

## 2019 EMDR and EMDR related Research

Behnammoghadam, M., Kheramine, S., Zoladl, M., Cooper, R. Z., & Shahini, S. (2019). Effect of eye movement desensitization and reprocessing (EMDR) on severity of stress in emergency medical technicians. *Psychol Res Behav Manag*, 12, 289-296.

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Background and objectives: People working in health care centers and hospitals, especially the emergency departments, often experience severe stresses due to the nature of their jobs. The current study was aimed at determining the effect of eye movement desensitization and reprocessing (EMDR) on severity of stress of medical emergency technicians. Conclusion: The current study results indicated that EMDR technique significantly reduced the intensity of stress in the intervention group and can be helpful to control stress experienced by emergency medical staff.

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Carletto, S., Porcaro, C., Settanta, C., Vizzari, V., Stanizzo, M. R., Oliva, F. et al. (2019). Neurobiological features and response to eye movement desensitization and reprocessing treatment of posttraumatic stress disorder in patients with breast cancer. *European Journal of Psychotraumatology*, 10(1), 1600832. Carmen Settanta, Department of Clinical and Biological Sciences, University of Turin, Regione Gonzole 10, Orbassano, TO 10043, Italy. E-mail: carmen.settanta@unito.it

Background: Breast cancer (BC) is one of the most common invasive types of cancer among women, with important consequences on both physical and psychological functioning. Patients with BC have a great risk of developing posttraumatic stress disorder (PTSD), but few studies have evaluated the efficacy of psychological interventions to treat it. Furthermore, no neuroimaging studies have evaluated the neurobiological effects of psychotherapeutic treatment for BC-related PTSD. Objective: The study aimed to evaluate the efficacy of Eye Movement Desensitization and Reprocessing therapy (EMDR) as compared to Treatment as Usual (TAU) in BC patients with PTSD, identifying by electroencephalography (EEG) the neurophysiological changes underlying treatments effect and their correlation with clinical symptoms. Conclusions: It is essential to detect PTSD symptoms in patients with BC, in order to offer proper interventions. The efficacy of EMDR therapy in reducing cancer-related PTSD is supported by both clinical and neurobiological findings.

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Chen, J.-y., Yu, J.-c., Cao, J.-p., Xiao, Y., Gu, H., Zhong, R.-l. et al. (2019). Abstinence Following a Motivation-Skill-Desensitization-Mental Energy Intervention for Heroin Dependence: A Three-year Follow-up Result of a Randomized Controlled Trial. *Current Medical Science*, 39(3), 472-482. Corresponding author, Zeng-Zhen Wang, Department of Epidemiology and Biostatistics, School of Public Health, Tongji Medical College, Huazhong University of Science and Technology, Wuhan 430030, China. E-

mail: zzhwang@hust.edu.cn

The high rate of relapse among heroin users remains a significant public concern in China. In the present study, we utilized a Motivation-Skill-Desensitization-Mental Energy (MSDE) intervention and evaluated its effects on abstinence and mental health. Eighty-nine male heroin users in a drug rehabilitation center were enrolled in the study. The participants in the MSDE intervention group (n=46) received MSDE intervention, which included motivational interviewing, coping skills training, eye movement desensitization and reprocessing, and mindfulness-based psychotherapy. Overall, the MSDE intervention, which uses a combined strategy for relapse prevention, could be a promising approach for preventing relapse among heroin users in China.

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de Bruijn, L., A I Stramrood, C., Lambregtse-van den Berg, M. P., & Rius Ottenheim, N. (2019). Treatment of posttraumatic stress disorder following childbirth. *J Psychosom Obstet Gynaecol*, 1-10. Lisa de Bruijn Pieter de la Courtstraat 9, 2313 BP Leiden, The Netherlands. E-mail: [bruijn.l@gmail.com](mailto:bruijn.l@gmail.com)

Aim: The aim of this systematic review is to give an overview of the literature on treatment options for posttraumatic stress disorder (PTSD) following childbirth and to assess their efficacy. Conclusions: EMDR and CBT seem to be effective as therapy for PTSD following childbirth. However, evidence is still limited and more controlled trials are needed to draw conclusive results.

