Trauma Therapy Breaks New Ground

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A therapy initially used for treating victims of trauma, like combat veterans and survivors of natural disasters, is gaining ground as a treatment for other mental health disorders.

EMDR, as it's known, was begun by Francine Shapiro in 1991. The therapy uses bilateral stimulation during the processing of traumatic memories, and has been proven especially effective with combat veterans. The Veteran's Administration gives EMDR an "A" rating among therapies recommended for veterans with Post Traumatic Stress Disorder.

EMDR stands for Eye Movement Desensitization and Reprocessing, and what Shapiro discovered, while she was taking a walk one day, was that looking back and forth continually helped her process some traumatic memories. She had read about eye movement affecting traumatic memories, and her little self-experiment did help. From there, she developed EMDR into a system, which has since evolved into a many-branched area of psychotherapy. Therapists explain that EMDR is now something of a misnomer, because they use several types of bilateral stimulation, not just eye movement. Other names, or related therapies, are Adaptive Information Processing and Affect Management Skills Training. REM sleep, during which the eyes shift back and forth, has been shown to help the brain process the events of the day. REM has also been shown to be a key component of memory retention.

Unlike traditional post-Freudian therapy, which can go on for years, EMDR is notable for getting a lot done in a short time. "Compared to psychoanalysis it's like a skipping stone," explains Glenna Dunaway, MSW, who uses EMDR in her therapeutic practice. "It sounds illogical, but it works." Not all traumatic memories are directly accessible to the logical, conscious brain, says Dunaway. They may be stored in the physical memory; colors, smells, and sounds can trigger

emotional responses that the brain may not even know about. "A guy I treated in New York City, post-Vietnam, would hit the ground every time he heard a loud noise," says Dunaway. "To him loud noises meant incoming (fire.)" During EMDR therapy, the patient may free associate, examining seemingly trivial events, such as colors, sights, and memories that come forward.

Severe trauma affects the brain's production of cortisol, a chemical that guides reactions. People suffering from Post-Traumatic Stress Disorder find that their ability to react calmly has been abridged; PTSD sufferers react with rage or terror to even low-level reminders of danger, like the vet diving for the ground when a door slammed. Survivors of trauma also commonly suffer from repeating memories of the traumatic event, helplessly reliving it over and over. In trauma survivors, neural pathways are actually shortened, which is what causes these effects.

The new therapies, of which EMDR is now only one, focus on approaching psychological trauma through the body as well as the mind- the traditional talk therapy model. Bilateral stimulation can be eye movement back and forth, or alternating tapping right and left shoulders, or other stimulation such as headphones that play music and switch the sound from one ear to the other.

"We still don't know for sure how alternating bilateral stimulation works," says Tony Cotraccia, MSW, another practitioner using the therapy. "The strongest (research) work has been done with eye movement. It definitely improves recall, and reduces the intensity of traumatic memory. It activates parts of the cortex that are involved in mediating emotion."

"If you're using the purely cognitive, logical part of your brain in therapy, you're missing a lot of stuff," says Dunaway. "The other thing that has become evident in the research over the last few decades is the mysterious connection between the body and the mind." Dunaway cites a man who was in psychotherapy for years, with slow results, who found he became much better after he took up tennis. "Alternating bilateral stimulus of any kind will do something to help us process old stuff," she says. The difference between taking a walk in the park and using EMDR therapy is that the therapist keeps you focused, "so you're not daydreaming."

As with any part of the body, the brain is constantly changing, so the old Freudian belief that childhood traumas are so deeply embedded that they determine our actions for the rest of our lives is being challenged. "What we know now is that the brain is as plastic... as any other part of the body," says Dunaway. "It changes as fast as blood; the brain is all about change. Change is how you receive perceptions; you are building neurological patterns and densities right this minute."

EMDR also shows promise as a therapy for patients with what are called dual diagnoses, or mental health and developmental disabilities. People who are challenged in their ability to verbalize seem to find EMDR more usable than talking through their problems in depth.

Therapists and users of EMDR caution against people self-prescribing EMDR or trying to rush into it. "People have to have developed a certain amount of emotional competence," says Andrew Seubert, MA, author of the forthcoming book, "The Courage to Feel." Seubert divides his practice between an office in Corning and one in Mansfield, Penn. "There's a preparation phase, so (I feel safe that) they're ready to handle whatever might come up for them in the processing." Studies using brain scans have shown that traumatic memories are stored in the back of the brain, in "a part of the brain that is mute," says Seubert. Reprocessing the memories by pulling them forward into the verbal part of the brain makes them accessible to conscious change, such as overlaying negative self-talk ("I'll never win,") with positive, rational messages.

So far, the bulk of the research has verified that EMDR improves people's ability to function after traumatic events.

"When there's a hurricane or a tsunami, there are little troops of EMDR people flying in and they actually have people sit down in circles and pat their shoulders," says Dunaway.

"There's lots of hope," says Cotraccia. "We have the ability to make sense of our experiences."