

## 1-051

### Presentation of the Impact of Trauma Questionnaire (CIT): design, development and initial results

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*Background:* Psychological consequences of traumatic events are diverse. However, psychological assessment of the impact of traumatic events is mainly focused on detecting Posttraumatic Stress Disorder (PTSD), which could sometimes not be sufficient (Courtois, 2004). So far, the only available instrument to assess the wide impact of trauma beyond PTSD, is Trauma Symptom Inventory-2 (Briere, 2011), which is not adapted to Spanish and has not been validated with Spanish populations. *Objective:* The current study aims to design a Spanish self-report questionnaire to assess the global impact of traumatic events in adults, including validity scales in order to enable it to be used not only in clinical but also in forensic contexts. It is named Impact of Trauma Questionnaire (CIT according to its initials in Spanish – Cuestionario de Impacto del Trauma) and will be validated in Spanish population from community, clinical and forensic settings. *Method and Results:* Questionnaire include information about the following areas: posttraumatic symptoms, general symptoms, changes in beliefs and values and general functioning after a traumatic event, besides the validity scales. The development process, the structure of the questionnaire and the items will be presented. Moreover, items generation and selection process will be described. Additionally, preliminary reliability analysis in community sample ( $n = 1,000$ ) will be reported. *Conclusions:* Implications about CIT applicability and limitations will be discussed.

## 1-052

### Is the current definition of the PTSD gate criterion adequate for people with ID?

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*Background:* Current diagnostic manuals provide a strict definition of the PTSD gate criterion (American Psychiatric Association, 2013). It is unclear, whether this definition can be generalized to the vulnerable group of people with intellectual disabilities (ID) (Fletcher, 2016; Wigham & Emerson, 2015). *Objective:* This study aims to test the adequacy of the gate criterion for people with ID. *Method:* We assessed biography and current symptoms of trauma sequelae in a

sample of 49 adults with mild to moderate ID and 43 caregivers. We calculated the impact of life events currently included in the current definition of the gate criterion and adverse events going beyond this definition on current symptoms of trauma sequelae in people with ID. *Results:* Self-report data showed no additional impact of adverse events on current symptoms of trauma sequelae over and above traumatic events. There was a difference between findings depending on the conceptualization of trauma sequelae. Behavioral symptoms reflect the impact of traumatic and adverse events better than introspective symptoms, such as intrusions or avoidance. Informant data suggest no additional impact of adverse events over and above traumatic events. *Conclusions:* The current findings suggest an adequacy of the gate criterion for people with mild to moderate ID. Exploring behavioral symptoms seem to be a proper way to explore traumatic biography and trauma sequelae. The current findings are limited through a small and pre-selected sample. This has important clinical implications for psychoeducation and trainings for caregivers. Further research is needed to gain understanding of introspective symptoms.

## 1-053

### The Relation between Anxious Personality Traits and Fear Generalization in Healthy Subjects: A Systematic Review and Meta-Analysis

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*Background:* Anxious personality characteristics form a risk factor for anxiety disorders, but the mechanism remains unclear. Anxious personality could lead to greater vulnerability by increasing fear generalization. *Objective:* Here, we investigate if high anxious personality correlates to increased fear generalization in a meta-analysis. *Methods:* Our search (anxious personality & fear generalization) was performed in PubMed, PsychInfo and Embase and via snowballing. *Results:*  $N = 4895$  studies were screened based on title and abstract. Twenty-three studies with data on 1303 healthy participants were included in the current study, of which 1082 participants were used in the quantitative analysis. The meta-analysis shows that there is a significant, small, positive relationship between anxious personality and fear generalization ( $r = .20$ , 95% CI [.137, .263],  $p < .001$ ). No moderators of the relationship were identified. *Conclusions:* The meta-analysis identifies the relation between personality and fear generalization in healthy subjects, as an overall small correlation was established. This suggests that people who score high on anxious

personality have a somewhat stronger tendency to generalize fear to safe or novel situations, which may explain mechanistically why these individuals are at higher risk for developing anxiety disorders.

## 2. Track: Biological & Medical

### 2-001

#### Scoping the Evidence for Learning Theories on PTSD in Veterans

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**Background:** About 5–13% of Dutch veterans experience PTSD after being deployed (Eekhout et al. 2016). Although effective treatments for PTSD are available, response rates are lower amongst veterans (Watts et al., 2013). Learning theories have been postulated to underlie PTSD (Lissek and van Meurs, 2015). Here, we investigate the empirical evidence from veterans with PTSD for these theories. If we reveal which learning mechanisms are specifically altered in veterans with PTSD, feasible lab-models can be studied and future clinical decision making can be directed accordingly. **Objective:** Creating a systematic overview of empirical (clinical) evidence for learning models for PTSD in veterans. **Method:** A systematic search was performed in PubMed. Original studies written in English were included investigating veterans with PTSD and a learning theory. Articles were screened by AF and AK independently. **Results:** In total, 2167 articles were screened and 101 met our inclusion on the following theories: Amygdala Kindling ( $n = 30$ ), Reduced Fear Inhibition ( $n = 17$ ), Resistance to Extinction ( $n = 15$ ), Stress Sensitization ( $n = 11$ ), Overgeneralization ( $n = 7$ ), Failure to Habituate ( $n = 5$ ), Hyper-Conditionability ( $n = 3$ ), Associative Learning Deficits ( $n = 3$ ), Incubation ( $n = 1$ ), Two-Stage Learning ( $n = 1$ ) and Failure to Inhibit Fear in the presence of safety cues ( $n = 0$ ). **Conclusions:** Our systematic search shows evidence for Amygdala Kindling, Reduced Fear Inhibition, and Resistance to Extinction for veterans with PTSD. Other theories are less frequently investigated, revealing a research gap. The evidence supports that these mechanisms

can be investigated in lab-models to develop interventions.

### 2-002

#### Craving Moderates the Effects of Intranasal Oxytocin on Anger in Response to Social Stress among Veterans with Co-Occurring PTSD and Alcohol Use Disorder

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**Background:** Posttraumatic stress disorder (PTSD) and alcohol use disorder (AUD) commonly co-occur among US military veterans. Oxytocin holds promise for the treatment of both PTSD and AUD. However, the social salience hypothesis (Shamisay-Tsoory et al., 2016) posits that oxytocin may amplify an individual's pre-existing social inclinations rather than exclusively enhancing prosocial behaviour. Anger and aggression are well-established negative consequence of PTSD and AUD. **Objective:** We examined the moderating role of alcohol craving in the relation between oxytocin treatment and anger using the Trier Social Stress Task (TSST). **Method:** We used a randomized, double-blind, placebo-controlled design in a sample of male veterans ( $N = 67$ ) with co-occurring PTSD and AUD. Participants self-administered oxytocin (40 IU) 45 minutes prior to the start of the TSST, then self-reported subjective alcohol craving and anger using a modified version of the Visual Analogue Scale (VAS) immediately following the TSST. Multiple regression analysis including main effects for group and baseline craving, and their interaction, was used to predict anger. Covariates included age, smoking, past 60-day alcohol use, PTSD symptom severity, self-reported aggression and baseline anger ratings. **Results:** A marginally significant interaction effect emerged ( $\beta = -.71, p < .06$ ). Post-hoc probing indicated that higher baseline alcohol craving was associated with increases in anger for participants in the oxytocin group ( $\beta = .50, p < .05$ ). Baseline craving was not associated with increases in anger in the placebo group. **Conclusions:** Findings suggest that future