



Effective Health Care

Screening for Post-traumatic Stress Disorder in Children

Nomination Summary Document

Results of Topic Selection Process & Next Steps

- While a systematic review on this topic is feasible, *Screening for Post-Traumatic Stress Disorder in Children*, will not go forward for refinement as a systematic review due to programmatic resource constraints

Topic Description

Nominator(s): Health care professional association

Nomination Summary: This nominating organization noted that an evidence-based review comparing the effectiveness of screening tools for detecting post-traumatic stress disorder (PTSD) in children and adolescents would help identify children and adolescents with PTSD earlier, thereby facilitating early treatment. They would like to use the findings of the review to inform and support screening and the early identification of children and adolescents with PTSD. They also indicated they would disseminate the findings to their members through multiple communication channels to help members care for patients who have been exposed to violence and other forms of trauma that may increase their risk of PTSD.

After a conversation with the nominating organization, they confirmed that use of either a screening or diagnostic tool could achieve early identification of PTSD, and agreed the scope should include both types of tools that can be used in the pediatric population.

Staff-Generated PICO

Population(s): Children ages 0-17 suspected of PTSD for whom a diagnosis was confirmed or ruled out (for example children with a history of trauma)

Intervention(s): PTSD screening or diagnostic tool

Comparator(s): Other PTSD screening or diagnostic tool, “gold standard” for confirmation of PTSD based on clinical course or diagnostic test (including, for example, DSM criteria)

Outcome(s): Validity, sensitivity, specificity, accuracy, positive predictive value, adverse events or harms (labeling), short- and long-term health outcomes

Key Questions from Nominator:

1. What is the most effective way to identify/diagnose PTSD in children and adolescents?
 - a) What are the effective and valid tools/instruments to identify/diagnose PTSD in

children and adolescents?

- b) Does the effectiveness or validity of these screening tools vary by any of the following factors or other factors?
- i. Sociodemographic characteristics (e.g., gender, race/ethnicity, SES, age, etc.)
 - ii. Type (e.g., physical, sexual, psychological/emotional, etc.) or severity, duration, or frequency of trauma
 - iii. Setting (e.g., hospital, ambulatory care, community mental health provider, school, etc.)
 - iv. Length of time between trauma and detection or identification
 - v. Length of screening tool (e.g., length of time needed for administration, number of questions, etc.)
 - vi. Person administering screening (e.g., physician, nurse, mental health professional, school staff)

Considerations

- The National Center for Posttraumatic Stress Disorder (PTSD) estimates that 15-43% of girls and 14-43% of boys experience at least one trauma in their life. Of these individuals, 3-15% of girls and 1-6% of boys develop PTSD.¹
- There appears to be limited guidance on the use of screening or diagnostic instruments in children and adolescents for early identification of PTSD. There is also limited evidence to address the benefits and potential harms or other short- or long-term outcomes associated with early detection of PTSD.
- We identified multiple publications relevant to this topic. However, these publications did not comprehensively address the comparative effectiveness of tools or instruments used for the screening or diagnosis of PTSD in children or adolescents. Furthermore, existing guidance does not seem to identify harms, benefits, or other short- or long-term outcomes or effects associated with the use of these screening and diagnostic tools.
- Based on the feasibility scan, there is information regarding the sensitivity and specificity of a number of screening tools used to identify PTSD in children and adolescents. Although the screening tools examined in the studies described in this brief vary, the relatively high volume of studies identified through PubMed shows promise of sufficient evidence on this topic to inform a systematic review. However due to program resource constraints the topic will not be go forward for systematic review.

¹ U.S. Department of Veterans Affairs. PTSD in children and teens. 2015. Accessed May 6, 2015. <http://www.ptsd.va.gov/public/family/ptdf-children-adolescents.asp>.