

## **Eye Movement Desensitization Reprocessing (EMDR)**

**What is EMDR?** EMDR is an information processing type of therapy. It is a structured 8 phase eclectic approach to therapy. It uses a combination of techniques and processes to address past, present and future aspects of traumatic experiences, distressing memories and emotional and physiological responsiveness. EMDR uses bi-lateral brain stimulation to access previously stored information including traumatic memories that are retained in your long-term memory bank. As your brain accesses this information new information, which facilitates healing, is introduced.

EMDR incorporates elements of psychological, cognitive, psychodynamic, mindfulness, somatic and humanistic theories. Although scientists do not know for sure how EMDR works (nor exactly how the brain works), it may be that the bilateral stimulation (eye movements, tapping, audio stimulation etc.) used in EMDR opens up the neuropathways and have a specific effect on memory retrieval, encoding storage and re-storage. What takes place is believed to be similar to that which occurs during REM sleep when memories continue to be organized and are consolidated into our long-term memory banks.

The bilateral brain stimulation appears to facilitate information processing which allows negative experiences to be discharged from your nervous systems and from your belief system. It doesn't erase the memories, but simply makes them more tolerable. (At least this is the goal; there is no guarantee that ANY therapy will work for certain.) The goal is to reduce the emotional and physiological arousal you feel when you access those memories in the future.

**Why EMDR?** In a broad sense EMDR is intended to alleviate suffering. Early and disturbing experiences, unmet interpersonal needs and traumatic events etc. can have negative and long-lasting effect on people. When disturbing events occur all of our senses are involved in the creation of memories. Unfortunately, the body keeps score of information it obtains. You may have heard the saying, "neurons that fire together wire together" for good or for bad. Accessing and processing the memories in a safe environment, creates opportunities for the traumatic memories to heal without all the infection still inside. Metaphorically, EMDR is similar to cleaning an infected wound or resetting an improperly healed break in an arm.

Information including negative beliefs about ourselves sometimes get locked in or trapped in our memories. New disturbing events add to these memories and can negatively affect the way we see ourselves and the world around us. EMDR helps our brains to process those original unresolved experiences/issues by making the appropriate cognitive and emotional connections. Essentially, it allows our adaptive systems and emotional systems to update itself with new healthy information (like the fact that we are now safe). It has the ability to facilitate profound therapeutic change in much less time than other traditional therapies. EMDR is one of two

therapeutic modalities currently endorsed by the World Health Organization for the treatment of trauma/PTSD. It is empirically proven to be helpful for situations such as anxiety, fear, trauma and obsessive-compulsive behaviors.

**What EMDR Can and Cannot Do:** EMDR will not make you forget painful memories; however, it can reduce the vividness or intensity of certain memories making you more able to tolerate your memories with less intensity of emotion. EMDR can help our bodies to adaptively process somatic (bodily) distress and release the physiological pain that gets trapped within our nervous systems after a trauma occurs.

EMDR also helps to lessen the emotional intensity of painful memories, making them more tolerable. EMDR may assist you immediately or it can up to several (8-10) sessions before an issue is resolved. Many issues are complex and require attention to specific details before they can be resolved. It is important that if you commit to EMDR that you commit to completing the treatment process. Many people experience rapid results and think that they are cured or good enough. Premature drop out before memories are desensitized entirely can result in the trauma responses re-occurring. Similar to letting your foot off the gas before you crest a hill, you can easily lose momentum and slide backward!

**What to Expect During EMDR:** During the processing phases of EMDR, the client focuses on the disturbing memory or issue. Multiple brief 'sets' of eye movement or alternate hand-tapping etc. are conducted. Following each set the client is asked what new information arose during the procedure or what they noticed. This new material becomes the focus of the next set. During this activation phase, the client may re-experience aspects of the original event, which may retain high levels of sensory and emotional intensity, even though many years may have passed. Clients are encouraged just to notice their emotions and what comes up (like watching a movie of their life) and be curious and notice what is coming up versus diving deeply into the emotion or memory.

EMDR works directly with memory networks and enhances information processing by forging associations between the distressing memory and new more adaptive information currently contained in other semantic memory networks. It is thought that the distressing memory is transformed when new connections are forged with more positive (and possibly more realistic) information. The result is a transformation of the emotional, sensory, and cognitive components of the memory. When the memory is accessed, the individual is no longer distressed. Instead he/she recalls the incident with a new perspective, new insight, resolution of the cognitive distortions, elimination of emotional distress, and relief of related physiological arousal.

