EMDR Research Foundation Clinical Newsletter Volume 6 | Issue 5 September 2018





# **EMDR** Therapy and Addictions

### **RECOVERY MONTH**

"Every September, **SAMHSA** sponsors Recovery Month to increase awareness and understanding of mental and substance use disorders and celebrate the people who recover. Recovery Month promotes the societal benefits of prevention, treatment and recovery for mental and substance use disorders, celebrates people in recovery, lauds the contributions of treatment and service providers and promotes the message that recovery in all its forms is possible. Recovery month spreads the positive message that behavioral health is essential to overall health, that prevention works, treatment is effective, and people can and do recover."

## Studies

### **EMDR STUDY**

In 2015, Brown, Susan, H., Gilman, Sara G., Goodman, Ellen, G., Adler-Tapia, Robbie and Freng, Steven published an article in the Journal



of EMDR Practice and Research Integrated Trauma Treatment in Drug Court: Combining EMDR Therapy and Seeking Safety. doi: 10.1891/1933-3196.9.3.123

### **ABSTRACT:**

Trauma and co-occurring substance use disorders are disproportionately prevalent in individuals involved in the criminal justice system. The Thurston County Drug Court Program (TCDCP) in Washington State conducted a preliminary study with 220 participants arrested for nonviolent, felony drug-related crimes. All TCDCP participants were required to engage in a structured 12- to 18-month 3-phase program referred to as Program as Usual (PAU). Data was collected from 2004 to 2009 to investigate the efficacy of adding an "Integrated Trauma Treatment Program" (ITTP) component for those endorsing a Criterion A trauma history (68% of TCDCP). The ITTP combined 2 empirically supported trauma therapies in a phased, integrated approach: mandatory Seeking Safety groups followed by voluntary, individual eye movement desensitization and reprocessing (EMDR) therapy. The investigators hypothesized that trauma-specific treatment might improve existing program outcomes, including higher graduation rates and lower postprogram recidivism. One hundred twelve of the initial 150 participants endorsing trauma completed the Seeking Safety groups and were offered individual EMDR therapy. Of those 112, those who selected EMDR therapy (1 = 65) graduated at a rate of 91%; those who declined (n = 47) graduated at 57%. Recidivism rates also differed among TCDCP graduates: PAU, 10%; graduates selecting EMDR therapy, 12%; and graduates declining EMDR, 33%. This article summarizes the literature, describes the ITTP program, reports on graduation rates and recidivism outcomes, and discusses possible differences between those who selected and those who declined EMDR therapy. The authors discuss the benefits of including EMDR therapy in drug court programs with recommendations for future research.

### **EMDR STUDY**

In 2017 in the Journal of EMDR Practice and Research, Qurishi, Rouhollah, Markus, Wiebren, Habra, Maaike M. J., Bressers, Bibi, & De Jong, Cornelis A. J. published an article entitled <u>EMDR Therapy Reduces Intense Treatment-</u> <u>Resistant Cravings in a Case of Gamma-</u> <u>Hydroxybutyric Acid Addiction.</u> doi:10.1891/1933-3196.11.1.30.



## **ABSTRACT:**

This article presents the first experiences of using eye movement desensitization and reprocessing (EMDR) therapy to aid in the treatment of gamma-hydroxybutyric acid (GHB) dependency. A case presented itself as a result of intense, treatment-resistant cravings despite pharmacological treatment. The patient received 7 weekly sessions using a subset of the palette of EMDR interventions in addiction (PEIA; Markus & Hornsveld, 2017) targeting both negative and positive valenced addiction-related memory representations from the past, present, and future. Patient-reported GHB craving showed a gradual and prolonged reduction. Urine samples showed that the patient remained abstinent during and at least 6 months after EMDR therapy. Further research regarding the effectiveness of EMDR therapy in this particularly challenging group of substance users is warranted.

### **ABSTRACT:**



### **EMDR STUDY**

In January, 2018 in the Journal of Frontiers in Psychology, Sara Carletto, Francesco Oliva, Micaela Barnato, Teresa Antonelli, Antonina Cardia, Paolo Mazzaferro, Carolina Raho, Luca Ostacoli, Isabel Fernandez, and Marco Pagani published an article, <u>EMDR as Add-On Treatment for Psychiatric and</u> <u>Traumatic Symptoms in Patients with</u> <u>Substance Use Disorder.</u> doi:

10.3389/fpsyg.2017.02333

#### Background:

Substance use disorders (SUD) are patterns of substance use leading to severe impairment on social, working and economic levels. In vivo and clinical findings have enhanced the role of the brain's stress-related system in maintaining SUD behaviors. Several studies have also revealed a high prevalence of post-traumatic symptoms among SUD patients, suggesting that a trauma-informed treatment approach could lead to better treatment outcomes. However, only few studies have evaluated the use of eye movement desensitization and reprocessing (EMDR) in SUD without consistent results. The aim of the present pilot study was to assess the efficacy of a combined trauma-focused (TF) and addiction-focused (AF) EMDR intervention in treating post-traumatic and stress-related symptoms of patients with SUD.

#### Methods:

Forty patients with different SUD were enrolled in the study. Twenty patients underwent treatment as usual (TAU), the other 20 patients were treated with TAU plus 24 weekly sessions of EMDR. All patients were assessed before and after intervention for several psychological dimensions using specific tools (i.e., BDI-II, DES, IES-R, STAI, and SCL-90-GSI). A repeated measure MANOVA was performed to evaluate both between groups (TAU + EMDR vs. TAU) and within group (pre- vs. post-intervention) effects and interactions. A secondary outcome was the dichotomous variable yielded by the urine drug testing immunoassay (yes/no).

#### **Results:**

The RM-MANOVA revealed both a significant pre-post main effect (< 0.001), and a significant groupby-time main effect (p < 0.001). Significant improvements on IES-R, DES, and SCL-90-GSI scales were shown in both groups according to time effects (p < 0.05). However, significant greater effects were found for TAU + EMDR group than TAU group. No differences were found between TAU and TAU + EMDR groups in terms of urine drug immunoassay results before and after the interventions. **Conclusions:** 

The TAU + EMDR group showed a significant improvement of post-traumatic and dissociative symptoms, accompanied by a reduction in anxiety and overall psychopathology levels, whereas TAU group showed a significant reduction only in post-traumatic symptoms. Although our results can only be considered preliminary, this study suggests that a combined TF- and AF-EMDR protocol is an effective and well-accepted add-on treatment for patients with SUD.



#### **PROMISING RESEARCH**

This research is promising but far from what is needed to consider EMDR therapy as an effective treatment for Substance Abuse treatment. Please consider contributing to the EMDR Research Foundation to assist us in supporting research in this vital area. Mark Recovery Month by supporting research in its successful attainment.

## What's New?

#### **CREATE A FUNDRAISING PAGE!** You have the opportunity to create a



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#### More Details on Creating a Fundraising Page

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**RESEARCHER'S** 

#### SEE OUR UPDATED TOOLKIT!

EMDR Early Intervention and Crisis Response: Researcher's Toolkit Version 03.2018 © 2014-2018

Rosalie Thomas, Ph.D., R.N. with formatting/design work by Katy Murray, MSW, LICSW

View Our New Researcher's Toolkit

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