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de Roos, C., Rommelse, N., Donders, R., Knipschild, R., Bicanic, I., & de Jongh, A. (2019). Response to "Comparing the Effectiveness of EMDR and TF-CBT for Children and Adolescents: a Meta-Analysis. *Journal of Child & Adolescent Trauma*, 1-3. <https://doi.org/10.1007/s40653-019-00257-1>. Carlijn de Roos. E-mail [c.deroos@debascul.com](mailto:c.deroos@debascul.com)

With interest we read the article by Lewey and colleagues describing the results of a meta-analysis, entitled "Comparing the Effectiveness of EMDR and TF-CBT for Children and Adolescents: A Meta-Analysis" (Lewey et al. 2018). In this article, the authors presented the available evidence on the effectiveness of Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) and Eye Movement Desensitization and Reprocessing (EMDR) therapy for children and adolescents with symptoms of Posttraumatic Stress Disorder (PTSD). The authors included studies from 1989 until 2015 that applied TF-CBT and/or EMDR therapy in children and adolescents with full or subclinical PTSD, and compared these treatments to waiting list, head to head or other active treatment control conditions. Based on the results of this meta-analysis, the authors concluded that both TF-CBT and EMDR therapy were effective in treating PTSD, and that TF-CBT was marginally more effective than EMDR.

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Gilmoor, A. R., Adithy, A., & Regeer, B. (2019). The Cross-Cultural Validity of Post-Traumatic Stress Disorder and Post-Traumatic Stress Symptoms in the Indian Context: A Systematic Search and Review. *Frontiers in Psychiatry*, 10. doi:10.3389/fpsy.2019.00439. Open access: <https://www.frontiersin.org/articles/10.3389/fpsy.2019.00439/full>  
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**Background:** The cross-cultural validity of the construct of post-traumatic stress disorder (PTSD) has been a life-long debate in the field of trauma. Its validation in a setting such as India—a nation prone to considerably traumatic events such as conflict, natural disasters, and sexual violence against women—warrants exploration.  
**Objective:** To describe how PTSD and post-traumatic stress symptoms (PTSS) are conceptualized in the Indian context by systematically examining the evidence of studies that investigate PTSD and PTSS in India.  
**Conclusions:** Results indicate diversity in approaches for identifying, measuring, and treating PTSD and PTSS in the Indian population and how sociocultural norms influence its manifestation in this population. Future research calls for the development of culturally sensitive approaches to identifying and addressing PTSD and PTSS in India.

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Goldstein, E., McDonnell, C., Atchley, R., Dorado, K., Bedford, C., Brown, R. L. et al. (2019). The Impact of Psychological Interventions on Posttraumatic Stress Disorder and Pain Symptoms. *The Clinical Journal of Pain*, 1. <https://doi.org/10.1097/AJP.0000000000000730>. Ellen Goldstein, Ph.D. University of Wisconsin-Madison, Department of Family, Medicine and Community Health 1100 Delaplaine Ct, Madison, WI 53715. E-mail: ellengoldstein8@gmail.com

**Objectives:** Posttraumatic stress disorder (PTSD) and pain often co-occur, introducing clinical challenges and economic burden. Psychological treatments are considered effective for each condition, yet it is not known which therapies have the potential to concurrently address PTSD and pain-related symptoms.  
**Discussion:** Findings indicated that the majority of the interventions appeared to have greater impact on reducing PTSD rather than pain-related symptoms. There remains a need to further develop interventions that consistently impact PTSD and pain-related outcomes when these two conditions co-occur.

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Guido, C. A., Zicari, A. M., Duse, M., & Spalice, A. (2019). Eye movement desensitisation and reprocessing (EMDR) treatment associated with parent management training (PMT) for the acute symptoms in a patient with PANDAS syndrome: a case report. *Italian Journal of Pediatrics*, 45(1). doi:10.1186/s13052-019-

0667-1. Open access: <https://ijponline.biomedcentral.com/articles/10.1186/s13052-019-0667-1>. Cristiana A. Guido, Department of Pediatrics, Child Neurology Division, Sapienza University of Rome, 00161 Rome, Italy. E-mail: alberto.spalice@uniroma1.it

**Background:** The purpose of this report was to present the results of eye movement desensitisation and reprocessing (EMDR) therapy associated with parent management training (PMT) in a child with paediatric autoimmune neuropsychiatric disorder associated with streptococcus (PANDAS), who had previously only been treated with pharmacological treatment.

