

Spring

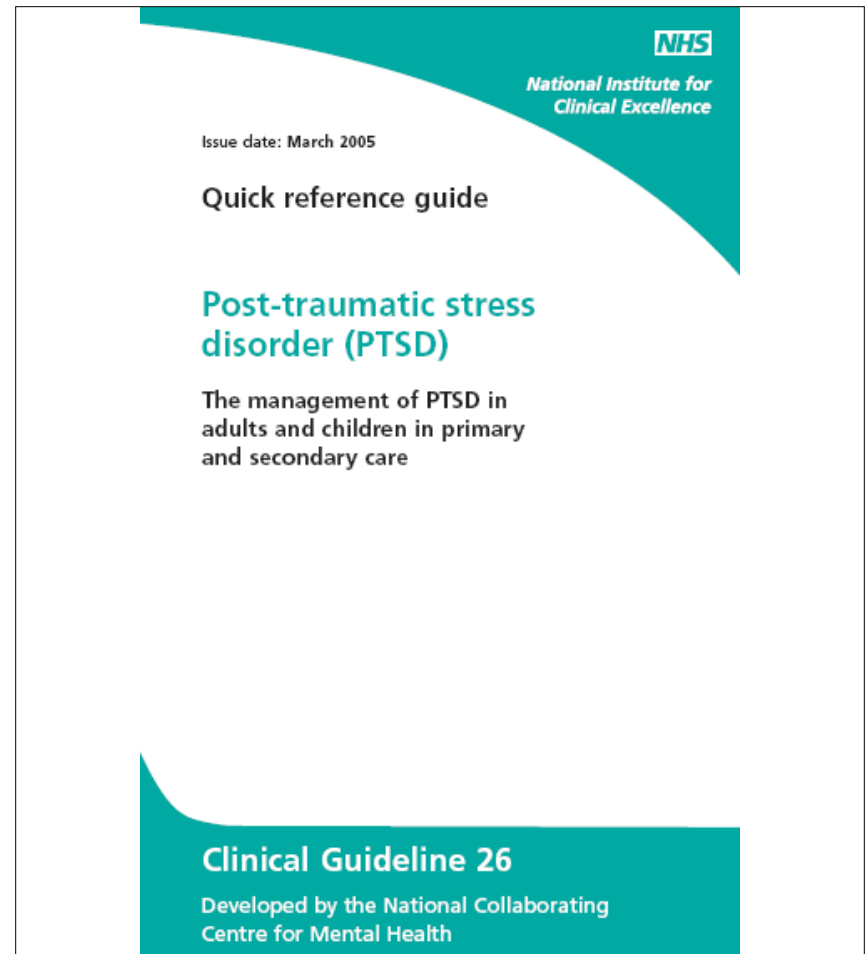
Dr Neil Kitchiner

Veterans' NHS Wales
&
Cardiff University



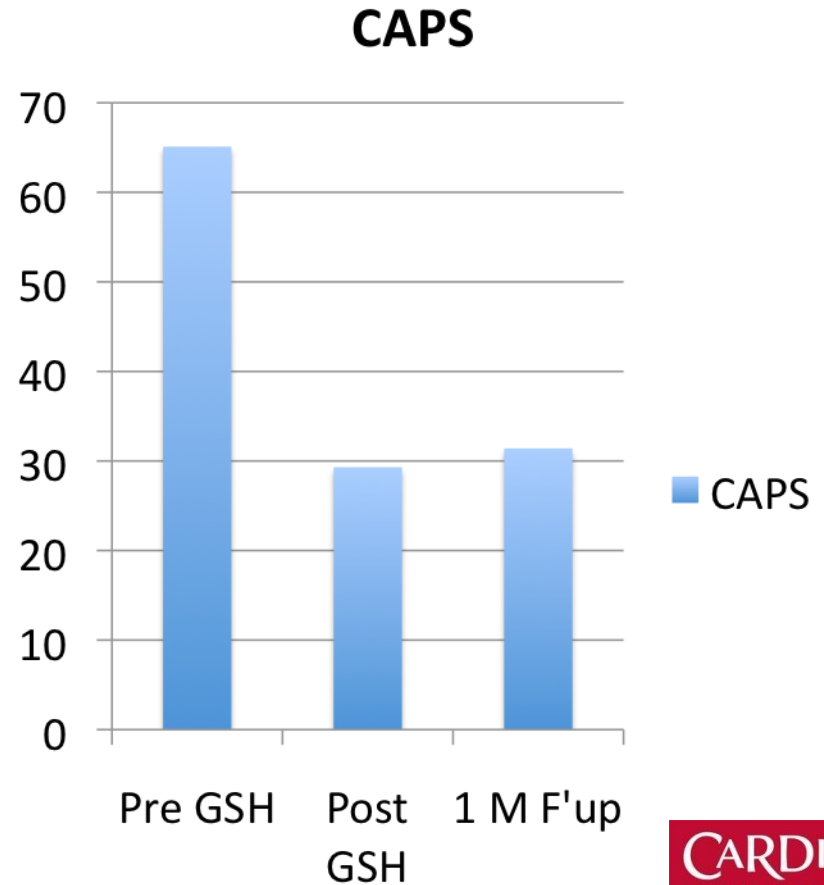
NICE Research Recommendation

- RCT of newly developed GSH materials based on trauma-focused psychological interventions to assess the efficacy and cost-effectiveness of GSH compared with TFPT for mild and moderate PTSD



