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### Medically related post-traumatic stress and EMDR in children and adolescents with congenital heart defects

**Background:** About three in every 10 children and adolescents admitted to a hospital or undergoing invasive and/or painful surgery develop increased (subclinical) symptoms of PTSS. In addition, about one in 10 children even develop a post-traumatic stress disorder (PTSS). Unfortunately, symptoms of unprocessed medical trauma are still poorly recognized. From research it is known that if elevated PTSS symptoms in children are left untreated, this can have a serious impact on their quality of life, psychosocial functioning and can result lead to long term psychiatric complaints. In the Dutch multidisciplinary guidelines for mental health institutions, trauma-focused cognitive behavioral therapy and EMDR are recommended for treating posttraumatic stress complaints. Many psychologists already use EMDR successfully in their daily clinical practice. EMDR works faster, requires less treatment sessions, is considered less stressful for the patient and therefore fits well in the psychosocial care given in a children's hospital. Remarkably, the effectiveness of EMDR in medical untreated trauma in children has not previously been systematically investigated. In the Erasmus-MC Sophia Children's Hospital, Rotterdam, a randomized controlled trial (RCT) is being conducted into the effectiveness of EMDR in children/adolescents with a medical related trauma.

**Design:** A randomized, controlled intervention study (RCT).

**Method:** Included are children/adolescents aged four to 16 who have undergone a one-time (trauma type 1) or repeated (trauma type 2) hospital admission/medical treatment up to 5 years ago. Participating children are screened for increased PTSS symptoms (partial PTSS). All children with partial PTSS are then randomly assigned to: standardized EMDR or care as usual (CAU=medical care only).

**Results:** The data collection will last from July 2016 to February 2018. During the period from July 2016 to April 2017, 116 participants completed the pre-measurement. Of these, 67% were symptom-free, 28% had subclinical symptoms and 5% had PTSS. The first results of the complete screening assessment will be presented and discussed during the conference.

**Discussion:** The vast majority of children undergoing hospitalization or surgery are not structurally screened for PTSS complaints and do not receive structurally psychological assistance. If EMDR proves effective, this will be implemented structurally in Erasmus MC Sophia. A good network between medical specialists and cognitive behavioral psychotherapists is necessary for optimal psychosocial care.

### Biography

Elisabeth Utens works as associate professor in the department of Child and Adolescent Psychiatry/Psychology at the Erasmus University Medical Centre-Sophia Children's Hospital, Rotterdam the Netherlands, where she also fulfils the role of research coordinator for Paediatric Psychology. In addition since 2016 she works as professor by special appointment of Cognitive Behavioral Therapy for Children and Adolescents, at the University of Amsterdam, department of Child Development and Education, the Bascule Academic Centre for Child and Adolescent Psychiatry and the AMC-VUmc-Bascule Academic Workplace for Child and Adolescent Psychiatry. She is a clinical psychologist registered in the Dutch BIG register of healthcare professionals. In addition to her appointment at the UvA, Utens serves as the chairperson of the National Network of Paediatric Psychology (Pediatische Psychologie-NL) and is a member of the Steering committee of the Psychosocial Working Group of the European Association of Paediatric Cardiology. Utens has funded her research from the numerous external grants she has acquired. Under her supervision, eight PhD candidates have now completed their doctoral thesis on her line of research. Utens has authored numerous international articles which have been published in authoritative academic journals, including the *European Heart Journal*, *International Journal of Cardiology*, etc. Utens studies psychosocial outcomes, particularly anxiety, depression and post-traumatic stress, in children with a physical disorder (such as congenital heart disease, inflammatory bowel disease, cystic fibrosis and HIV) as well as the influence of anaesthesia and psychological preparation of children for surgery. Her research includes examining which factors predict these psychosocial outcomes in the long term. She has carried out both cross-sectional and longitudinal patient-related studies and in recent years has focused primarily on intervention studies, including the effectiveness of cognitive behavioural therapy on anxiety and depression in adolescents with inflammatory bowel diseases, and the effects of sports activities on emotional problems in adolescents with congenital heart disease.

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