

P01-327 - **NEW DIMENSIONS IN ASSESSING AND TREATING TRAUMATIC STRESS: A META-ANALYSIS OF HISTORICAL AND RECENT CONTRIBUTIONS TO THE FIELD**

L.-A. French^{1,2}, L. Nikolic-Novakovic³

¹*Justiceworks Institute, University of New Hampshire, Durham, NH, USA*, ²*Faculty of Criminal Sciences, University of Amsterdam Sarajevo, Sarajevo, Bosnia-Herzegovina*, ³*Department of General Law and Criminalistics, University of Novi Pazar - Pancevo Campus, Pancevo, Serbia*

Objectives: New dimensions of traumatic stress have surfaced since the inclusion of the PTSD classification in *The Diagnostic and Statistical Manual of Mental Disorders-Third Edition (DSM-III)* with its main focus on Vietnam Veterans. New Dimensions of traumatic stress entered the clinical/cultural equation with new populations, both military and civilian, subjected to massive disasters (hurricanes, floods, terrorist's attacks...) as well as those exposed to the potential of violence. The nearly four-year siege of Sarajevo and the constant fear of improvised explosive devices and suicide bombers among troops in Iraq and Afghanistan add another dimension of traumatic stress that falls outside the usually accepted "combat exposure" measure for a PTSD diagnosis. Our objective was to evaluate the scientific and clinical literature to see what assessment and treatment modalities are being employed to address this broader definition of traumatic stress.

Methods: We conducted a comprehensive review of journal articles and books published in English and the Slavic languages, the vast majority published within the past decade.

Results: The search comprised of over 300 hits, mostly journal articles.

Conclusions: Assessment tools have been expanded to include co-morbid clinical and health diagnoses as well as pre-morbid factors. Related clinical diagnoses include major depression and panic attacks while health concerns run the range of immune deficiency disorders as those associated with traumatic brain injuries. Psychopharmacology inroads seem to focus on Serotonin agonists while cognitive-behavioral approaches dominate the psychotherapies. Targeted populations include coalition troops (male & female) and those involved in the Bosnian and Kosovo conflicts.