

## TEMPORAL SEQUENCING OF SYMPTOM CHANGES IN YOUNG PEOPLE RECEIVING TREATMENT FOR POSTTRAUMATIC STRESS DISORDER AND SUBSTANCE USE DISORDERS

Olivia Dobson<sup>1</sup> Natalie Peach<sup>1</sup> Emma Barrett<sup>1</sup>, Vanessa Cobham<sup>2</sup>, Joanne Ross<sup>1</sup>, Sean Perrin<sup>3</sup>, Sarah Bendall<sup>4</sup>, Sudie Back<sup>5</sup>, Kathleen Brady<sup>5</sup>, Maree Teesson<sup>1</sup>, Katherine L Mills<sup>1</sup>

<sup>1</sup>The Matilda Centre for Research in Mental Health and Substance Use, Level 6, Jane Foss Russell Building, G02, The University of Sydney, 2006, NSW, Australia

<sup>1</sup> The Matilda Centre for Research in Mental Health and Substance Use, University of Sydney, Australia

<sup>2</sup> School of Psychology, University of Queensland, Australia

<sup>3</sup>Department of Psychology, Lund University, Sweden

<sup>4</sup> Orygen National Centre of Excellence in Youth Mental Health, Parkville, Australia

<sup>5</sup> Department of Psychiatry and Behavioral Sciences, Medical University of South Carolina, Charleston, SC, USA

Presenter's email: [olivia.dobson@sydney.edu.au](mailto:olivia.dobson@sydney.edu.au)

**Introduction / Issues OR Introduction:** Posttraumatic Stress Disorder (PTSD) and substance use disorders (SUD) frequently co-occur in young people, and both disorders serve to maintain and exacerbate the other. Integrated treatments targeting both disorders are recommended, however little is known about how PTSD and substance use symptoms shift in relation to one another over the course of treatment. This study examined changes in PTSD symptom severity and substance use during treatment and the temporal sequencing of these changes.

**Method / Approach OR Methods:** Forty-nine young people participated in a randomised controlled trial comparing the efficacy of an integrated exposure-based treatment (COPE-A) to a supportive counselling control condition (PCT). Symptoms of PTSD and substance use were measured at each session with change over time analysed using generalised estimating equations. Spearman's correlations were used to examine relationships between early (session 1–5) and later (session 5–11) change in symptoms.

**Key Findings:** COPE-A participants showed significantly greater reductions in PTSD symptoms than those in PCT. No significant between-group differences were observed for changes in substance use frequency or quantity across time. PTSD symptom clusters tended to improve concurrently, but early changes did not predict later changes. Limited temporal relationships were observed in regards to substance use. PTSD symptom change was not associated with concurrent or subsequent changes in substance use.

**Discussions and Conclusions:** Integrated treatment for PTSD and SUD appears to produce greater reductions in PTSD symptom severity relative to supportive counselling. Contrary to research among adults, there appeared to be no relationship between changes in PTSD and substance use.

**Implications for Practice or Policy:** Early intervention is essential for young people with co-occurring PTSD and SUD, highlighting the critical need for further research into the temporal course of symptom change in integrated treatments to optimise intervention delivery for this population.

### **Disclosure of Interest Statement:**

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