Dr Catrin Lewis (PhD - Pilot 1 & 2)

- Acceptable
- Empowerment
- Refine diary



Phase I Development

DEPRESSION AND ANXIETY 00:1–8 (2013)

Research Article

DEVELOPMENT OF A GUIDED SELF-HELP (GSH) PROGRAM FOR THE TREATMENT OF MILD-TO-MODERATE POSTTRAUMATIC STRESS DISORDER (PTSD)

Catrin Lewis, Ph.D.,^{1*} Neil Roberts, D.Clin.,² Tracey Vick, Ph.D.,³ and Jonathan I. Bisson, D.M.⁴

Knowledge Transfer Partnership

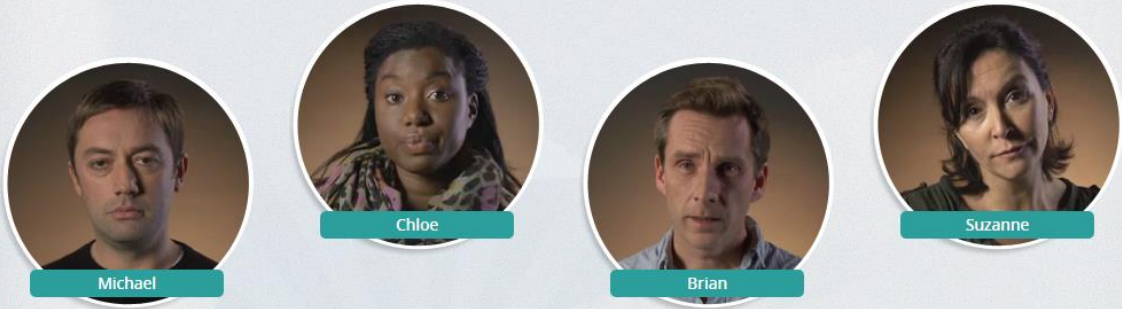
- Healthcare Learning Company
 - Technology-led provider in healthcare education
- Online programme developed
 - *Spring*
- Therapist input
 - One hour initial meeting
 - Four fortnightly 30 min meetings
 - Weekly and as required contact
- Evaluated through a Phase II RCT

Spring - 8 Steps

Step 1: Learning About My PTSD

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What is Post Traumatic Stress Disorder?




Michael Chloe Brian Suzanne

You can find out about the traumas Michael, Chloe, Brian and Suzanne went through, by selecting each of their pictures in turn

[Take another step](#) [Pause](#) [Back](#) 3 of 5 [Next](#)

Spring tool kit



[Click to show toolkit](#)

Tool Kit

Spring tool kit

Click to hide toolkit



My Symptoms



My Grounding



My Relaxation



My Life



My Trauma



My Thoughts



My Fears



My Future

⬅ back to tools

Clinician site



a step-by-step treatment for PTSD



Patients



Help

Manage Patients

Enter all or part of the patient's name or email address

Search

Patient name	Email id	Actions	Status
Patient 1 Test	hlcsmileon+patient1@gmail.com	View Patient Steps - Step 1 Step 4 Step 5 Step 6 Step 7 Step 8	Started

