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**치료에서 고려해야할 소아라는
연령적 특이성**

**치료 초기의 종합평가, 치료 초점,
치료 목표**

1)

가 (family, caregiver, school) 가가
가 1)2) 가 reminders) (traumatic

2)

3 (hippocampus) 2 가가 5)
가 가 1)
3) 가 , EMDR
(single image), , 2) 가 , 3)
4) (explicit memory) , ,
(implicit memory) , 4) PTSD 가
(traumatic reminder) 가

3)

예방 프로그램
(fantasy), (memory distorsion) (, , ,) ()
가 가 6)

4)

(imprinting) 가

(mass hysteria)

가

1) CBT(Level A), 2) EMDR(Level B - C), 3) Psychodynamic Therapy(Level D), 4) Psychological Debriefing(Level E), 5) Family Therapy (Level E), 6) Group psychotherapy(Level E), 7) Art therapy(Level E) AHCPR

가

(psychological debriefing)

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1. 개인 인지행동 치료/면담 치료

“ 가 (You are not alone) ” 가

가
program)

(group prevention

CBT 가 가 11)
CBT 1)

(clarification),
8-10)

(reexposure),
2) (cognitive restructuring), 3) (relaxation training), 4) Dream

다양한 치료기법

Correction Technique¹²⁾

Agency for

2. 놀이 면담 치료

Health Care Policy and Research(AHCPR)

PTSD
A, B, C, D, E, F

가

13)

• Level A :

가

• Level B :

가

• Level C :

가

Animal game(lion tiger bear), Winnicott's Squiggle Game¹⁴⁾¹⁵⁾

3. 집단 치료

• Level D :

가

(fellow victim)

• Level E :

가

• Level F :

- 3) MAOI(phenelzine), 4) Anxiolytics(alprazolam, clonazepam, buspirone), 5) Clonidine, Guanfacine, 6) Propranolol, 7) Stimulants, 8) Carbamazepine, 9) Antipsychotics(mellaril)

¹⁹⁾ Clonidine
²⁰⁾ propranolol 30~40
 가 ²¹⁾ SSRI
 가 . ADHD

AHCPR

Propranolol(Level B), Clonidine(Level C), SSRI(Level D), TCA(Level D), Buspirone(Level D), Atypical antidepressants(Level E) . PTSD

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결론

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ABSTRACT

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THERAPEUTIC APPROACH FOR CHILD AND ADOLESCENT AFTER DISASTER

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The social attention about disaster psychiatry was increased after 911 terror in New York. The role of child psychiatrist and specific consideration for the treatment of child victim in disaster were reviewed. The following were main points. 1) The most single determining factor of prognosis is supporting system and parental attitude to their child victim. So family therapy and parental education are needed. 2) Cognitive Behavior Therapy is known to the most effective treatment in many literature. 3) Brief group therapy with fellow victim is cost effective preventive methods and screening tool for more serious victim, 4) Eye Movement Desensitization and Reprocessing(EMDR) could be a very amazing method in reducing repetitive horrible traumatic image. 5) Many kinds of drug using in adult are considered with caution.

KEY WORDS : Disaster psychiatry · Child adolescent · Treatment.