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Common questions about EMDR

What is EMDR?

Eye Movement Desensitization and Reprocessing (EMDR) is a powerful new method of doing psychotherapy. It does not rely on drugs or hypnosis, but rather on concentrating on a troubling memory or emotion while moving the eyes rapidly back and forth (by following the therapist's fingers, or a moving light). This rapid eye movement, which occurs naturally during dreaming, seems to speed the client's movement through a natural healing process. To date, EMDR has helped an estimated half a million people of all ages relieve many different types of psychological distress.

What kinds of problems can EMDR treat?

Scientific research has established EMDR as effective for post-traumatic stress. Clinicians have also reported success using EMDR in the treatment of the following conditions:

phobias sexual and/or physical abuse panic attacks disturbing memories performance anxiety complicated grief dissociative disorders anxiety disorders addictions

EMDR can also be used to enhance emotional resources such as confidence and self-esteem.

How was EMDR developed?

In 1987, psychologist Dr. Francine Shapiro made the chance observation that eye movements can reduce the intensity of disturbing thoughts under certain conditions. Dr. Shapiro studied this effect scientifically and, in 1989, she reported success using EMDR to treat victims of trauma in the *Journal of Traumatic Stress*.

Since then, EMDR has developed and evolved through the contributions of therapists and researchers all over the world. Today, EMDR is a set of protocols that incorporate elements from many different treatment approaches.

How does EMDR work?

No one knows exactly how EMDR works. However, we do know that when a person is very upset, his or her brain cannot process information as it normally does. One moment becomes "frozen in time," and remembering a trauma may feel as bad as going through it the first time because the images, sounds, smells, and feelings haven't changed. Such memories have a lasting negative effect on the way the person sees the world and relates to other people, which will interfere with his or her life.

EMDR seems to have a direct effect on the way that the brain functions. Normal information processing is resumed, so following a successful EMDR session, the images, sounds, and feelings are no longer relived when the event is brought to mind. What happens is still remembered, but it is less upsetting. Many types of therapy have similar goals. However, EMDR is unique in that the eye movements, or another form of alternating left-right attention, accelerate the process so that the end is reached more rapidly than by other means.

What happens during EMDR appears to be similar to what occurs naturally during dreaming or REM (rapid eye movement) sleep. Therefore, EMDR can be thought of as a physiologically-based therapy that helps a person see disturbing material in a new and less distressing way without the use of drugs or hypnosis.

But does EMDR really work?

A large number of scientific studies have shown that EMDR is effective. As just one example, the *Journal of Consulting and Clinical Psychology* published research by Wilson, Becker, and Tinker in December, 1995. This study of eighty subjects with post-traumatic stress demonstrated that clients improve significantly with EMDR treatment, and further study showed that this beneficial effect was maintained for at least fifteen months. The findings from this and other studies indicate that EMDR is highly effective and that results are long-lasting. For further references, a bibliography of research on EMDR may be obtained through the EMDR International Association (EMDRIA), at the address given below.

What is the actual EMDR session like?

EMDR is different for everyone, because the healing process is guided from within. During EMDR, the therapist works with the client to identify a specific problem to be the focus of the treatment session. The client calls to mind the disturbing issue or event, what was seen, felt, heard, thought, and so forth, and what thoughts and beliefs are currently held about that event. The therapist has the client perform sets of eye movements while focusing on the disturbing material, and the client just notices whatever comes to mind without making any effort to control direction or content.

Each person will process information uniquely, based on personal experience and values. It is important to understand that there is no way for the client to do EMDR incorrectly. Sets of eye movements are continued until the memory becomes less disturbing and is associated with positive thoughts and beliefs about oneself, for example, "I did the best I could." During EMDR the client may experience intense emotions, but by the end of the session most people report a great reduction in the level of disturbance. The upsetting emotion or memory often seems to fade into the past and lose its power.

It is hard to predict what kinds of thoughts, feelings, or memories might come up during EMDR. It depends upon each individual's natural healing process. The client is always in charge of whether to continue or to stop. The client can also decide how much to tell the therapist about the experience. The therapist serves as a guide to help the client stay on track and get the most out of the session, and will encourage the client to continue through the difficult parts.

Why bring up a painful memory?

When painful memories are avoided, they keep their disturbing power. Flashbacks, nightmares, or less obvious reverberations of painful events can feel as upsetting and overwhelming as the original experience, yet not be helpful. In therapy, and with EMDR, one can face the memory in a safe setting and not feel overwhelmed, but rather get through it and move on.

How long does EMDR take?

One or more sessions are required for the therapist to understand the nature of the problem and to decide whether EMDR is an appropriate treatment. The therapist will also discuss EMDR more fully and provide an opportunity to ask any questions the client may have about the method. Once the therapist and client have agreed that EMDR is appropriate for a specific problem, the actual EMDR therapy can begin.

A typical EMDR session lasts about 90 minutes. The type of problem, life circumstances, and amount of previous trauma will determine how many treatment sessions are necessary. A single session of EMDR is sufficient in some cases. However, a typical course of treatment for a specific, circumscribed issue is three to ten sessions, performed weekly or every other week. EMDR may be used within a standard "talking" therapy, as an adjunctive therapy with a separate therapist, or as a treatment all by itself.

In addition, the client may continue to process the material for days or even weeks after the session, perhaps having new insights, vivid dreams, strong feelings, or memory recall. This may feel confusing, but it is just a continuation of the healing process and should simply be reported to the therapist at the next session—or, in especially confusing or upsetting cases, by telephone between sessions. The goal is to work through the distressing symptoms and then to develop new skills and ways of coping and interacting with others.

Does insurance cover EMDR?

If your policy covers standard psychotherapy, it most likely will cover EMDR. Currently, EMDRIA is working towards establishing a specific EMDR code for insurance reimbursement.

For more information...

Many books have been written about EMDR and are available in paperback at your local bookstore. I recommend the following:

Grand, D. (2001). Emotional healing at warp speed: The power of EMDR. New York: Harmony/Crown.

Parnell, L. (1997). Transforming Trauma: EMDR: The revolutionary new therapy for freeing the mind, clearing the body, and opening the heart. New York: W. W. Norton.

Shapiro, F., & Forrest, M. S. (1997). *EMDR: The breakthrough therapy for overcoming anxiety, stress and trauma*. New York: Basic Books.