019 MILMED: Post-Traumatic Stress Disorder symptoms contribute to worse pain and health outcomes in veterans with PTSD compared to those without: A Systematic Review with Meta-Analysis

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Learning Outcomes

1. Identify the negative health outcomes when a Veteran has co-morbid PTSD and pain compared to a Veteran with only pain, including increased pain, disability, pain catastrophizing, sleep disturbance, and healthcare utilization, lower function and self-efficacy.
2. Review how PTSD may contribute to these negative health outcomes, including increased hypervigilance, symptoms become more threatening and disabling.
3. Review how depression may confound the contribution of PTSD towards negative health outcomes, including depression and PTSD frequently overlap with one another; in some studies where depression was controlled for, the impact of PTSD on negative health outcomes appeared to lessen.
4. Identify potential cognitive targets for therapy for individuals with co-morbid PTSD and pain, including self-efficacy, pain catastrophizing, and pain acceptance.

Disclosures

Authors have no relevant financial interests to disclose.
AffinityCE staff, AMSUS staff, planners, and reviewers have no relevant financial interests to disclose.

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Psychologist specific Learning Outcomes

1. Identify the negative health outcomes when a Veteran has co-morbid PTSD and pain compared to a Veteran with only pain, including increased pain, disability, pain catastrophizing, sleep disturbance, and healthcare utilization, lower function and self-efficacy.

2. Describe how PTSD may contribute to negative health outcomes including increased hypervigilance where symptoms become more threatening and disabling.

3. Analyze patient symptoms and identify the negative health outcomes and apply potential cognitive targets for therapy for individuals with co-morbid PTSD and pain, including self-efficacy, pain catastrophizing, and pain acceptance including increased pain, disability, pain catastrophizing, sleep disturbance, and healthcare utilization; lower function and self-efficacy.

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