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A monthly newsletter keeping you informed.

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This is a monthly e-newsletter created primarily for EMDR researchers and trained clinicians. The purpose of it is to promote continued dialogue regarding the efficacy and current developments with EMDR Therapy and its use with a variety of populations.

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This month we focus on the issue of EMDR Therapy in the Treatment of Psychosis. We hope you find it useful and informative.

As the EMDR Research Board of Directors works to create more research opportunities for our community, we hope you join the conversation with your suggestions for upcoming newsletters.

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Sincerely,

*Wendy Freitag, Ph.D.
EMDR Research Foundation*

"Expanding Our Research, Deepening Our Impact."

EMDR Therapy in the Treatment of Psychosis

There has been increasing interest over the years in finding psychological treatments for psychosis. The medical treatment only works for some people and includes the consequences of numerous side effects. In addition there are strong indicators that Childhood Trauma is highly correlated with the incidence of psychosis in adults. As a result, we would like to share a few studies that attempt to include EMDR therapy in the treatment of



Psychosis.

Imagery in psychosis: EMDR as a new intervention in the treatment of delusions and auditory hallucinations Croes, C. F., van Grunsven, R., Staring, A. B., van den Berg, D. P., de Jongh, A., & van der Gaag, M. (2014, September). [\[Imagery in psychosis: EMDR as a new intervention in the treatment of delusions and auditory hallucinations\]](#). Tijdschrift Voor Psychiatrie, 56(9), 568-76. Dutch

Background: Historically, psychotherapy has focused on the treatment of patients' verbal representations (thoughts) and has proved particularly successful in the cognitive behavioural treatment of psychosis. However, there is mounting evidence that visual representations (imagery) play an important role in the onset and maintenance of psychiatric disorders, including psychotic symptoms. There are indications that heightened emotionality and vividness of visual representations are associated with severity of psychotic experiences. This may imply that a reduction in the vividness and emotionality of the psychosis-related imagery can lessen the suffering and stress, caused by the psychotic symptoms.

Aim: To introduce EMDR as a possible type of psychological treatment for patients suffering from psychosis-related imagery.

Method: Three outpatients who had a psychotic disorder and suffered from auditory hallucinations and delusions were treated with EMDR in an average of six sessions. Treatment was performed by three therapists in different psychiatric institutions. All three were experienced in administering CBT and EMDR.

Results: Treatment with EMDR reduced patients' level of anxiety, depression and the severity of psychotic symptoms. In addition, patients reported less avoidant behaviour and greater cognitive insight. Conclusion: The results of the study suggest that EMDR reduces the vividness and emotionality of imagery in psychosis which in turn alleviates the patients' psychotic symptoms. Further research into other possible types of interventions for the treatment of imagery in psychosis is recommended.

Treating PTSD in patients with psychosis: A within-group controlled feasibility study examining the efficacy and safety of evidence-based PE and EMDR protocols de Bont, P. A. J. M., van Minnen, A., & de Jongh, A. (2013, December). [\[Treating PTSD in patients with psychosis: A within-group controlled feasibility study examining the efficacy and safety of evidence-based PE and EMDR protocols\]](#). Behavior Therapy 44(4), 717-730 doi:10.1016/j.beth.2013.07.002

The present study uses a within-group controlled design to examine the efficacy and safety of two psychological approaches to posttraumatic stress disorder (PTSD) in 10 patients with a concurrent psychotic disorder. Patients were randomly assigned either to prolonged exposure (PE; N = 5) or eye movement desensitization and reprocessing (EMDR; N = 5). Before, during, and after treatment, a total of 20 weekly assessments of PTSD symptoms, hallucinations, and delusions were carried out. Twelve weekly assessments of adverse events took place during the treatment phase. PTSD diagnosis, level of social functioning, psychosis-prone thinking, and general psychopathology were assessed pretreatment, posttreatment, and at three-month follow-up. Throughout the treatment, adverse events were monitored at each session. An intention-to-treat analysis of the 10 patients starting treatment showed that the PTSD treatment protocols of PE and EMDR significantly reduced PTSD symptom severity; PE and EMDR were equally effective and safe. Eight of the 10 patients completed the full intervention period. Seven of the 10 patients (70%) no longer met the diagnostic criteria for PTSD at follow-up. No serious adverse events occurred, nor did patients show any worsening of hallucinations,

delusions, psychosis proneness, general psychopathology, or social functioning. The results of this feasibility trial suggest that PTSD patients with comorbid psychotic disorders benefit from trauma-focused treatment approaches such as PE and EMDR.

