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EMDR RESEARCH FOUNDATION

EMDR Research Foundation and the Military-In-Action Newsletter

Volume 8, Issue 4 | April 2020

This is a monthly e-newsletter 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 is to promote continued dialogue regarding the efficacy and current developments with EMDR and its use with these special populations.

RESEARCHERS! If you are interested in doing research that addresses EMDR topics related to the military and you need additional funding, consider applying for a $25,000 research award through the EMDR Research Foundation. Click here for details. If you need access to expertise for a research project, don't hesitate to apply for a $1,000 research consultation award. Click here for details.

We at the Foundation wish you all health and wellness during this challenging time. Thank you to those of you who are sharing resources and providing support to those in need through EMDR therapy, your gift of providing this is monumental during this time.

"In a social phase in which thinking about one's garden has become the rule, the virus sends us a clear message: the only way out is reciprocity, the sense of belonging, the community, the feeling of being part of something greater to take care of us and that can take care of us. The shared responsibility, the feeling that your fates depends on not only yours but on everyone around you. And that you depend on them." - Francesca Morelli

EMDR Therapy in the Treatment of Anxiety

Faretta, E.; and Dal Farra, Mariella. (2019). Efficacy of EMDR therapy for anxiety disorders. Journal of EMDR Practice and Research, 13(4): 325-332. Citation access.

Six randomized controlled trials (RCTs) investigated the efficacy of eye movement desensitization and reprocessing (EMDR) therapy for adults with anxiety disorders over a span of 20 years (1997–2017). Three RCTs focused on panic disorder, with or without agoraphobia (PDA); two studies targeted specific phobias, whereas the dependent variable of another RCT was "self-esteem," considered as a mediator factor for anxiety disorders. In four RCTs, EMDR therapy demonstrated a positive effect on panic and phobic symptoms, whereas one RCT on PDA was partly negative and one study failed in improving self-esteem in patients with anxiety disorders. Considered as a whole, these preliminary data suggest EMDR therapy may be effective not only for PD but also for specific phobias. Further controlled studies are needed to corroborate these findings and also to systematically evaluate the efficacy of EMDR therapy for generalized anxiety disorder, social anxiety, and agoraphobia. Because cognitive behavioral therapy (CBT) is presently considered a first-line treatment for anxiety disorders, controlled comparisons between EMDR therapy and CBT would be especially useful in future investigations of EMDR treatment of anxiety disorders.

The effectiveness of eye movement desensitization and reprocessing (EMDR) in reducing pathological worry in patients with generalized anxiety disorder: A preliminary study

Farima, R., Dowlatabadi, S., & Behzadi, S. (2015). Archives of Psychiatry and Psychotherapy, 1, 33-43. doi:10.12740/APP/39259. Citation access.

Aims. The current study aimed to investigate the effectiveness of eye movement desensitization and reprocessing (EMDR) in reducing pathological worry in patients with generalized anxiety disorder (GAD). Method. Three women with GAD were selected using a purposeful sampling method based on the Structured Clinical Interview for DSM-IV Axis I disorders (SCID-I). A baseline single-case experimental design was used and participants were included in the treatment in a stepped manner. The Generalized Anxiety Disorder Questionnaire (GADQ-IV), the Pennsylvania State Worry Questionnaire (PSWQ), the Worry Domain Questionnaire (WDQ), the Intolerance of Uncertainty Scale (IUS) and the Cognitive Avoidance Questionnaire (CAQ) were used as the baseline, pre-treatment, post-treatment and one-month follow-up assessments. Results. The results showed that EMDR is effective in reducing pathological worry in patients with GAD. The participants were also successful in reducing the extent of their areas of worry, increasing their tolerance to uncertainty and conquering their cognitive avoidance. One-month follow-up also showed that the decline trend of participants' worries continued. During EMDR, participants' negative images, emotions and cognition were decreased and gradually lost their reliability, whereas positive aspects became alive and active. Conclusions. EMDR is an effective method for the treatment of GAD in women.

EMDR Therapy in the Treatment of Panic Disorder

Bhagwagar, H. (2016). EMDR in the treatment of panic disorder with agoraphobia: A case description. Journal of EMDR Practice and Research, 10(4), 256-274. Citation access.

The results of preliminary research investigating the application of eye movement desensitization and reprocessing (EMDR) treatment in panic disorder and panic disorder with agoraphobia suggests that reprocessing of past traumas produces significant reduction of anxiety and consequently, remission from panic attacks and avoidance behavior. This article describes the case study of a 30-year-old working professional where EMDR treatment, used to target early childhood traumas, led to reduction in symptoms of panic disorder with agoraphobia. Panic attacks diminished after 17 sessions of EMDR treatment, which followed Leeds's treatment model. Treatment gains were maintained 5 years after termination. The study shows the value of solid preparation work, and of addressing the current triggers and recent events, before targeting historical traumas. EMDR worked as a first-line treatment to resolving the roots of the panic attacks, suggesting that the resolution of traumatic childhood memories can make a significant difference to current symptoms of panic disorder with agoraphobia.