RESEARCH ARTICLE



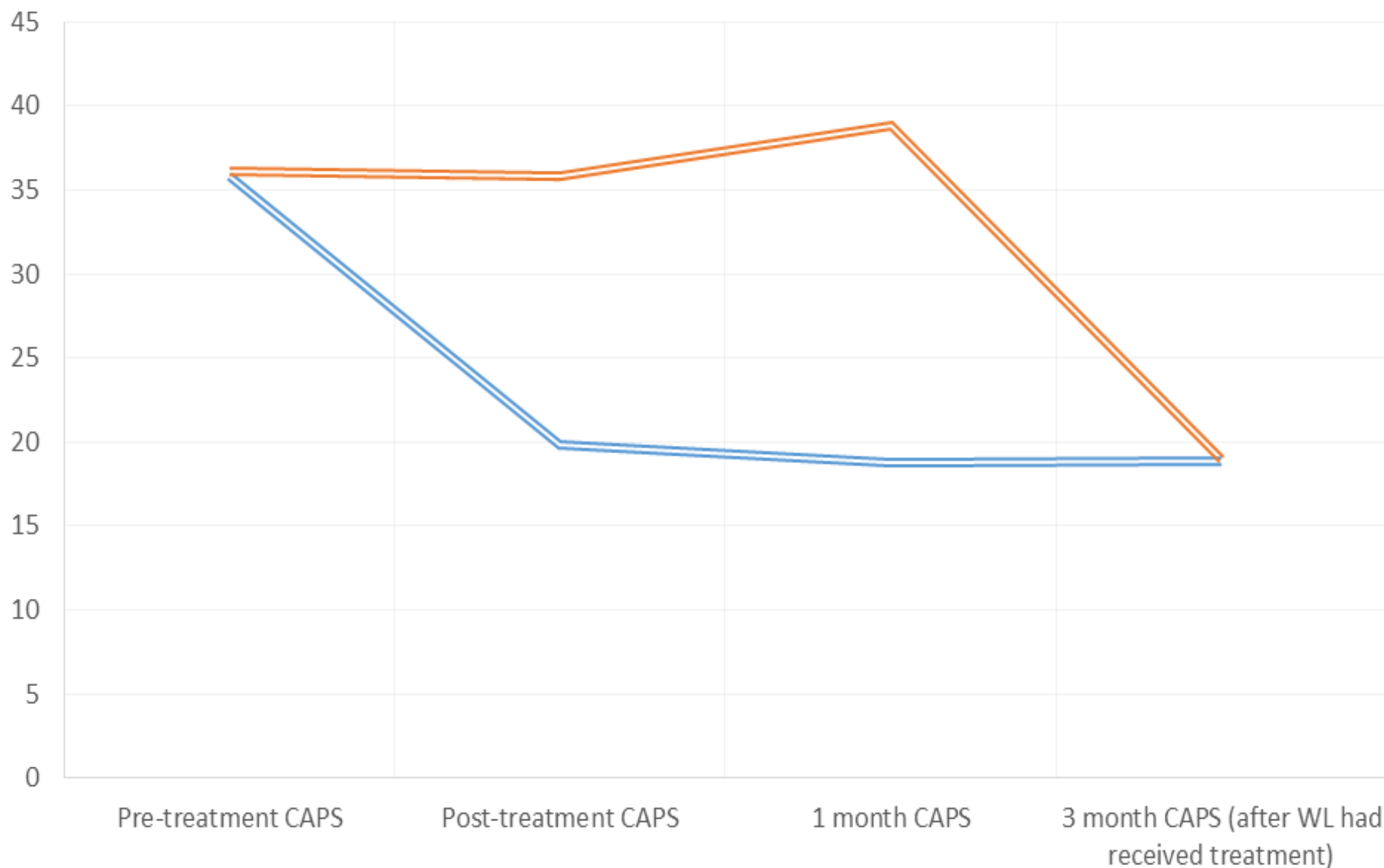
Internet-based guided self-help for posttraumatic stress disorder (PTSD): Randomized controlled trial

Catrin E. Lewis¹ | Daniel Farewell¹ | Vicky Groves¹ | Neil J. Kitchiner² |
Neil P. Roberts² | Tracey Vick² | Jonathan I. Bisson¹

Depression & Anxiety 2017, 34(6), 555-565.

