

EMDR and The Military In Action

A monthly newsletter to keep you informed.

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

In This Issue

- Eye movement desensitization and reprocessing (EMDR) in the treatment of war veterans
- The rite of return: Coming back from duty-induced PTSD
- Why some soldiers develop PTSD and others don't



Citation of the Month

Silver, S. M., Rogers, S., & Russell, M. C. (2008, August). Eye movement desensitization and reprocessing (EMDR) in the treatment of war veterans. Journal of Clinical Psychology, 64 (8), 947-957. doi:10.1002/jclp.20510.



Recent practice guidelines and meta-analyses have designated eye movement desensitization and reprocessing (EMDR) as a first-line treatment for trauma. Eye movement desensitization and reprocessing is an eight-phase therapeutic approach guided by an information-processing model that addresses the combat veteran's critical incidents, current triggers, and behaviors likely to prove useful in his or her future. Two case examples of combat veterans illustrate the ability of EMDR to achieve symptom reduction in a variety of clinical domains (e.g., anxiety, depression, anger, physical pain) simultaneously without requiring the patient to carry out homework assignments or discuss the details of the event. The treatment of phantom limb pain and other somatic presentations is also reviewed. The ability of EMDR to achieve positive effects without homework indicates that it can be effectively employed on

From The EMDR Book Shelf

Lansing, K. (2013, September). <u>The rite of return: Coming back from duty-induced PTSD</u>. High Ground Press.

The Rite of Return: Coming Back from Duty-Induced PTSD is written for men and women in law enforcement, first response, and the military who are struggling with duty-induced PTSD. In a field-guide format, it presents an overview of a proven treatment approach adapted specifically for this population. The book offers clear teaching on PTSD and its effects on the brain. It also provides practical training in containment techniques for increased control of symptoms and motivation for battling the tendency to isolate. The successful case outcomes described throughout the book give substantive hope for recovery from PTSD. The message throughout is that duty-induced PTSD cannot be resolved in isolation or by reading self-help books. The author's depth of knowledge and scope of experience evident in every chapter draws the reader confidently into places where the clinical generalist cannot tread. Karen Lansing's understanding of duty-induced PTSD goes beyond a simply clinical perspective. She has been trained in public order, ridden extensively on patrol, done 48-hour tours of duty with firefighters, and has resided and trained alongside special weapons teams on military bases. She has "kitted up" and been stuck into flash-point sectors in "exotic places" with tactical advisers in troubled regions. The benefits emerging from that cross-pollination of disciplines are apparent in the author's respect and understanding of the specific clinical needs of Warriors and Rescuers. It's seen in her identification of and clinical protocol for the treatment of a rare but deadly post-shooting symptom that she refers to as transitory shooter's apraxia. The benefits are also clearly seen in the clinical outcomes of those featured in this book. The Rite of Return presents a powerful argument that PTSD need not lead to an end of mission or tour of duty, or to a lifelong injury. Instead, case account after case account indicates that Lansing's treatment approach leads to quite the opposite: officers consistently emerging stronger. These outcomes are confirmed throughout the book by the testimony of SPECT brain images before and after treatment. Accompanying them are accounts of subjects after treatment responding successfully to incidents very similar to those that had culminated in their PTSD. These unsung heroes recovered, becoming more competent, more tactically skilled and more mentally resilient than they had been prior to its timelimited, but significant, intrusion into their lives. Reading between the lines of this book, it's apparent that careers and lives have been saved because of the author's innovative approach. Her only regret is that so many have been lost to the devastation of untreated or ill-treated, duty-induced PTSD. The publication of The Rite of Return couldn't be better timed.

EMDR In The News

Why Some Soldiers Develop PTSD While Others Don't

Feb. 21, 2013 - Pre-war vulnerability is just as important as combat-related trauma in predicting whether veterans' symptoms of post-traumatic stress disorder (PTSD) will be long-lasting, according to new research published in Clinical Psychological Science, a journal of the Association for Psychological Science.

Special Notes

Our Wordpress blog: http://emdrresearchfoundation.wordpress.com/

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(note that there are quite a few relevant entries with links to articles)

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