



EMDR AND THE MILITARY IN ACTION E-NEWSLETTER

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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 Action** is to promote continued dialogue regarding the efficacy and current developments with EMDR and its use with these special populations.

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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. Go to <http://emdrresearchfoundation.org/research-grants/research-grant-awards> for details. If you need access to expertise for a research project, don't hesitate to apply for a \$1,000 research consultation award. For details go to <http://emdrresearchfoundation.org/research-grants/research-consultation-awards>.

Citations – EMDR therapy and Neurobiology

Bossini, L., Casolary, I., Santarnecki, E., Caterini, C., Koukouna, D, Fernandez, I., & Fagiolini, A. (2012). [Evaluation study of clinical and neurobiological efficacy of EMDR in patients suffering from post-traumatic stress disorder](#). *Rivista di Psichiatria*, 47(2 Suppl), 12–15. doi:0.1708/1071.11733.



Unlabelled: Strong evidences support use of EMDR in patients suffering from post-traumatic stress disorder (PTSD). AIM: To evaluate clinical and neurobiological-

structural efficacy of EMDR on drug-naïve PTSD without comorbidity.

Materials and Methods: We made clinical evaluation and hippocampal volume measurement by MRI on 29 subjects suffering from PTSD and on 30 healthy control-subjects. Then, patients were treated with EMDR and after three months of psychotherapy the clinical evaluation and the MRI exam were repeated.

Results and Discussion: Our results demonstrated that the diagnosis of PTSD was no more possible on all the patients who terminated the psychotherapy (n=18). At the same time, all the patients showed an average increase of 6% in hippocampal volumes.

Conclusions: Our research suggests that EMDR treatment correlates not only with a significant improvement of symptoms of PTSD, but also with a significant increase of hippocampal volumes.

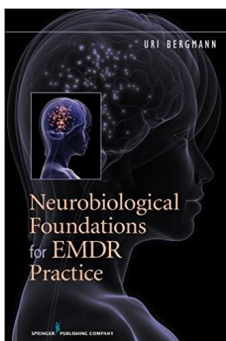
Pagani, M., Di Lorenzo, G., Monaco, L., Daverio, A., Giannoudas, I., La Porta, P., Verardo, A. R., Niolu, C., Fernandez, I. and Siracusano, A.

(2015). [Neurobiological response to EMDR therapy in clients with different psychological traumas.](#) *Frontiers in Psychology*, 6, 1614. doi:10.3389/fpsyg.2015.01614.



We assessed cortical activation differences in real-time upon exposure to traumatic memory between two distinct groups of psychologically traumatized clients also in comparison with healthy controls. We used electroencephalography (EEG) to compare neuronal activation throughout the bilateral stimulation phase of Eye Movement Desensitization and Reprocessing (EMDR) sessions. We compared activation between the first (T0) and the last (T1) session, the latter performed after processing the index trauma. The group including all clients showed significantly higher cortical activity in orbito-frontal cortex at T0 shifting at T1 toward posterior associative regions. However, the subgroup of clients with chronic exposure to the traumatic event showed a cortical ring at both stages which was closer to that of controls. For the first time EEG monitoring enabled to disclose neurobiological differences between groups of clients with different trauma histories during the reliving of the traumatic event. Cortical activations in clients chronically exposed to traumatic memories were moderate, suggesting an association between social and environmental contexts with the neurobiological response to trauma exposure and psychotherapy.

From the EMDR Book Shelf



Bergmann, U. (2012). [Neurobiological foundations for EMDR practice.](#) New York, NY: Springer Publishing Company. Aug 2014

This volume introduces the most current research about the neural underpinnings of consciousness and EMDR (eye movement desensitization and reprocessing) in regard to attachment traumatic stress and dissociation. It is the first book to comprehensively integrate new findings in information processing, consciousness, traumatic disorders of information processing, chronic trauma and autoimmune compromises, and EMDR's underlying mechanisms of action. The text examines

online/wakeful information processing, including sensation, perception, somatosensory integration, cognition, memory, language and motricity, and off-line/sleep information processing, such as slow wave sleep and cognitive memorial processing, as well as REM/dream sleep and its function in emotional memory processing. The volume also addresses disorders of consciousness, including coma, anesthesia, and other neurological disorders, particularly disorders of Type 1 PTSD, complex PTSD/dissociative disorders, and personality disorders. It delves into chronic trauma and autoimmune function, especially in regard to diseases of unknown origin, and examines them from the perspective of autoimmune compromises resulting from the unusual neuroendocrine profile of PTSD sufferers. The final section integrates all material to illustrate the ability of EMDR's bilateral neural stimulation to impact, mediate, and change the functioning of neural circuitry, thereby facilitating repair in the linking and binding of neural networks.

In the News

Slaught, K. (2016, December 30). [Kenny Slaught: The new EMDR therapy to help people with PTSD. NBC Right Now.](#)

For previous Military in Action issues containing EMDR therapy and Neurobiology, [click here](#) and [here](#).

Note: Issues from October 2013 and August 2014

For a complete list of Military In Action Archives, [click here](#).

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