

Chronic pain in refugees with posttraumatic stress disorder (PTSD): A systematic review on patients' characteristics and specific interventions

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Highlights

- Very few studies have investigated comorbid chronic pain among traumatized refugees.
- Most frequently, patients reported headaches, backaches, and pain in the arms and legs.
- Chronic pain is associated with age, female gender, living difficulties, and PTSD symptoms.
- Included studies partially show promising results concerning specific interventional studies

Abstract

Objective

[Chronic pain](#) in patients with posttraumatic stress disorder (PTSD) is a frequent symptom and a complicating factor in the treatment of patients. The study's purpose is to systematically review the scientific literature on patients' characteristics and the effects of specific interventions implemented for the treatment of chronic pain in traumatized refugees.

Method

A systematic search of the current literature was conducted in PubMed and Web of Science, from 1996 to 2017. A structured screening process in accordance with the PRISMA-statement was used with eligibility criteria based on the modified PICOS-criteria including refugees with chronic pain and diagnosed [PTSD](#) to investigate sample size, gender, country of origin, residential status, pain locations, predictors and correlations and type and efficacy of specific interventions.

Results

The initial search resulted in a total of 2169 references, leading to 15 included studies. Most frequently, patients reported headaches, [backaches](#), and pain in the arms and legs. Pain symptoms were associated with higher age, female gender, general living difficulties and PTSD symptoms. Cognitive behavioral therapy (CBT) and, Narrative [Exposure Therapy](#) (NET) with [biofeedback](#), manualized trauma [psychotherapy](#), [Traditional Chinese Medicine](#) (TCM) and Emotional Freedom Techniques were evaluated as specific interventions, resulting in positive outcomes for both pain severity and PTSD symptoms.

Conclusions

To date, the existing literature shows scarce evidence evaluating specific interventions that address the needs of traumatized refugees with chronic pain. However, the current reported evidence allows for a preliminary evaluation of the characterizations of patient dimensions as well as promising results found in intervention studies.