INTENTION TO TREAT

Guided Self Help Waiting List



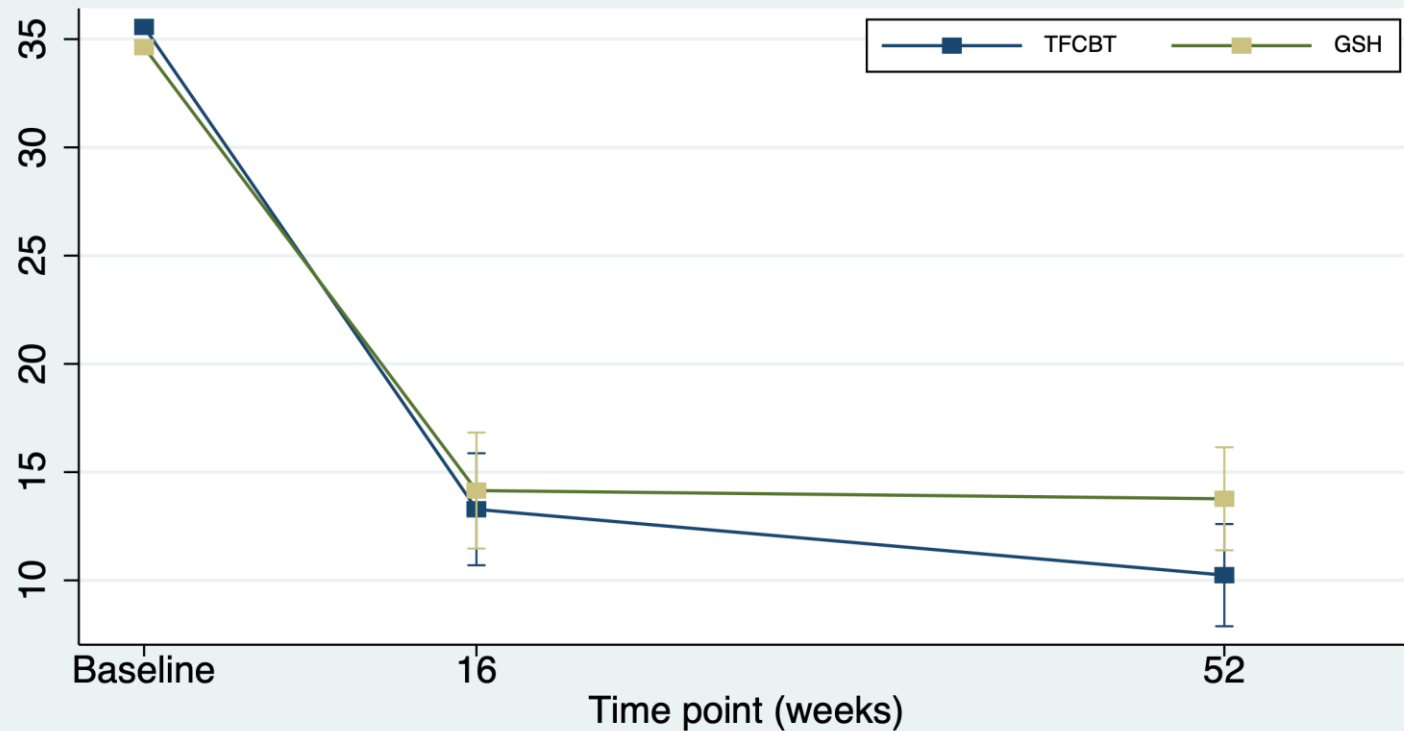
Final Site Recruitment Figures

Cardiff and Vale: 85
Coventry and Warwickshire: 20
Cwm Taff: 20
London: 7
NHS Luthien: 34
Pew Vale: 27
S.W. Yorkshire: 3

CONSORT Statement for the RAPID Study (ISRCTN 13697710)



Adjusted Mean CAPS-5 Scores over Time



Note: CI = confidence interval; CAPS-5 = Clinician-Administered PTSD Scale for DSM-5; GSH = Guided Self Help; TFCBT = Trauma Focussed Cognitive Behavior Therapy.
Means at 16 and 52 weeks adjusted for the following variables at baseline: CAPS-5 score, gender, research centre, co-morbid depression (baseline PHQ-9) and time since trauma (months).

Conclusions

- The RAPID trial showed GSH using *Spring* to be a clinically effective, cheaper, well-tolerated and non-inferior treatment to face-to-face CBT-TF for people with mild to moderate PTSD to a single trauma
- The results should provide more choice and facilitate improvements to current care pathways for people with PTSD that result in improved health and wellbeing

Health Economic Evaluation

- Face-to-face therapy appointments

	<i>Spring</i> GSH	Face-to-face CBT-TF
Mean N appointments	3.9	8.6
Mean total time	208 minutes (SD 69.3)	767 minutes (SD 278.2)

- The cost of therapy was calculated as time in face-to-face sessions, phone calls, and non-contact time for note taking.



	<i>Spring</i> GSH	Face-to-face CBT-TF
Mean cost of therapy	£277	£729



Guided, internet based, cognitive behavioural therapy for post-traumatic stress disorder: pragmatic, multicentre, randomised controlled non-inferiority trial (RAPID)

Jonathan I Bisson,¹ Cono Ariti,² Katherine Cullen,³ Neil Kitchiner,^{1,4} Catrin Lewis,¹ Neil P Roberts,^{1,4} Natalie Simon,¹ Kim Smallman,² Katy Addison,² Vicky Bell,⁵ Lucy Brookes-Howell,² Sarah Cosgrove,¹ Anke Ehlers,⁶ Deborah Fitzsimmons,³ Paula Foscari-Craggs,² Shaun R S Harris,³ Mark Kelson,⁷ Karina Lovell,⁵ Maureen McKenna,⁸ Rachel McNamara,² Claire Nollell,² Tim Pickles,² Rhys Williams-Thomas²

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Additional material is published online only. To view please visit the journal online.

Cite this as: *BMJ* 2022;377:e069405
<http://dx.doi.org/10.1136/bmj-2021-069405>

Accepted: 04 May 2022

ABSTRACT OBJECTIVE

To determine if guided internet based cognitive behavioural therapy with a trauma focus (CBT-TF) is non-inferior to individual face-to-face CBT-TF for mild to moderate post-traumatic stress disorder (PTSD) to one traumatic event.

DESIGN

Pragmatic, multicentre, randomised controlled non-inferiority trial (RAPID).

SETTING

Primary and secondary mental health settings across the UK's NHS.

PARTICIPANTS

196 adults with a primary diagnosis of mild to moderate PTSD were randomised in a 1:1 ratio to one of two interventions, with 82% retention at 16 weeks and 71% retention at 52 weeks. 19 participants and 10 therapists were purposively sampled and interviewed for evaluation of the process.

INTERVENTIONS

Up to 12 face-to-face, manual based, individual CBT-TF sessions, each lasting 60-90 minutes; or guided internet based CBT-TF with an eight step online programme, with up to three hours of contact with a therapist and four brief telephone calls or email contacts between sessions.

MAIN OUTCOME MEASURES

Primary outcome was the Clinician Administered PTSD Scale for DSM-5 (CAPS-5) at 16 weeks after

randomisation (diagnosis of PTSD based on the criteria of the *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition, DSM-5). Secondary outcomes included severity of PTSD symptoms at 52 weeks, and functioning, symptoms of depression and anxiety, use of alcohol, and perceived social support at 16 and 52 weeks after randomisation.

RESULTS

Non-inferiority was found at the primary endpoint of 16 weeks on the CAPS-5 (mean difference 1.01, one sided 95% confidence interval $-\infty$ to 3.90, non-inferiority $P=0.012$). Improvements in CAPS-5 score of more than 60% in the two groups were maintained at 52 weeks, but the non-inferiority results were inconclusive in favour of face-to-face CBT-TF at this time point (3.20, $-\infty$ to 6.00, $P=0.15$). Guided internet based CBT-TF was significantly ($P<0.001$) cheaper than face-to-face CBT-TF and seemed to be acceptable and well tolerated by participants. The main themes of the qualitative analysis were facilitators and barriers to engagement with guided internet based CBT-TF, treatment outcomes, and considerations for its future implementation.

