

We found that **4.8%** of the participants fulfilled the DSM-5-TR diagnostic criteria for **PGD 8.5 years** after their traumatic loss.

Lower age and high levels of early somatic symptoms predicted higher PGD reactions almost a decade post-loss.



The Utøya Study.
Early predictors for prolonged grief post-terror

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Introduction

A better understanding of the development of prolonged grief disorder (PGD) can help professionals identify bereaved in need of intervention efforts. We aimed to examine the prevalence rate of and risk factors for prolonged grief disorder (PGD) in a sample of young, bereaved terror attack survivors 8.5-years post-loss.

Methods

165 bereaved survivors of the 2011 terror attack on Utøya island, Norway, participated. Early reactions (i.e., PTSR, anxiety/depression, somatic symptoms) were measured 4-5 months post-terror. PGD was measured 8.5 years post-terror.

Results

4.8% fulfilled the DSM-5-TR diagnostic criteria for PGD 8.5 years after their traumatic loss. Lower age and high levels of early somatic complaints predicted higher PGD reactions almost a decade post-loss.

Discussion

Young bereaved, and bereaved with early somatic symptoms, may be at particularly high risk of experiencing persistent grief reactions following a traumatic loss. Targeting somatic symptoms may alleviate the exacerbation of PGD reactions several years after the loss.