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Dialectical behavior therapy: A new frontier in treatment of pre-adolescent children with severe emotional and behavioral dysregulation

Background & Aim: Chronic irritability and difficulty with self-control may negatively affect child's emotional, social and cognitive development and are predictive of personality disorders, dysphoric mood, substance and alcohol abuse, suicidality and non-suicidal self-injury in adolescence and adulthood. Dialectical Behavior Therapy for pre-adolescent Children (DBT-C) aims to facilitate adaptive responding by teaching coping skills and encouraging caregivers to create a validating and change-ready environment.

Method: Two RCTs were conducted to examine feasibility and initial efficacy of DBT-C, they are: (1) In the NIMH funded RCT of DBT-C for disruptive mood dysregulation disorder, 43 children (7-12 years) were randomly assigned to DBT-C or TAU. Children were provided with 32 individual sessions that included child counseling, parent sessions and skills training. (2) In the private foundation funded RCT of DBT-C for children in residential care, 47 children (7-12 years) were randomly assigned to DBT-C or TAU. Children were provided with 34 individual sessions, 48 group skills trainings and 12 parent trainings.

Results: Subjects in DBT-C attended 40.4% more sessions than subjects in TAU. No subjects dropped out of DBT-C, while 36.4% dropped from TAU. Further, 90.4% of children in DBT-C responded to treatment compared to 45.5% in TAU, on the clinical global impression scale. All changes were clinically significant and sustained at 3-months follow-up. In the residential care trial significant differences were observed on the main measure of outcome; Child Behavior Checklist (CBCL) staff report. Children in the DBT-C condition as compared to TAU had significantly greater reduction in symptoms on both internalizing and externalizing subscales. All changes were clinically significant. Results were maintained at 3- and 6-month follow-up.

Conclusions: Results of both trials supported the feasibility and initial efficacy of DBT adapted for pre-adolescent children with severe emotional and behavioral dysregulation in multiple settings.

Biography

Francheska Perepletchikova is a board certified Clinician and an Assistant Professor of Psychology, Department of Psychiatry, Weill Cornell Medical College. She has received her BA degree at St. John's University and received graduate training in two disciplines, Developmental and Clinical Psychology. She has obtained MA in Developmental Psychology from Teachers College, Columbia University in 1996 and received PhD in Clinical Psychology from Yale University, Department of Psychology in 2007 with James B. Grossman Best Dissertation Prize. During her Internship and Post-doctoral training at Yale University School of Medicine, she gained expertise in Dialectical Behavior Therapy (DBT). She has a long-standing interest in emotion regulation, trauma-related psychopathology, depressive and anxiety problems, suicidality and self-harm behaviors. Her research focuses on childhood psychopathology, psychotherapy development and evaluation of *treatment integrity in treatment outcome research*. She has authored 28 journal articles and book chapters and a book "*Treatment Integrity in Treatment Outcome Research*" (2009). She conducted over 60 lectures, presentations and workshops around the world. As a Clinician, she maintains her practice at Weill Cornell Medical College, where she is the Founding Director of Youth-Dialectical Behavioral Therapy program and a Director of Outpatient Adolescent DBT program.

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