Treating trauma in psychosis with EMDR: A pilot study van den Berg, D. P. G., & van der Gaag, M. (2012, June). [Treating trauma in psychosis with EMDR: A pilot study](#). *Journal of Behavior Therapy and Experimental Psychiatry*, 43(1), 664-671. doi:10.1016/j.jbtep.2011.09.011

Background: Initial studies have shown that posttraumatic stress disorder (PTSD) can be effectively treated in patients with a psychotic disorder. These studies however used adapted treatment protocols, avoided direct exposure to trauma related stimuli or preceded treatment with stabilizing techniques making treatment considerably longer in duration.

Method: An open trial in which adult subjects with a psychotic disorder and a comorbid PTSD (n = 27) received a maximum of six Eye Movement Desensitization and Reprocessing (EMDR) therapy sessions. PTSD symptoms, psychotic symptoms and additional symptoms were assessed at baseline and end-of-treatment.

Results: The dropout rate was 18.5 percent (five subjects). Only five of the twenty-two completers (22.7%) still met criteria for PTSD after treatment. PTSD symptoms, auditory verbal hallucinations, delusions, anxiety, depression, and self-esteem all improved significantly. Paranoid ideation and feelings of hopelessness did not improve significantly. Treatment did not lead to symptom exacerbation in subjects. There were no adverse events, such as suicide attempts, self-mutilation, aggressive behavior or admission to a general or psychiatric hospital.

Conclusions: This pilot study shows that a short EMDR therapy is effective and safe in the treatment of PTSD in subjects with a psychotic disorder. Treatment of PTSD has a positive effect on auditory verbal hallucinations, delusions, anxiety symptoms, depression symptoms, and self-esteem. EMDR can be applied to this group of patients without adapting the treatment protocol or delaying treatment by preceding it with stabilizing interventions.

2015 EMDRIA Conference

We are looking forward to the 2015 Conference in Philadelphia at the end of August. Please be sure to visit us at our Booth at the Conference! There you can find all the Highlights of our activities over the last year, learn about the wonderful raffle prizes we have planned for this year's conference and participate in our 2015 Campaign. Our raffle donors have been extremely generous giving us prizes valued over \$8000. You won't want to miss this opportunity to participate!

Be a part of the Future! **Join the Visionary Alliance**

History

At the 2011 EMDRIA Conference, the Foundation initiated the "Visionary Alliance." This program offers our constituents the opportunity to give a sustaining pledge by automatic monthly donations. An effective way to "pay back" for all the benefits received due to EMDR is to "pay it forward" by your ongoing contribution to EMDR research. Since that

time, a number of you have taken the opportunity to participate in this community of Research Supporters.

What does it take to be a member?

Your monthly donations of \$15 or more will provide a predictable, continuous stream of income that will give the Foundation leverage when pursuing funding from larger organizations, granting agencies and foundations.

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What does it mean to be a member of the Visionary Alliance?

When the Foundation is funding large scale research projects to the tune of thousands of dollars a year, you will know you were part of the ground swell of support that made it possible. Please consider becoming a "give as you earn" donor by donating one EMDR session or a portion of a session per month to support EMDR research.

The EMDR Research Foundation is the only funding source dedicated solely to supporting EMDR research worldwide.

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- **Clinicians** - If you have read a research article that stimulated your thinking, inspired your work, or made a difference in your work with a client, please share this by writing a brief case description that elucidates or is inspired by the findings of a research article.
- **Researchers** - If you have been involved in a research study and would like to share clinical examples that elucidate your findings, we invite you to share them with your clinical colleagues by writing your case example and how it relates to your research.
- **Clinical consultants and trainers** - If you have found a research article that has proven helpful to a consultee or to trainees in their understanding of or application of EMDR, please share your experiences. We can support researchers in disseminating their findings and provide the critical link between research and practice. To learn more about TRIP, visit our website.

If you think you might want to contribute to the column and want more information, email Katy Murray at katymurraymsw@comcast.net.

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