Sertraline is effective in the treatment of PTSD

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Efficacy and safety of sertraline treatment of posttraumatic stress disorder: a randomized controlled trial.

Background: Post-traumatic stress disorder (PTSD) is a common and serious disorder following life-threatening traumatic experiences. Symptoms include persistently reexperiencing the trauma (flashbacks, nightmares, intrusive memories), avoiding reminders, selective amnesia, emotional numbing, and increased arousal (e.g., startle responses, hypervigilance, insomnia). Relatively few data from RCT’s are available regarding the efficacy of pharmacotherapy.

Aim: To determine the efficacy of the SSRI sertraline in short-term treatment of PTSD.

Methods: 187 outpatients with chronic PTSD (mean duration of illness 12 years), both men and women, were randomized to treatment with sertraline or placebo.

Main Findings: The response rate of sertraline was significantly superior to that with placebo (53% vs. 32%, p<.008) at the end of 12 weeks. Insomnia was the only adverse effect reported significantly more often than placebo.

Conclusions: Sertraline is effective and well tolerated in the short-term treatment of chronic PTSD.

Limitations: Approximately 30% of the patients withdrew during the intervention. This study does not address the long-term effectiveness of pharmacotherapy. Also, these patients suffered from chronic PTSD, as opposed to the more common acute PTSD.

Impact on Internal Medicine: Most PCP's are experienced in prescribing SSRIs for depression. Primary care physicians underdiagnose and undertreat PTSD. Improved recognition could lead to treatment and improved outcome. It should be noted however that in general drug therapy has been less effective than psychological therapies in the treatment of PTSD (Soloman, 1992 JAMA). PTSD is a complex and often disabling illness and PCP’s should collaborate with mental health professionals in choosing which elements of treatments fit a particular patient.