

# Study: Military falls short in treating new PTSD cases

Though treatment is lacking, more dire cases get follow-up.

By Gregg Zoroya

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WASHINGTON, D.C. — The U.S. military is struggling to provide adequate therapy sessions for thousands of active-duty troops suffering from post-traumatic stress disorder and depression, a massive study released Thursday concludes.

The RAND Corp. study of 40,000 cases, the largest ever, found that only a third of troops with PTSD and less than a quarter who are clinically depressed receive the minimum number of therapy sessions after being diagnosed.

A RAND review of U.S. military and Department of Veterans Affairs treatment guidelines concluded that troops diagnosed with PTSD should receive at least four therapy sessions within eight weeks or at least two sessions to manage newly prescribed medications.

The good news in the study: vast improvement in how the Army and other service branches follow up with inpatient cases of PTSD after service members are released from mental hospital care, a crucial period when many suicides occur.

"We just don't have enough mental health professionals to meet the demand," said Brad Carson, acting principal deputy undersecretary of defense for personnel and readiness.

He said the military will turn increasingly to civilian therapists available through Pentagon contracts.

Carson also plans to examine the RAND findings "to see ways that we can improve."

'Skeleton crew'

Since 2009, the military has increased mental health professionals on staff by 42 percent to 9,295.

Dr. Kathy Platoni, a Centerville psychologist who served in the Army and counseled troops deployed to Iraq and Afghanistan, said the military was "doing the best (it could) with a skeleton crew" to treat troops' mental health needs. "It's an enormous problem, especially since we keep redeploying the same people over and over and over again," she said.

The military has expanded the ranks of mental health professionals, although some new arrivals are inexperienced and some experienced professionals have been forced out, the retired colonel said. "Those who want to continue to serve and have the requisite skills and experience are being let go," said Platoni, who said she was put on retirement in 2013.

Many service members are unaware help is available, she added. "A huge problem that I've found is that returning troops are often never apprised of what services are available to them ... .," said Platoni, who joined the Ohio Military Reserve a year ago.

Veterans Affairs clinics that specialize in counseling troops are one of the best resources for troops who need help, she said.

U.S. Rep. Mike Turner, R-Dayton, and a member of the House Armed Services Committee, said in a written statement he was "deeply troubled with the recent findings and reports on the deficient care for our nation's veterans and warfighters. With proper oversight and investigations, my hope is that we can provide these men and women with the care and treatment they deserve."

Vulnerable periods

The RAND study examined treatment for a year following diagnoses in 2012. There were 8,286 diagnosed with PTSD, 24,251 with depression and 6,290 suffering from both illnesses.

RAND described the study as the largest independent examination of mental health treatment in the military.

Army research found that one of the most vulnerable periods for suicide by soldiers is during the year after being released

from hospital care. The suicide rate for soldiers in this group was 264 per 100,000, far outpacing the national suicide rate of 13 per 100,000 people.

The RAND study shows the military has become more aggressive in treating service members after they are released from in-patient psychiatric care. About 86 percent of those with PTSD or depression had a follow-up session with a mental health specialist within seven days after being discharged, and the rate jumped to more than 95 percent for seeing a therapist within 30 days, according to the study.

"This is a very important, high-risk time for these service members," said Kimberly Hepner, a clinical psychologist and lead author of the RAND study. She said the military's rate of success in this category was higher than in civilian medical care and the Department of Veterans Affairs. But the study also shows the military must provide more therapy quickly after a diagnosis of PTSD or depression, she said.

#### Improving treatment

The RAND study cited a 2014 internal Army medical command memorandum emphasizing the need to see soldiers within 72 hours of being discharged from a hospital. It urges commanders to require a soldier to attend a session if one is missed. It also says no one will be discharged during a weekend or holiday to avoid losing track of follow-up.

About 2.6 million U.S. service members served in Iraq or Afghanistan from 2001 through 2014. Rates of PTSD among these troops ranged from 4 percent to 20 percent, with depression rates ranging from 5 percent to 37 percent.

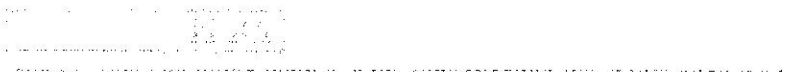
Staff writer Barrie Barber

contributed to this report.

## Caring for PTSD troops

Percentage of 14,576 soldiers diagnosed with post-traumatic stress disorder who:

Received adequate therapy visits within 8 weeks of new diagnosis



Met with mental health worker within ... 7 days of discharge from mental health facility



...30 days of discharge from mental health facility



Sources: RAND Corp. 2016 report, "Quality of Care for PTSD and Depression in the Military Health System;" USA TODAY

STEVE LOPEZ / STAFF