



Grief and EMDR

This monthly newsletter was created primarily for our colleagues trained in Eye Movement Desensitization and Reprocessing (EMDR) who work with military, veterans, and their families. The purpose of EMDR and the Military-in-Action Newsletters is to promote continued dialogue regarding the efficacy and current developments with EMDR and its use with these special populations.

ATTENTION RESEARCHERS If you are interested in doing research that addresses EMDR topics related to the military and you need additional funding, consider applying for the \$25,000 EMDR Research Grant Award.

\$25,000 EMDR Research Grant Award Details:

<https://emdrresearchfoundation.org/research-grants/25000-emdr-research-grant-award/#>

If you need access to expertise for a research project, don't hesitate to apply for the \$1,000 Research Consultation Award.

Research Consultation Award Details:

<https://emdrresearchfoundation.org/research-grants/research-consultation-awards>



EMDR Study

Yasar, A. B., Abamor, A. E., Usta, F. D., Tay- can, S. E., & Eroglu, M. Z. (2017).

[A case study: Effects of EMDR therapy on a patient with persistent complex bereavement disorder \(PCBD\).](#)

European Psychiatry, 41, S728.

ABSTRACT:

Grief is a normal response to the loss of someone to whom a bond was formed; however, prolonged grief is considered pathological. Persistent complex bereavement disorder (PCBD) is defined as a persistent longing for the deceased over 12 months. Several treatment ways have been used for traumatic loss including eye movement desensitization and reprocessing (EMDR). In the current case series, effectiveness of EMDR on three PCBD patients will be indicated. Three patients applied to the clinic with similar complaints based on different traumatic backgrounds; commonly, all experienced death of a first-degree relative. Complaints of the patients were over-thinking about the deceased, sleep disturbances, self-blaming, social isolation, avoiding talks about lost relative, and loss of interest in activities. After pre-interviews, they were advised EMDR therapy. One session of EMDR was applied to two of the patients, and two EMDR sessions were conducted on one of them. After the sessions, the patients reported not feeling guilty about the loss anymore, returning to their normal routines, feeling better, and showing decreased avoidance. Additionally, the scores of scales (CAPS, BAI, BD and IES-R) significantly declined. EMDR therapy can show successful results in a shorter time than other treatment ways used for PCBD treatment.

EMDR and Coping With Grief

EMDR Study

Toblin, R. L., Rviere, L. A., Adler, A. B., Kok, B. C., & Hoge, C. W. (2012).

[Grief and physical health outcomes in U.S. soldiers returning from combat.](#)

Journal of Affective Disorders, 136(3), 469-475.
doi:10.1016/j.jad.2011.10.048



ABSTRACT:

Background

Few studies have measured the burden of physical health problems after Iraq/Afghanistan deployment, except in association with post-traumatic stress disorder (PTSD) or mild traumatic brain injury (mTBI). Grief, a correlate of health problems in the general population, has not been systematically examined. We aimed to identify the prevalence of post-deployment physical health problems and their association with difficulty coping with grief.

Methods

Infantry soldiers (n=1522) completed anonymous surveys using validated instruments six months following deployment in November-December 2008. Multiple logistic regression was used to assess the association of difficulty coping with grief and physical health.

Results

The most frequent physical health symptoms reported were: sleep problems (32.8%), musculoskeletal pain (32.7%), fatigue (32.3%), and back pain (28.1%). Difficulty coping with grief over the death of someone close affected 21.3%. There was a dose-response relationship between level of difficulty coping with grief and principal physical health outcomes ($p < .002$). Controlling for demographics, combat experiences, injuries, PTSD, depression, and other factors, grief significantly and uniquely contributed to a high somatic symptom score (adjusted odds ratio (AOR)=3.6), poor general health (AOR=2.0), missed work (AOR=1.7), medical utilization (AOR=1.5), difficulty carrying a heavy load (AOR=1.7), and difficulty performing physical training (AOR=1.6; all 95% confidence intervals > 1).

Limitations

Data are cross-sectional and grief was measured with one item.

Conclusions

Over 20% of soldiers reported difficulty coping with grief. This difficulty was significantly associated with physical health outcomes and occupational impairment. Clinicians should be aware of the unique role grief plays in post-deployment physical health when treating patients.

In the News

From the EMDR Book Shelf

Luber, M., & Shapiro, F. (2009). Protocol for excessive grief. In M. Luber (Ed.), [Eye movement desensitization and reprocessing \(EMDR\) scripted protocols: Basics and special situations](#) (pp. 175-187). New York, NY: Springer Publishing Co.

Resources for U.S. Surviving Family Members

Military One Source (2018, March 15). [Grief and loss of a loved one, the days ahead](#). From Military One Source.



Military OneSource

What's New?



CREATE A FUNDRAISING PAGE!

You have the opportunity to create a fundraising page in which your network can easily donate to the EMDR Research Foundation in honor of a family member, friend, colleague, yourself, or through a special event or occasion like a wedding, graduation, or running in a 5K race!

Spread the word even further about EMDR therapy and create a Facebook Fundraising Page and select EMDR Research Foundation as your nonprofit.

[More Details on Creating a Fundraising Page](#)

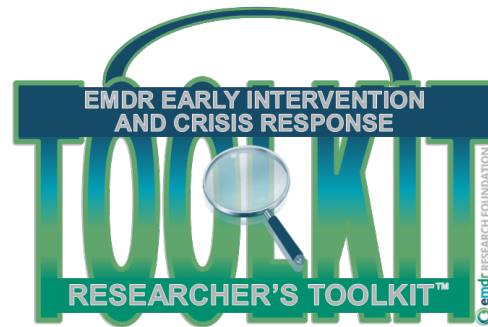
SEE OUR UPDATED TOOLKIT!

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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