CONCLUSIONS

Guided internet based CBT-TF for mild to moderate PTSD to one traumatic event was non-inferior to individual face-to-face CBT-TF and should be considered a first line treatment for people with this condition.

TRIAL REGISTRATION

ISRCTN13697710.

WHAT IS ALREADY KNOWN ON THIS TOPIC

Face-to-face trauma focused psychological treatments are recommended as first line for post-traumatic stress disorder (PTSD)

Guided self-help with internet based programmes based on cognitive behavioural therapy with a trauma focus has been recommended as an alternative, but whether guided self-help is non-inferior to current first line treatments has not been established

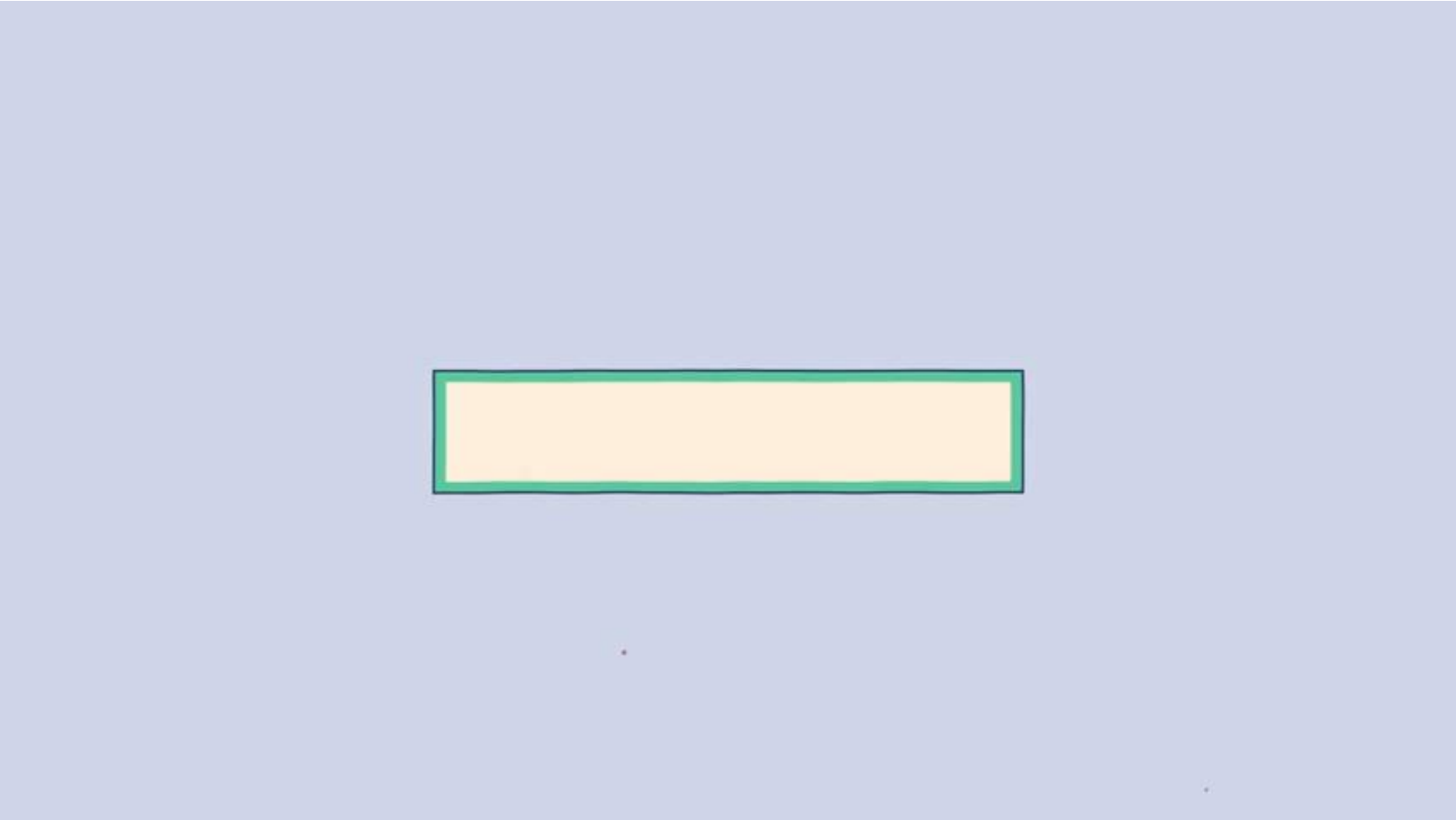
WHAT THIS STUDY ADDS

Guided internet based cognitive behavioural therapy with a trauma focus was found to be non-inferior to and cheaper than face-to-face cognitive behavioural therapy with a trauma focus at 16 weeks

Guided internet based cognitive behavioural therapy with a trauma focus should be made available as a low intensity treatment option for people with mild to moderate PTSD to one traumatic event