Cognitive Behavioral Therapy vs. Eye Movement Desensitization and Reprocessing for Treating Panic Disorder: A Randomized Controlled Trial

Horst, F., Den Oudsten, B., Zijlstra, W., de Jongh, A., Lobbestael, J., & De Vries, J. (2017). Frontiers in Psychology, 8, https://doi.org/10.3389/fpsyg.2017.01409. Citation access.

Objective: Cognitive Behavioral Therapy (CBT) is an effective intervention for patients with panic disorder (PD). From a theoretical perspective, Eye Movement Desensitization and Reprocessing (EMDR) therapy could also be useful in the treatment of PD because: (1) panic attacks can be experienced as life threatening; (2) panic memories specific to PD resemble traumatic memories as seen in posttraumatic stress disorder (PTSD); and (3) PD often develops following a distressing life event. The primary objective of this Randomized Controlled Trial (RCT) was to compare EMDR therapy with CBT for PD and determine whether EMDR is not worse than CBT in reducing panic symptoms and improving Quality Of Life (QOL).

Methods: Two-arm (CBT and EMDR) parallel RCT in patients with PD (N = 84). Patients were measured at baseline (T1), directly after the last therapy session (T2), and 3 months after ending therapy (T3). Non-inferiority testing (linear mixed model with intention-to-treat analysis) was applied. Patients were randomly assigned to 13 weekly 60-min sessions of CBT (N = 42) or EMDR therapy (N = 42). Standard protocols were used. The primary outcome measure was severity of PD at T3, as measured with the Agoraphobic Cognitions Questionnaire (ACQ), the Body Sensations Questionnaire (BSQ), and the Mobility Inventory (MI). The secondary outcome measure was QOL, as measured with the World Health Organization Quality of Life short version (WHOQOL-Brief), at T3.

Results: The severity of PD variables ACQ and BSQ showed non-inferiority of EMDR to CBT, while MI was inconclusive (adjusted analyses). Overall QOL and general health, Psychological health, Social relationships, and Environment showed non-inferiority of EMDR to CBT, while Physical health was inconclusive.

Conclusion: EMDR therapy proved to be as effective as CBT for treating PD patients.

For previously listed citations, books, and news articles on grief and a complete list of Military In Action Archives, visit emdrresearchfoundation.org.

Announcing a $50,000 Grant Award

In honor of the legacy of Dr. Francine Shapiro, the EMDR Research Foundation is pleased to announce a $50,000 grant to be awarded and funded by the Francine Shapiro Memorial Fund. It was her dedication to research that inspired and motivated us to form the EMDR Research Foundation. Her mantra was *Research, Research, Research*! She would often say to clinicians making a verbal report of success, "Will you write that up? That needs to be published!" Whatever is claimed in your clinical practice, must be validated in research. We hope to be able to carry that legacy forward in our work together. Learn more.

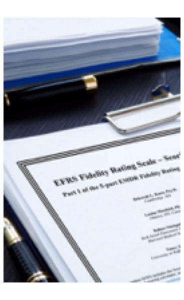
Grants & Awards

Our next grant application deadline is July 1, 2020 and can be submitted through our website.

RESEARCH AWARD GRANTS
Researchers, if you are interested in doing research that addresses EMDR topics related to the military and you need additional funding, consider applying for a $25,000 - $50,000 research award through the EMDR Research Foundation.

RESEARCH CONSULTATION AWARDS
Up to $1,000 may be available to facilitate access to required expertise that would advance the development of an EMDR Therapy research project, to support the completion of an EMDR Therapy research project underway, or the writing of an article on EMDR Therapy for publication in a professional journal. Applications for these awards are accepted at any time during the year.

Learn more.



Revised Fidelity Rating Scale

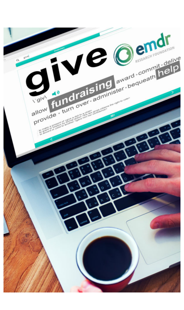
NEW for Clinicians, Consultants, and Researchers! The EMDR Fidelity Rating Scale (EFRS) has been significantly revised since it was originally published, making it more precise and user-friendly.

Learn more.

New ISTSS Prevention and Treatment Guidelines

The new International Society for Traumatic Stress Studies' (ISTSS) guidelines on the prevention and treatment of post-traumatic stress disorder (PTSD), and position papers on complex PTSD, have recently been published. An international committee of experts was established in 2015 to update guidelines published in 2009 by reviewing the latest evidence from clinical research trials. The guidelines and position papers are intended to assist clinicians providing prevention and treatment interventions for children, adolescents and adults with, or at risk of, developing PTSD and Complex PTSD. Professor Julian Ford, ISTSS President, said, "The excellent work of the ISTSS Treatment Guidelines Committee will make a real difference to people affected by traumatic events" The new guidelines and position papers are available to download from the ISTSS website.

Learn more.



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!

Learn more.

See Our Updated Toolkit

Whether humanity inflicting harm on itself or due to natural disasters, left untreated, traumatic life experiences can lead to more harm. The EMDR Research Foundation has created the EMDR Early Intervention (EEI) Toolkit as a research to clinicians and researchers in times of need.

Learn more.

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