### **8 Phases of EMDR:**

**Phase I – During the 1<sup>st</sup> session or two** I will obtain your history and we will plan your overall treatment. We will clarify and discuss potential targets for EMDR. This may include a fear of doing EMDR or fears of future events.

**Phase II – Preparation:** Before beginning you may be asked to identify a "safe place". This may include an image/memory that elicits comfortable feelings and a positive sense of self. This safe place can be used later to bring closure to an incomplete session, to help you tolerate a particularly upsetting session, or to calm yourself after you leave if images resurface. We will not move forward with EMDR until you are able to self-regulate.

**Phase III – Assessment:** Establishing our immediate target for EMDR involves identifying a particular image, feeling, or sensation that represents the unresolved issue and the emotional disturbance.

**Phase IV – Desensitization:** I will ask you to focus on the image, the negative cognition, and the disturbing emotion or body sensation while their eyes follow an object that moves from side to side.

**Phase V – Installation:** I will check to see if the positive cognition is still valid.

**Phase VI – Body Scan:** I will ask you if you are experiencing any stress or discomfort in any part of your body and if so we will attempt to clear it. The body is the last to release trauma.

**Movie –** I will have you imagine your traumatic incident like a movie to see if there are any upsetting scenes. If so, we will work on them.

**Phase VII – Closure:** Sometimes EMDR has to be concluded prior to sets being complete. If so I will debrief about what to expect after session and ensure you are not leaving the office in an unsettled state.

**Phase VIII – Re-evaluation:** At the beginning of the next session I will review any images that came to mind during the week, discusses any new sensations, cognitions or experiences that are believed to be associated to the process.

### **What you MAY Experience after EMDR**

Following EMDR, processing will continue as your brain assimilates and integrates information. This is a sign that material is being processed. Below are examples of what you may notice:

- You may feel fatigued emotionally and/or physically for the rest of the day
- You may feel energized or that "a weight has been lifted"
- You may get a sense that something has changed, but you are not sure what?
- You may have more vivid dreams.

- You may develop a mild headache or confusion, short-term lack of concentration-or brain fog
- You may recall more related memories or other unrelated memories
- You may be more or less emotional
- You may experience new insights/clarity

This not a full list, but all **these reactions are normal**. Most clients are able to cope and manage effectively. But, if major concerns arise between sessions and you are struggling to cope, email me at [kellipalfypsichology@gmail.com](mailto:kellipalfypsichology@gmail.com). Or if you need to speak to me directly, call me at 780-705 4990. I will call you back within 24hours. If needed, we can slow down, create more safety and distance and/or have more frequent sessions until you are in a better place.

**Advanced EMDR:** I am trained in several advanced EMDR techniques. These include the resetting of your basic emotional circuits to reduce you overall “affect load”, an early trauma approach to working with implicit memories, a recent traumatic events protocol and the DeTur method – an approach is used to reduce the intensity and desire to use certain substances or practices. I am also trained to respond to immediate crisis. Ask me about these techniques if they interest you. I will suggest what I believe will be the best approach.

#### **Empirical Evidence:**

EMDR is an effective method for the treatment of Post-Traumatic Stress Disorder (PTSD). The International Society of Stress Studies guidelines categorize EMDR as an evidence-based treatment for PTSD in adults. EMDR is endorsed by the World Health Organization as evidence based treatment modality. Although controlled research has concentrated on the application of EMDR to PTSD, a number of studies have investigated EMDR’s efficacy with other anxiety disorders. Many of these studies can be easily located on the internet.

#### [Preliminary Evidence of Efficacy for EMDR Resource Development and Installation in the Stabilization Phase of Treatment of Complex Posttraumatic Stress Disorder](#)

Korn, Leeds, Journal of Clinical Psychology, Vol. 58(12), pp. 1465-1487

#### [A Randomized Clinical Trial of Eye Movement Desensitization and Reprocessing \(EMDR\), Fluoxetine, and Pill Placebo in the Treatment of Posttraumatic Stress Disorder: Treatment Effects and Long-Term Maintenance](#)

van der Kolk, Spinazzola, Blaustein, Hopper, Hopper, Korn, Simpson. (2007), Journal of Clinical Psychiatry 68.