

Research into the efficacy of EMDR

Posttraumatic Stress Disorder (PTSD)

EMDR has been well established as an effective treatment for PTSD. A recent survey of 38 randomised clinical trials (RCT) established that EMDR and Trauma Focussed Cognitive Behaviour Therapy (TFCBT) are the two most effective treatments for this disorder [1].

A review of the efficacy of EMDR for **children with PTSD** (7 studies) showed EMDR and Cognitive Behaviour Therapy (CBT) to be superior to all other treatments. EMDR was found to be slightly more effective when compared directly with CBT [2].

The International Society for Traumatic Stress Studies current treatment guidelines have designated EMDR as an effective and empirically supported treatment for PTSD, and has given an “A” rating for adult PTSD [3]. The American Psychiatric Association Practice Guideline has stated that EMDR is one of the three recommended first-line treatments for trauma [4]. In the UK, EMDR is one of the two recommended treatments for PTSD in the guidelines of the National Institute of Clinical Excellence (NICE) [5].

Other disorders

Research into EMDR with other disorders is at an earlier stage of development.

There are published RCTs showing the effectiveness of EMDR with **survivors of sexual abuse** [6]. One study showed EMDR to be significantly more efficient, using approximately half the number of sessions to achieve results as compared with CBT [7].

In another RTC, EMDR resulted in large and significant reductions of memory-related distress, and problem behaviours in boys with **conduct problems** [8].

Many other studies have been published regarding the efficacy of EMDR for other disorders in non-randomised studies. These include:

- **Depression.** Generally the study of the reduction of depressive symptoms using EMDR has been a secondary measure in post traumatic stress studies many of which have shown reductions of depression with EMDR. Some studies have specifically shown EMDR as an effective treatment for depression [9] [10].
- **Borderline Personality Disorder** [11]
- **Body Dysmorphic Disorder** [12]
- **Generalized Anxiety Disorder** [13]
- **Pain Management** [14]
- **Paedophilia** [15]
- **Phantom Limb Pain** [16] [17] [18]
- **Bulimia Nervosa** [19]
- **Phobia** [20]
- **Obsessive Compulsive Disorder (OCD)** [21]

Further information

More details about research into EMDR can be found as follows:

EMDR Institute: www.emdr.com/efficacy.htm
Francine Shapiro Library: www.emdr.nku.edu

References

1. Bisson, J., et al., *Psychological treatments for chronic post-traumatic stress disorder. Systematic review and meta-analysis*. British Journal of Psychiatry, 2007. **190**: p. 97-104.
2. Rodenburg, R., et al., *Efficacy of EMDR in children: A meta-analysis*. Clinical Psychology Review, 2009. **29**: p. 599-606
3. Foa, E., et al., *Effective treatments for PTSD: Practice Guidelines of the International Society for Traumatic Stress Studies 2009*, New York: Guilford Press.
4. American Psychiatric Association, *Practice Guideline for the Treatment of Patients with Acute Stress Disorder and Posttraumatic Stress Disorder*. 2004, American Psychiatric Association Practice Guidelines: Arlington, VA.
5. National Institute for Clinical Excellence, *Post Traumatic Stress Disorder (PTSD): The Management of Adults and Children in Primary and Secondary Care*. 2005, NICE Guidelines.: London.
6. Edmond, T., A. Rubin, and K. Wambach, *The effectiveness of EMDR with adult female survivors of childhood sexual abuse*. Social Work Research, 1999. **23**: p. 103-116.
7. Jaberghaderi, N., et al., *A comparison of CBT and EMDR for sexually abused Iranian girls*. Clinical Psychology and Psychotherapy, 2004. **11**: p. 358-368.
8. Soberman, G., R. Greenwald, and D. Rule, *A controlled study of eye movement desensitization and reprocessing (EMDR) for boys with conduct problems*. Journal of Aggression, Maltreatment, and Trauma, 2002. **6**: p. 217-236.
9. Bae, H., D. Kim, and Y. Park, *Eye movement desensitization and reprocessing for adolescent depression*. Psychiatry Investigation, 2008. **5**: p. 60-65.
10. Rosas, U., R. Lopez, and M. Jarero, *Effect of the EMDR psychotherapeutic approach on emotional cognitive processing in patients with depression*. The Spanish Journal of Psychology, 2010. **13**: p. 399-405
11. Brown, S. and F. Shapiro, *EMDR in the treatment of borderline personality disorder*. Clinical Case Studies, 2006. **5**: p. 403-420.
12. Brown, K., T. McGoldrick, and R. Buchanan, *Body dysmorphic disorder: Seven cases treated with eye movement desensitization and reprocessing*. Behavioural and Cognitive Psychotherapy, 1997. **25**: p. 203-207.
13. Gauvreau, P. and S. Bouchard, *Preliminary evidence for the efficacy of EMDR in treating generalized anxiety disorder*. Journal of EMDR Practice and Research, 2008. **2**: p. 26- 40.
14. Ray, A. and A. Zbik, *Cognitive behavioral therapies and beyond*, in *Practical Pain Management (3rd ed)*, C. Tollison, J. Satterhwaite, and J. Tollison, Editors. 2001, Lippincott: Philadelphia. p. 189-208.
15. Ricci, R., C. Clayton, and F. Shapiro, *Some effects of EMDR treatment with previously abused child molesters: Theoretical reviews and preliminary findings*. Journal of Forensic Psychiatry and Psychology, 2006. **17**: p. 538-562.
16. Russell, M., *Treating traumatic amputation-related phantom limb pain: a case study utilizing eye movement desensitization and reprocessing (EMDR) within the armed services*. Clinical Case Studies, 2008. **7**: p. 136-153.
17. Schneider, J., et al., *EMDR in the treatment of chronic phantom limb pain*. Pain Medicine, 2008. **9**: p. 76-82.
18. Wilensky, M., *Eye movement desensitization and reprocessing (EMDR) as a treatment for phantom limb pain*. Journal of Brief Therapy, 2006. **5**: p. 31-44.
19. Kowal, J.A., *QEEG analysis of treating PTSD and bulimia nervosa using EMDR*. Journal of Neurotherapy, 2005. **9**: p. 114-115.
20. De Jongh, A., E. Ten Broeke, and M. Renssen, *Treatment of specific phobias with Eye Movement Desensitization and Reprocessing (EMDR): protocol, empirical status, and conceptual issues*. Journal of Anxiety Disorders 1999. **13**: p. 69-85.
21. Böhm, K. and U. Voderholzer, *Use of EMDR in the treatment of obsessive-compulsive disorders: a case series*. Verhaltenstherapie, 2010. **20**: p. 175-181.