

Eye movement therapy

Desensitization found to help those dealing with trauma

By Karen Owen-Phelps

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The little girl was so upset she hadn't slept in a week.

The little boy tended to flee — sometimes dashing into traffic — when a bad memory surfaced.

The young trauma survivors improved when a local therapist treated them with eye movement desensitization and reprocessing (EMDR).

The little girl went home after her session and took a four-hour nap. The little boy is now a "normal elementary schooler," said Linda L. Roth, clinical director at the Lampion Center in Evansville.

The treatment sounds unbelievably simple. Once trust has been established, a therapist using EMDR may pass a couple of fingers back and forth in front of a patient's eyes up to 50 times in a session. In other cases, the clinician may tap or pat rhythmically on the client's knees, upturned palms or shoulders.

Roth teaches some children to "self-soothe" with "butterfly hugs." If disturbing thoughts intrude at night, they can cross their arms across their chest and pat themselves on the shoulders.

In still other cases, Roth does EMDR with a special light box sitting on a side table in her office. A green light blinks on and off as it dances across a dark screen. Holding a button attached to the box by an electrical cord also can give clients a slight buzzing sensation.

Jack Weber, a licensed clinical social worker at the Vet Center, uses EMDR on combat veterans with post traumatic stress disorder. It's not a cure-all, but it helps some people, he said.

The treatment was developed by California psychologist Francine Shapiro in the late 1980s. Shapiro was walking through the woods one day as troubling thoughts tumbled through her mind when she noticed the light filtering through the trees helped her feel calmer, Roth said.

The tapping and the light treatments she devised as a result of her epiphany engage both sides of the brain.

Weber said he uses EMDR for some patients when they hit a mental block in

processing their memories and trauma and they can't seem to get past that block.

"You are jumping the midline of the brain," said Weber, who learned EMDR from Shapiro. With EMDR, "the person tends not to be able to suppress, repress a lot of stuff. In a kind of brief sort of way, you are taking out the bad, then you put in the good. You have them visualize something positive and it seems to stick."

Brain scans show actual changes in the brain as a result of the treatment, Roth said.

Patients and some mental health professionals can be skeptical, but that doesn't seem to limit EMDR's effectiveness, Roth and Weber said.

"What I have found," Weber said, "if they get through the first session OK, you are pretty well hooked."

Out of hundreds of patients, Roth said, she's seen only three adults who weren't helped by EMDR.

Adults may need five to seven treatments to notice a difference. Children may feel relief immediately. They might not have the verbal skills to explain it, but their parents can tell, Roth said.

"How safe do you feel?" is a question she frequently asks her juvenile clients. One little boy's answer at the beginning of his treatment was to hold out his hands, pressed together, Roth said. After EMDR, Roth repeated the question. He responded by opening his arms wide.



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