

Eye movement desensitization and reprocessing (EMDR)

Eye movement desensitization and reprocessing (EMDR) is a type of therapy used to treat the symptoms of trauma.

When we experience traumatic events the thoughts, feelings and memories we have about those events can get stuck. It can be hard to move on from them.

The aim of EMDR is to help the brain to process distressing memories. This reduces their influence and allows patients to develop ways to more effectively get on with their lives.

Who it's for

Eye movement desensitization and reprocessing is suitable for children and adults.

It is usually offered alongside other forms of therapy.

Issues we can help with

The traumatic events that eye movement desensitization and reprocessing (EMDR) can help with include:

- war related experiences
- childhood sexual and/or physical abuse or neglect
- natural disaster
- assault
- · surgical trauma
- · road traffic accidents
- workplace accidents

EMDR is recommended by The National Institute for Health and Care Excellence (NICE) as the first treatment for people with symptoms of post-traumatic stress disorder.

It can also help children who experience self-esteem, emotional and behavioural difficulties.

There is some evidence that people with autistic spectrum disorders and those with learning disabilities can benefit from EMDR after they experience trauma.

Length of treatment

Sessions are held weekly and last up to 90 minutes.

For most patients a small number of sessions are offered. For patients who have experienced very severe trauma, or more than one trauma, the therapy can last for a year or more.

Assessment

Assessment starts with a full evaluation of your psychological wellbeing and we talk about the most appropriate treatment for you.

Therapy sessions

You are seen individually for eye movement desensitization and reprocessing (EMDR).

During therapy sessions you are supported to recall a traumatic event and at the same time receive bilateral stimulation. This means receiving stimuli in a rhythmic left-right pattern. The stimuli can be something you hear, see or feel.

For example, bilateral stimulation could involve:

- moving your eyes from side to side
- tapping movements on different sides of your body
- tones you hear through one ear then the other wearing headphones

Children and young people

For a child, a typical treatment session begins by stimulating their imagination to strengthen their self-confidence and sense of wellbeing. For example, children may be asked to imagine a safe or protected place where they feel relaxed and comfortable, or to remember a time when they felt strong and confident. These positive images, thoughts and feelings are then combined with the bilateral stimulation. These first experiences help children to understand the process and know what to expect.

When agreed upon between the parent, child and therapist, the child is asked to bring up an upsetting memory or event that is related to the trauma they have experienced. They might be asked to talk about it or to draw it.

Effectiveness

Research shows that eye movement desensitization and reprocessing (EMDR) is at least as effective as other talking therapies in the treatment of symptoms of trauma. Talking therapy covers all the psychological therapies that involve a person talking to a therapist about their problems. Studies have found that EMDR can help people more quickly than other therapies.

Risks and side effects

Talking and thinking about emotional problems can be difficult. For this reason some people can feel worse before they feel better. We work with you to manage strong emotional reactions.

Alternatives

Eye movement desensitization and reprocessing is not for everyone. There is a range of alternative treatments that your therapist talks to you about during assessment.

Other psychological treatments include:

 trauma focused cognitive behavioural therapy (/care-and-treatment/treatments/cognitivebehavioural-therapy/)

In some cases patients are helped by medication which can be prescribed by a doctor and on rare occasions by our staff.

Patients may choose not to take up any form of professional help for their issue and manage the problem themself.

Questions or worries

Therapy can bring up difficult issues. We want you to feel able to discuss any questions or worries with your therapist. This is important to progress your therapy.

If you would like to discuss any concerns with someone independent of your therapy please contact our patient advice and liaison service (/about-us/contact-us/enquiries-and-complaints/pals/).

Privacy and your data (privacy notice) (/about-us/contact-us/about-this-website/privacy-and-your-data/)

Accessibility (/about-us/contact-us/about-this-website/accessibility/)

Support and complaints (/about-us/contact-us/enquiries-and-complaints/support-and-complaints/) Library (https://library.tavistockandportman.ac.uk/)

Moodle (http://moodle.tavistockandportman.ac.uk/)

MyTAP login page (https://tavportman-live.tribalclouds.net/urd/sits.urd/run/siw_lgn)

Our CQC rating: Good (https://www.cqc.org.uk/provider/RNK)

- (https://www.facebook.com/Tavistock-and-Portman-NHS-Foundation-Trust-Education-and-Training-1678865332386644/)
- (https://www.linkedin.com/company/tavistock-and-portman-nhs-foundation-trust)
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