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A Pilot Study of a Modified Acceptance and Commitment Therapy Smoking Cessation Treatment for Veterans with PTSD

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Presenter Information
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A Pilot Study of a Modified Acceptance and Commitment Therapy Smoking Cessation Treatment for Veterans with PTSD

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Veterans with posttraumatic stress disorder (PTSD) have high rates of smoking and significant difficulties with quitting. Acceptance and mindfulness-based techniques may enhance smoking cessation approaches for veterans with PTSD as they are designed to improve emotion regulation skills related to coping with elevated negative affect and withdrawal symptoms associated with quit attempts. Veterans with current PTSD and smoking ≥ 15 cigarettes/day (N=19) participated in an open trial of Acceptance and Commitment Therapy for Veterans with PTSD and Tobacco Use (ACT-PT). Participants attended nine weekly individual counseling sessions and received eight weeks of the nicotine patch. Primary outcomes included expired-air carbon monoxide confirmed seven-day point prevalence abstinence, number of cigarettes/day at the end of treatment, and PTSD symptoms on the PTSD Checklist (PCL). Intent-to-treat analyses examined pre-treatment to post-treatment scores on the PCL. At the end of treatment (one month after targeted quit date), 37% (7/19) of participants were abstinent from smoking, 37% (7/19) were abstinent from smoking at the one month follow-up, and 16% (3/19) were abstinent at the three month follow-up. Subjects reduced from 26 cigarettes/day at baseline to 10 cigarettes/day at the end of treatment (p<.001), and 15 cigarettes/day at the 3-month follow-up (p=.002). PTSD symptoms significantly decreased from baseline to the end of treatment (p<.001), and continued to remain significantly decreased at the 3-month follow-up (p=.011). The retention rate (74%), client satisfaction ratings and qualitative feedback from subjects indicated that the treatment was acceptable. Although preliminary, these results suggest that ACT-PT is a promising smoking cessation treatment for veterans with PTSD. Longer follow-up and randomized controlled studies are needed.