



Symposia

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population who were exposed to prolonged violence. ITIs was conducted in two 60–90-minute sessions. Our results are based on debriefing interviews with patients ($n=12$) and with the clinician who performed assessments, along with clinical field notes.

Results & Conclusions: Findings focus on general impressions of ITI implementation within our target population (e.g. challenges using the index trauma approach in individuals with high cumulative trauma histories); further adaptations to our cultural and structural addendum for use in a same-culture setting (e.g. item reformulation or omission). Preliminary analyses indicate acceptability, feasibility, and clinical utility for diagnosis and therapeutic rapport-building.

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Innovative internet-based interventions for the treatment of disorders related to trauma and loss

Odeta Gelezelyte¹, **Jonathan Bisson**², **Neil Kitchiner**³, **Maria Bragesjö**⁴, **Catrin Lewis**², **Bronwen Thomas**², **Neil Roberts**³, **Michelle Smalley**⁵, **Marylene Cloitre**⁶, **Thanos Karatzias**⁷, **Gabriella Dattero Snell**², **Greta Guogaite**¹, **Auguste Nomeikaite**¹, **Evaldas Kazlauskas**¹, **Volen Z. Ivanov**⁴, **Erik Andersson**⁸ and **Christian Rück**⁴

¹Centre for Psychotraumatology, Vilnius University, Vilnius, Lithuania; ²Division of Psychological Medicine and Clinical Neurosciences, Cardiff University School of Medicine, Cardiff, UK; ³Cardiff & Vale University Health Board, Cardiff, UK; ⁴Centre for Psychiatry Research, Department of Clinical Neuroscience, Karolinska Institutet, & Stockholm Health Care Services, Region Stockholm, Stockholm, Sweden; ⁵Cwm Taf Morgannwg University Health Board, UK; ⁶NYU Silver School of Social Work, New York, USA; ⁷Napier Edinburgh University, Edinburgh, UK; ⁸Department of Psychology, Department of Clinical Neuroscience, Karolinska Institute, Stockholm, Sweden

Track: Intervention Research & Clinical Studies

Outline: Digital interventions could improve access to treatments for mental disorders. The field of application of digital technologies to treat stress-related disorders is undergoing rapid developments, and the need for research is high. In the current symposium, we will present novel guided internet-based interventions for disorders related to trauma and loss (PTSD, complex PTSD, and PGD). Digital interventions presented in the symposium are based on various trauma-focused approaches, e.g. CBT, PE, ESTAIR. The symposium will cover the diversity of treatments in terms of levels of severity and complexity of posttraumatic stress disorder (PTSD and complex PTSD) and the application of digital interventions to specific samples from the general population, clinical setting, and military. We will also discuss the advantages and challenges associated with the use of internet-based interventions for the treatment of trauma-related disorders and the potential for implementation of these interventions in healthcare.

179.1

Digital guided therapy for post-traumatic stress disorder (PTSD) for military veterans

Neil Kitchiner

Cardiff & Vale University Health Board, Cardiff, UK

Background: Post-traumatic stress disorder (PTSD) is an important mental illness amongst military veterans with an estimated prevalence of around 7%. Many veterans have complex presentations and do not always respond as well as other populations to standard evidence-based treatments.

Objective: To develop and pilot test a bespoke version of the Spring guided self-help programme for PTSD with military veterans that retains its effective components but focuses on the typical experiences and presentations of veterans with PTSD.

Method: We conducted focus groups with military veterans to inform a prototype intervention. We then pilot tested the intervention with 10 military veterans with PTSD seeking treatment through Veterans' NHS Wales service. We have collected and analysed quantitative outcome measures and data from qualitative interviews with veterans and therapists.

Results: This work has resulted in a digital guided therapy for military veterans with PTSD that has been co-produced with lived experience experts and refined through pilot testing. The quantitative and qualitative results from the pilot will help us plan a feasibility RCT of Military Spring.

Conclusions: We have created a treatment option for veterans with PTSD that is ready to be further evaluated and implemented to reduce treatment waiting times and offer a less expensive, flexible alternative to face-to-face treatment.