

WRITTEN EXPOSURE THERAPY FOR PTSD

Polina Bykova

Heat and Power Faculty,

National Technical University of Ukraine “Igor Sikorsky Kyiv Polytechnic Institute”

Post-traumatic stress disorder for which stands PTSD is a mental disorder, developed after a traumatic event or an experience. Fear is well-known for all people; and the “fight-or-flight” is a natural response to protect oneself. Most people's recovery is natural, but despite this there are those who can continue to have problems with it and feel bad even when they are safe. Such behavior may be a symptom of PTSD.

People who suffer from PTSD experience avoidance (they avoid all remind of the trauma and related thoughts or feelings), arousal and reactivity (being easily frightened, feeling tense, being “on edge”, troubles of sleeping and angry outbursts), cognition and mood (difficulties with remembering the main parts of the event, negative thoughts about self or the world, distorted feelings, loss of interest in enjoyable things) and re-experiencing symptoms (flashbacks with possible physical symptoms, bad dreams, frightening thoughts).

Denise M. Sloan and Brian P. Marx developed written exposure therapy (WET) as psychotherapy for PTSD and in 2019 published “Written Exposure Therapy for PTSD: A Brief Treatment Approach for Mental Health Professionals”.

The thing is, a person needs to write about the event that caused trauma. The therapist, on the other hand, must focus on the experiences while writing about the trauma, not the event. It is said to be very effective as cognitive processing therapy.

Client undergoes 5 such sessions. 30 minutes of continuous writing about trauma, no homework (that for some patients can be hard to do). The client doesn't need to worry about such things as grammar or spelling. Interventions are also used. At first, the person is asked to describe all the trauma, then, in the 4th or 5th session, there is a choice of only one part and how it influences their view of life. The patient also rates a subjective unit of distress (SUD) on a scale 0-100 before and after

writing. Then the therapist needs to just check the patient's engagement in the writing process. Only when patients go, written information can be read. The main questions are: did the patient focus on thoughts and feelings or only tell the facts, if the patient focus on the target trauma or switch to another one and how many details were written.

Paula Domenici, Ph.D. and Director of Training and Education with the Center for Deployment Psychology at the Uniformed Services University of the Health Sciences in Maryland said that despite the WET manual being simple and quick to read it was challenging to deliver the protocol of written exposure therapy and not to support patients in emotionally processing and cognitive restructuring trauma-related beliefs. But she also thinks that WET is rather benign and can be useful for patients with less severe PTSD symptoms. If WET isn't enough, it could be a step towards more demanding and intensive trauma-focused psychotherapy, such as Prolonged Exposure or Cognitive Processing Therapy.

References:

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MICROCONTROLLERS AS A 20TH CENTURY BREAKTHROUGH IN ELECTRICAL ENGINEERING

Mykyta Cherniaiev

Faculty of Electrical Engineering and Automatics,

National Technical University of Ukraine "Igor Sikorsky Kyiv Polytechnic Institute"

A microcontroller is a special microcircuit designed to control various