Introduction

Post-traumatic stress disorder (PTSD) is a common mental health condition that can develop after experiencing traumatic events that involve threatened or actual death, serious injury, or sexual violence. Characteristic symptoms include re-experiencing, avoidance, and a current sense of threat.^{1 2} About 4% of the adult population of the UK have PTSD³ and symptoms can last for many years if not treated.⁴ PTSD is strongly associated with substantial physical and mental health comorbidity,^{5 6} and major economic burden.⁷ People with PTSD often report marked negative effects on their functioning in occupational, home management, social, and private leisure situations. Individual face-to-face trauma focused psychological treatments, especially



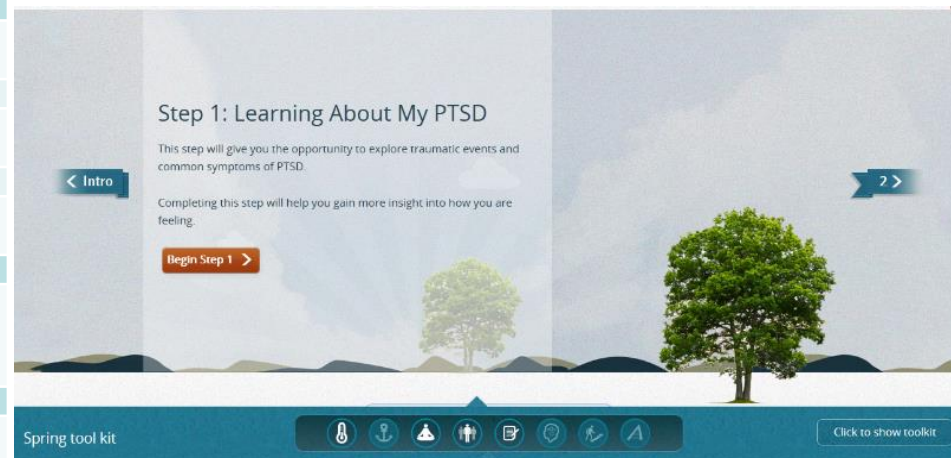
Roll out of Spring

- Two half day trainings
- Background
- Introduction to Spring website and app
- Walk through the therapist manual and web pages
- Discussion of the 8 steps
- Test it out with colleagues for homework
- Treat two people with PTSD with fortnightly group supervision
- Sign-off as trained – Graduate with a Certificate from Traumatic Stress Wales & completed two cases



a step-by-step treatment for PTSD

Face-to-face guidance	Steps to be introduced	Tools/ techniques
Guidance session 0: (week 0) Approximately 60 minutes	Step1: Learning About My PTSD	My symptoms
	Step 2: Managing My Anxiety	My Relaxation
	Step 3: Grounding Myself	My Grounding
Guidance session 1: (week 2) approximately 30 minutes	Step 4: Reclaiming My Life	My Life
	Step 5: Coming to Terms With My Trauma	My Trauma
Guidance session 2: (week 4) approximately 30 minutes	Step 6: Changing My Thoughts	My Thoughts
		Letter to a Friend
	Step 7: Overcoming My Avoidance	My Fears
Guidance session 3: (week 6) approximately 30 minutes	Step 8: Keeping Myself Well	My Future
Guidance session 4: (week 8) approximately 30 minutes	Review / discuss completed Step 8: Keeping myself well	

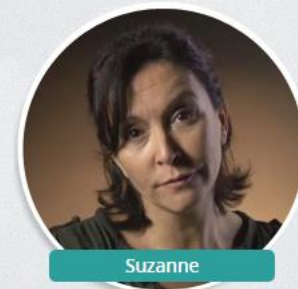
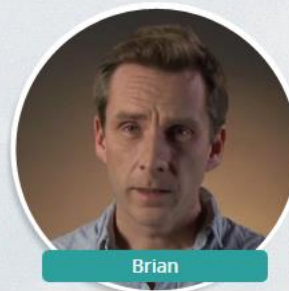
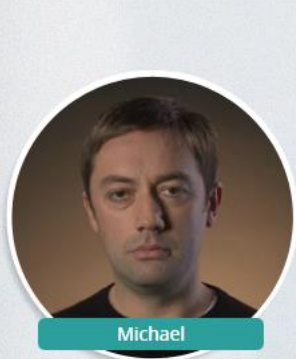


Case examples

Step 1: Learning About My PTSD

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What is Post Traumatic Stress Disorder?



You can find out about the traumas Michael, Chloe, Brian and Suzanne went through, by selecting each of their pictures in turn

[Take another step](#)

[Pause](#)

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Step 1 – Learning about PTSD

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Step 1: Learning About My PTSD

This step will give you the opportunity to explore traumatic events and common symptoms of PTSD.

Completing this step will help you gain more insight into how you are feeling.

[Begin Step 1 >](#)

[< Intro](#)

[2 >](#)

Step 2 – Grounding Myself

Step 2: Grounding Myself

This step will give you the opportunity to try techniques that you can use when you are feeling anxious, panicky, or having a flashback.

Completing this step will help you master some grounding techniques that you can use as you go through the programme.

