
RECENT ARTICLES ON EMDR

Andrew M. Leeds, Ph.D.

This regular column appears in each quarterly issue of the EMDRIA Newsletter. It lists citations, abstracts, and preprint/reprint information (when available) on all EMDR related journal articles. The listings include peer reviewed research reports and case studies directly related to EMDR (whether favorable or not), including original studies, review articles and meta-analyses accepted for publication or that have appeared in the previous six months in scholarly journals. Authors and others aware of articles accepted for publication are invited to submit pre-press or reprint information. Listings in this column will exclude: published comments and most letters to the editor, non-peer reviewed articles, dissertations, and conference presentations, as well as books, book chapters, tapes, CDs, and videos. Please send submissions and corrections to: <Aleeds@theLeeds.net>.

Note: A comprehensive listing of all published journal articles related to EMDR from 2004 and prior years can be found on David Baldwin's award winning web site at: <<http://www.trauma-pages.com/emdr-2003.htm>>.

Recent Articles

Pearlman, L. A., & Courtois, C. A. (2005). Clinical applications of the attachment framework: Relational treatment of complex trauma. *Journal of Traumatic Stress, 18*(5), 449-459.

Laurie Anne Pearlman, Ph.D., Traumatic Stress Institute/Center for Adult & Adolescent Psychotherapy LLC, 22 Morgan Farms Drive, ?South Windsor, Connecticut 06074.

❖ *Abstract* ❖ The self and attachment difficulties associated with chronic childhood abuse and other forms of pervasive trauma must be understood and addressed in the context of the therapeutic relationship for healing to extend beyond resolution of traditional psychiatric symptoms and skill deficits. The authors integrate contemporary research and theory about attachment and complex developmental trauma, including dissociation, and apply it to psychotherapy of complex trauma, especially as this research and theory inform the therapeutic relationship. Relevant literature on complex trauma and attachment is integrated with contemporary trauma theory as the background for discussing relational issues that commonly arise in this treatment, highlighting common challenges such as forming a therapeutic alliance, managing frame and boundaries, and working with dissociation and reenactments.

.....

Rothbaum, B. O., Astin, M. C., & Marsteller, F. (2005). Prolonged Exposure versus Eye Movement Desensitization and Reprocessing (EMDR) for PTSD rape victims. *Journal of Traumatic Stress, 18*(6), 607-616.

Barbara Olasov Rothbaum, Ph.D. E-mail: brothba@emory.edu, Department of Psychiatry and Behavioral Sciences, Emory University School of Medicine, Atlanta, Georgia; Behavioral Research Consulting, Inc., Stone Mountain, Georgia.

❖ *Abstract* ❖ This controlled study evaluated the relative efficacy of Prolonged Exposure (PE) and Eye Movement Desensitization and Reprocessing (EMDR) compared to a no-treatment waitlist control (WAIT) in the treatment of PTSD in adult female rape victims (n = 74). Improvement in PTSD as assessed by blind independent assessors, depression, dissociation, and state anxiety was significantly greater in both the PE and EMDR group than the WAIT group (n = 20 completers per group). PE and EMDR did not differ significantly for change from baseline to either posttreatment or 6-month follow-up measurement for any quantitative scale.

.....

Schneider, G., Nabavi, D., & Heuft, G. (2005). Eye movement desensitization and reprocessing in the treatment of posttraumatic stress disorder in a patient with comorbid epilepsy. *Epilepsy & Behavior*, 7(4), 715-718.

G. Schneider, Department of Psychosomatics and Psychotherapy, University of Munster, Domagkstrasse 22, D-48149 Munster, Germany.

❖ *Abstract* ❖ Whether eye movement desensitization and reprocessing (EMDR) treatment of posttraumatic stress disorder (PTSD) causes reactivation of epilepsy is as yet unclear. A 34-year-old woman was treated in an inpatient multimodal psychotherapeutic setting with EMDR for PTSD resulting from sexual harassment and for a moderate depressive episode. She had been diagnosed with idiopathic generalized absence epilepsy in childhood, but had experienced no seizures under lamotrigine medication since 1999. After the second EMDR session, clinical seizures in the form of absences occurred, and were validated by electroencephalography. The seizures ceased after medication with benzodiazepines and an increase in the lamotrigine level. She underwent four more sessions of EMDR treatment successfully without further seizures. Possible triggers are discussed, especially as to whether EMDR treatment played a role in reactivating epilepsy. Further research and publications on the application of EMDR in epilepsy patients are needed.

.....

Spinazzola, J., Blaustein, M., & van der Kolk, B. A. (2005). Posttraumatic stress disorder treatment outcome research: The study of unrepresentative samples? *Journal of Traumatic Stress*, 18(5), 425-436.

Joseph Spinazzola, Ph.D., The Trauma Center, Boston University School of Medicine, National Child Traumatic Stress Network, Boston, Massachusetts

❖ *Abstract* ❖ The authors review sample composition and enrollment data for 34 studies cited in the International Society for Traumatic Stress Studies (ISTSS) 2000 Practice Guidelines as meeting the Level A U.S. Agency for Health Care Policy and Research (AHCPR) classification for treatment of adult posttraumatic stress disorder (PTSD), and compare data from more recent research. Findings reveal that many published reports omitted vital data including exclusion criteria and rates, demographics, and trauma exposure history. Moreover, severe comorbid psychopathology, a common feature of treatment-seeking individuals with PTSD, emerged as the predominant reason for exclusion across studies. Subsequently published studies exhibited improved reporting of sample characteristics and demonstrated comparable outcomes despite inclusion of more diverse trauma exposure samples. Findings indicate the need for future efficacy research to adopt more comprehensive reporting requirements and to test the applicability of validated treatments to individuals suffering from as yet unstudied combinations of PTSD and prevalent comorbid disorders.

.....

Zimmermann, P; Güse, U; Barre, K; Biesold, K H (2005) EMDR in the German Armed Forces—Therapeutic Impact of Inpatient Therapy of Posttraumatic Stress Disorder/EMDR-Therapie in der Bundeswehr—Untersuchung zur Wirksamkeit bei Posttraumatischer Belastungsstörung, *Krankenhauspsychiatrie*. Vol. 16(2), Jun 2005, pp. 57-63

❖ *Abstract* ❖ In this retrospective study 89 German soldiers being treated as inpatients for a posttraumatic stress disorder between 1998 and 2002 were investigated. After a mean of 29 months they were reevaluated with questionnaires. 20 patients treated with EMDR could be compared to 14 patients with a supportive treatment. The results (IES. SUD. VoC) directly after treatment and in the long-term follow-up were significantly superior in the EMDR-group compared to the controls. Soldiers traumatized in out-of-area missions tended to have a better short-term outcome than soldiers traumatized in Germany.

