ECHO Idaho: Behavioral Health in Primary Care

Eye Movement Desensitization Reprocessing (EMDR)

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The speaker has no relevant financial conflicts of interest to disclose.

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Learning Objectives

• Introduce EMDR (8 stages)
  • Increase familiarity with EMDR
  • Identify appropriate/inappropriate referrals
The birth of a modality

- Francine Shapiro, PhD
- 1987- the walk in the woods
- Negative emotions lessened with EM
- Adaptive Information Processing (AIP)Model (trauma is stored and “stuck” in the neural network)
Recognitions/Endorsements

- American Psychiatric Association
- World Health Organization
- Substance Abuse/Mental Health Administration
- US Department of Veterans Affairs
- US Department of Defense
- International Society for Traumatic Stress Studies
Indications

- PTSD/Trauma
- Anxiety/Phobia
- Eating Disorders
- Addictions
- Depression
- Complicated grief
- Groups
EMDR is unique

- NO homework between sessions
- NO talking in detail about trauma (language)
- NO focus on changing thoughts/feelings
- Sessions may last 90 min.

Note: EMDR is NOT for everyone.
What IS EMDR?

1. Client history & Treatment Planning
2. Preparation & Coping Strategies
3. Assessment
4. Desensitization
5. Installation
6. Body Scan
7. Closure
8. Re-evaluation
Bilateral Stimulation (phase 4-5)

- Eye movement
- Tapping
- (new tech)

In EMDR BLS is critical for AIP.
Pt. Case

“Stephanie”
33yo female
Questions/Comments?