Begin Step 2 >

3 >



Spring tool kit



Click to show toolkit

Step 3 - Relaxation

Step 3: Managing My Anxiety

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My Relaxation

Controlled Breathing

Progressive Muscle
Relaxation

Guided Imagery

Try some relaxation techniques by selecting each in turn

[← Take another step](#)

[|| Pause](#)

[← Back](#)

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[Next →](#)

Step 4 – Reclaiming my life

Patient 1 Test

[Logout](#)

Step 4: Reclaiming My Life

This step will give you the opportunity to explore the link between PTSD and becoming less active.

Completing this step will help you get back to activities you used to enjoy or try some new hobbies.

[Begin Step 4 >](#)

< 3

5 >

Setting goals

Step 4: Reclaiming My Life

Patient 1 Test

[Logout](#)

SMART Goals

S = Specific – A goal should be clearly defined. How, when and where will the goal be attained?


M = Measurable – A goal needs to be measurable. How will you know when a goal has been achieved?

A = Attainable – A goal should be something you know you can do. Do you have the ability and resources required to attain the goal?

R = Realistic – A goal needs to be realistic. Are you willing and able to work towards the goal? Be honest with yourself.

T = Timely – A goal must have a timeframe. We recommend one week.



A decorative illustration of a branch with several teal-colored leaves, positioned on the left side of the page. The leaves are layered, with some appearing more prominent than others, creating a sense of depth. The branch extends from the left towards the center of the page.

PTSD and Coming to Terms with What Happened

Write your own story as though it is happening again

Use grounding and relaxation techniques

Include as much detail as you possibly can

Re-visit your story anytime by opening it in your toolkit

Step 6 – Changing thoughts

Step 6: Changing My Thoughts

Patient 1 Test



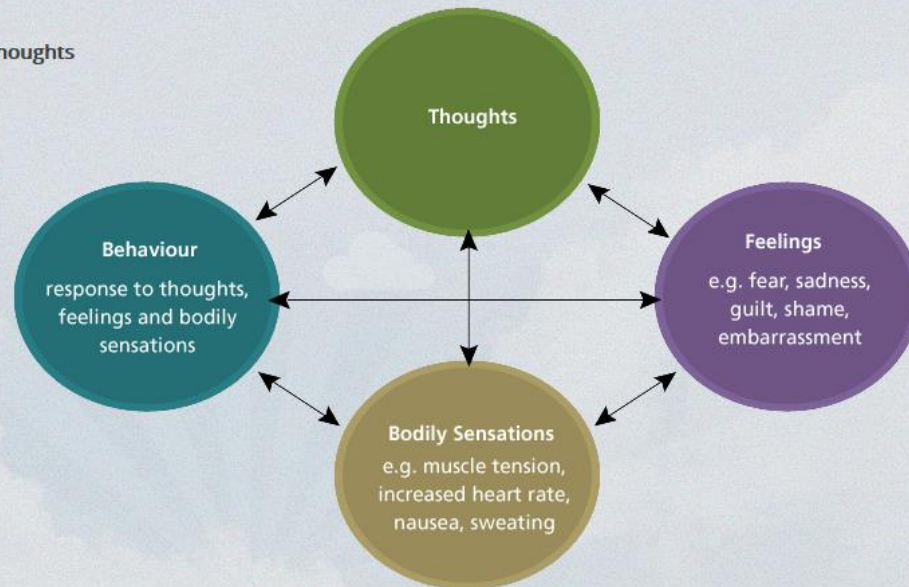
PTSD and Unhelpful Thoughts

Step 6 – Changing thoughts

Step 6: Changing My Thoughts

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PTSD and Unhelpful Thoughts



[Take another step](#)

[Pause](#)

[Back](#)

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Step 6 – Pie chart

Step 6: Changing My Thoughts

Catrin Lewis

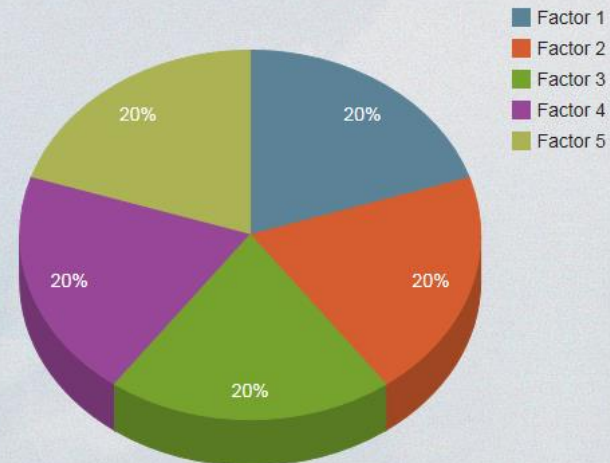
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Pie Chart of Responsibility

Enter all of the factors responsible for what happened and assign a percentage of the blame to each

Factor	%
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

[save](#)



[Take another step](#)

[Pause](#)

[Back](#)

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[Next](#)

Therapeutic letter

Take a few moments to think about some of the ways in which the traumatic event continues to trouble you. Imagine a good friend of yours has experienced the same or a very similar event and that they are thinking and feeling in the same kind of way that you are. Please write a supportive letter to your friend. Try to give your friend advice about how to handle and cope with the situation and how to look at the situation differently. What would you tell them?

