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Supplementary Material

- Article Title: Equine-Assisted Therapy for Posttraumatic Stress Disorder Among Military Veterans: An Open Trial
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List of Supplementary Material for the article

1. <u>Appendix 1</u> Supplementary results

Disclaimer

This Supplementary Material has been provided by the author(s) as an enhancement to the published article. It has been approved by peer review; however, it has undergone neither editing nor formatting by in-house editorial staff. The material is presented in the manner supplied by the author.

Appendix 1

Analysis of participants that completed all four assessments

Table 2 and Figure 2C illustrate results for CAPS-5, PCL-5, HAM-D, and BDI-II scores at each of the four time points only for those patients who were assessed at each of the four time points (n=48).

PTSD measures

For CAPS-5 scores, the repeated measures ANOVA with time as the withinsubjects factor was significant, F(3,141)=18.68, p<.0001, $\eta^2_p=.28$. Post hoc tests using the Bonferroni correction revealed a significant reduction from pre- to post-treatment, p<.0001, *Cohen's d*=1.07, which was maintained at three-months follow-up, p=1.00. This pre- to post-treatment significant reduction was evident at the mid-point assessment, p<.0001, Cohen's d=0.96, with no additional reduction from mid- to post-treatment, p=.81. Rates CSC based on CAPS scores showed that 28 of 58 participants (48.27%) demonstrated CSC at post-treatment, and 26 of 48 participants (54.16%) at follow-up assessment.

For PCL-5 scores, the repeated measures ANOVA was significant, F(3,141)=19.41, p<.0001, $\eta_p^2=.29$. Post hoc analyses revealed a significant reduction from pre- to post-treatment, p<.0001, *Cohen's d*=0.96, which was maintained at threemonths follow-up, p=1.00. This pre- to post-treatment significant symptom reduction was evident at the mid-point assessment, p<.0001, *Cohen's d*=0.75, with an additional reduction from mid- to post-treatment, albeit only at trend-level, p=.06, *Cohen's d*=0.27. **Depression measures** For HAM-D scores, the repeated measures ANOVA was significant,

F(3,141)=8.89, p<.0001, $\eta^2_p=.16$. Bonferroni corrected post hoc tests revealed a significant reduction from pre- to post-treatment, p=.001, *Cohen's d=*0.61, which was maintained at three-months follow-up, p=1.00. This pre- to post-treatment significant reduction was evident at the mid-point assessment, p=.004, *Cohen's d=*0.51, with no additional reduction from mid- to post-treatment assessment, p=1.00.

For BDI-II scores, the repeated measures ANOVA was significant,

F(3,141)=10.83, p<.0001, $\eta^2_p=.19$. Post hoc analyses revealed that a significant reduction from pre- to post-treatment, p=.003, *Cohen's d*=0.44, which was maintained at threemonths follow-up, p=1.00. This pre- to post-treatment significant reduction in symptoms was evident at the mid-point assessment, p=.04, *Cohen's d*=0.28, with an additional trendlevel reduction from mid- to post-treatment, p=.07, *Cohen's d*=0.18.