception >> Controll >> Affect), so as to have a picture of the functioning of these subjects and, to be able to plan a more functional therapeutic plan.

Methods: Case report presentation based on the review of clinical notes and non-systematic review of the PTSD therapeutics state-of-the-art.

Results: A 72-year-old Portuguese male, a veteran of the Angolan War, sought medical attention four years ago after the death of his brother, which had happened three years before the consultation. The clinical picture consisted of re-experiencing the war and the loss of his brother, flash-backs, nightmares, irritability, a fear of losing control, inner dialogues with occasional intra-psychic voices, emotional numbing with the impossibility of developing loving relationships with his relatives, feelings of unreality, an episode of dissociative fugue and complaints of episodic forgetfulness and time warp. He was diagnosed with PTSD with dissociative symptoms, based on DSM 5 clinical criteria. He was initially treated with SNRIs and risperidone, with little improvement. A year ago, he suffered a flare-up, with suicidal ideation. He was prescribed methylphenidate 36 mg, with progressive improvement, persisting mild PTSD residual symptoms.

Conclusions: There is enough evidence of the dopamine involvement in PTSD, although research on dopaminergic drugs is scarce. Methylphenidate may be promising in the treatment of at least some individuals that haven’t responded to current psychological and medical interventions.

Keywords: Post-traumatic stress disorder; methylphenidate; Dopamine

EPP0953

A new player in the field: Methylphenidate in post-traumatic stress disorder treatment

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Introduction: Currently available psychotherapies and psychotropic drugs for post-traumatic stress disorder (PTSD) are poorly effective in a substantial proportion of patients. Dopaminergic dysfunction plays a prominent role in the pathophysiology of PTSD: intrusions, avoidance symptoms, anhedonia and emotional numbing. Dopamine reuptake inhibitors can be studied as novel drugs in PTSD treatment.

Objectives: Explore methylphenidate as a promising drug in PTSD treatment.

Methods: Case report presentation based on the review of clinical notes and non-systematic review of the PTSD therapeutics state-of-the-art.

Results: 9 men with an average age of about 35 years (54-14 years), who suffered a flare-up, with suicidal ideation. He was prescribed methylphenidate 36 mg, with progressive improvement, persisting mild PTSD residual symptoms.

Conclusions: There is enough evidence of the dopamine involvement in PTSD, although research on dopaminergic drugs is scarce. Methylphenidate may be promising in the treatment of at least some individuals that haven’t responded to current psychological and medical interventions.

Keywords: Post-traumatic stress disorder; methylphenidate; Dopamine