save

Step 7 – Overcoming avoidance

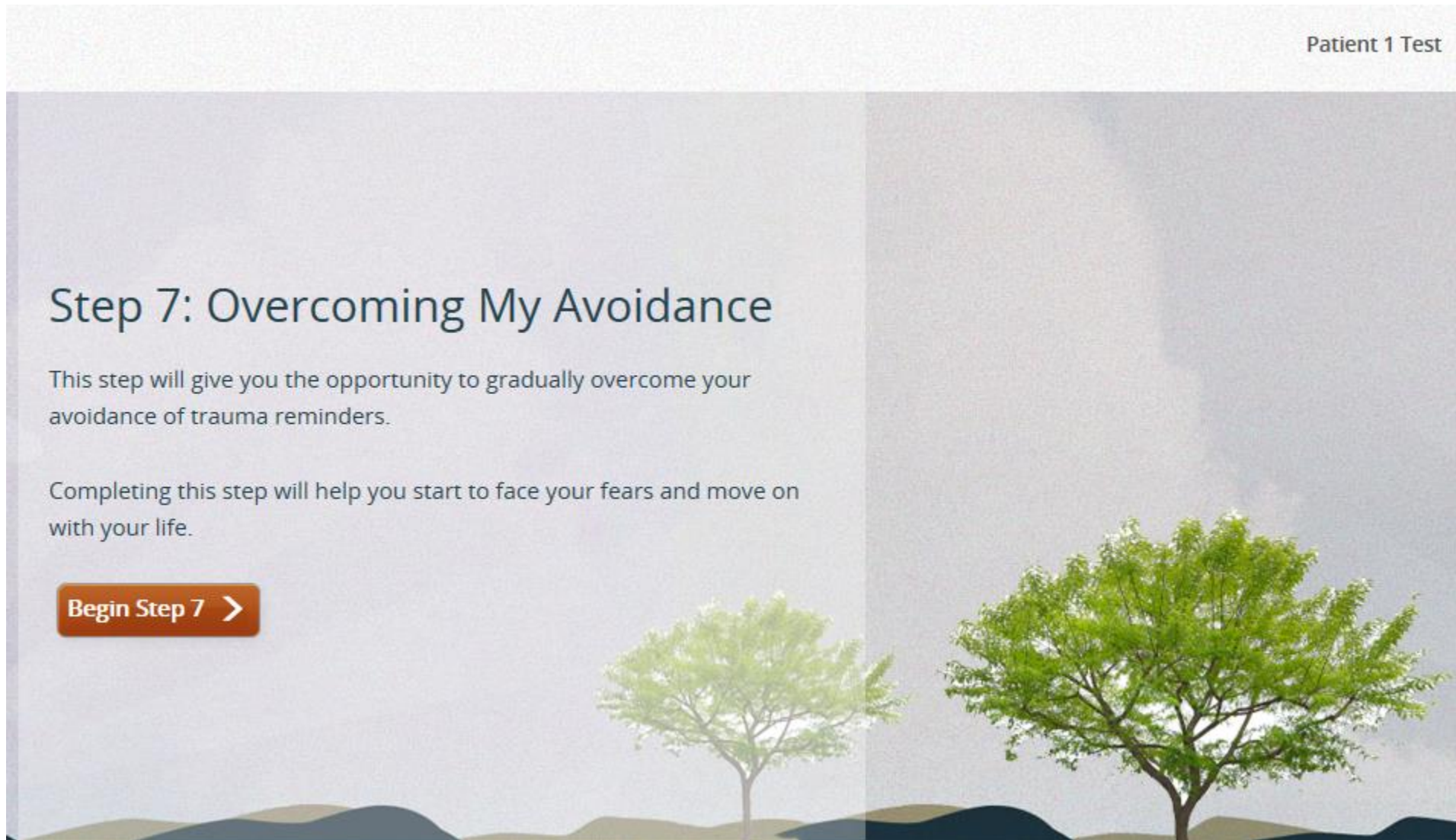
Patient 1 Test

Step 7: Overcoming My Avoidance

This step will give you the opportunity to gradually overcome your avoidance of trauma reminders.

Completing this step will help you start to face your fears and move on with your life.

Begin Step 7 ➤



Avoidance hierarchy

Step 7: Overcoming My Avoidance

Week 1

Add week +

Chloe's Fear Ladder

Reading a newspaper containing stories about crime	1	✕	✓ Complete	✕ Incomplete
Watching the news	2	✕	✓ Complete	✕ Incomplete
Watching a violent film	3	✕	✓ Complete	✕ Incomplete
Looking at a knife	4	✕	✓ Complete	✕ Incomplete
Holding a knife	5	✕	✓ Complete	✕ Incomplete
Walking around the neighbourhood the attack happened	8	✕	✓ Complete	✕ Incomplete
Going back to where the attack happened	10	✕	✓ Complete	✕ Incomplete

Step 8 – Relapse prevention

Patient 1 Test

Step 8: Keeping Myself Well

This step will help you explore ways of preventing a relapse of your traumatic stress symptoms.

Completing this step will help you reflect on your achievements and keep yourself well in the future.

Begin Step 8 >





spring

a step-by-step treatment for PTSD