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Diagnostic instruments used to diagnose Posttraumatic Stress Disorder and measure symptom severity in randomized controlled trials

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Abstract

Randomized controlled trials (RCTs) of PTSD interventions use many different instruments to diagnose PTSD and assess symptom severity, which may limit the ability to compare findings across trials or pool data for meta-analysis. Understanding and comparing these differences can provide guidance on instrument selection for future research and evidence synthesis efforts. We analyzed data from the PTSD-Repository, a database of 318 PTSD RCTs on adults, to describe the instruments used, the assessment types (structured clinical interview, clinical diagnosis, or self-report questionnaire), and the relationship between assessment type and study characteristics (e.g., pharmacologic vs. nonpharmacologic). Across these RCTs, 26 different instruments were used to diagnose PTSD or measure patients' symptom severity. To diagnose PTSD, 63% of studies used a structured clinical interview, 15% used a clinical diagnosis, 10% used a self-reported survey, and 12% used multiple methods. The Clinician Administered PTSD Scale (CAPS) was the most common instrument used to diagnose PTSD (36.79%). To measure PTSD symptom severity, 67% of studies used structured clinical interviews and 33% used selfreported surveys. Pharmacologic studies primarily used the CAPS (71%) and the Impact of Event Scale (8%). Nonpharmacologic studies primarily used the CAPS (47%) and the PTSD Checklist (14%). There is significant variation in the instruments used to measure symptom severity. Prioritizing the use of PTSD symptom severity measures that are directly comparable would facilitate synthesis of PTSD outcome data across RCTs.