**Case presentation:** The case concerns an 11-year-old boy who presented with simple and complex vocal tics, motor tics, obsessive-compulsive traits and irritability from the age of 6 years, in addition to a positive result for streptococcal infection. The course of symptoms followed a relapsing-remitting trend with acute phases that were contingent on the infectious episodes.

**Conclusions:** Following eight sessions of EMDR, preceded by training sessions with the parents, the child showed a significant reduction in symptoms and disappearance of the exacerbation. These results indicate the possibility of improving the treatment outcomes of patients with PANDAS by a combined approach using both antibiotic and EMDR therapies.

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Haour, F., Dobbelaere, E., & Beaurepaire..., C. D. (2019). Scientific Evaluation of EMDR Psychotherapy for the Treatment of Psychological Trauma Summary: Scientific evaluation of EMDR psychotherapy. *jneurology.com*. Dr. France Hour, EMDR France Association, 9 rue Papillon, 75009 Paris, France; Email: fhaour@gmail.com.

A recently described integrative psychotherapy, Eye Movement Desensitization and Reprocessing (EMDR), developed by F. Shapiro since 1989, has been confronted to the validation procedure used in pharmacological treatment (randomized control trials). This paper is a current review of the scientific validation steps of EMDR psychotherapy and its mechanisms of action. This EMDR therapy, focused on the resolutions of traumas, was started by treating patients with post-traumatic stress disorders (PTSD). The integrative EMDR protocol obtained the highest level of efficiency, for PTSD treatment. The efficiency of the protocol is now under study and scientific evaluation for troubles in which the trauma experiences are triggers or factors of maintenance of the troubles: anxiety, depression, phobia, sexual troubles, schizophrenia, etc. This new integrative psychotherapy follows the pathways and the timing observed for the evaluation and the validation of other therapies.

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Lee, C. W., de Jongh, A., & Hase, M. (2019). Lateral eye movements, EMDR, and memory changes: A critical commentary on Houben et al.(2018). *Clinical Psychological Science*, 2167702619830395.  
<https://journals.sagepub.com/doi/10.1177/2167702619830395>

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Littel, M., & van Schie, K. (2019). No evidence for the inverted U-Curve: More demanding dual tasks cause stronger aversive memory degradation. *J Behav Ther Exp Psychiatry*, 65, 101484. M. Little. E-mail address: [littel@essb.eur.nl](mailto:littel@essb.eur.nl)

Background and objectives: Simultaneously making eye movements and recalling a memory leads to competition in working memory (WM), which reduces memory vividness and emotionality. The dose-response relationship between WM taxation and aversive memory degradation is predicted to be either linear (i.e., more cognitively demanding tasks exhibit stronger effects) or follow an inverted U-curve (i.e., there should not be too little, but also not too much taxation).  
Conclusions: There is strong evidence for a linear dose-response relationship between WM taxation and memory degradation immediately after the intervention, and some unconvincing evidence for this pattern one day later. There was no evidence for an inverted U-curve.

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Maddox, S. A., Hartmann, J., Ross, R. A., Ressler - Neuron, K. J., & 2019. (2019). Deconstructing the gestalt: Mechanisms of fear, threat, and trauma memory encoding. *Neuron*, 102(1), 60-74. <https://doi.org/10.1016/j.neuron.2019.03.017>.  
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Threat processing is central to understanding debilitating fear- and trauma-related disorders such as posttraumatic stress disorder (PTSD). Progress has been made in understanding the neural circuits underlying the “engram” of threat or fear memory formation that complements a decades-old appreciation of the neurobiology of fear and threat involving hub structures such as the amygdala. In this review, we examine key recent findings, as well as integrate the importance of hormonal and physiological approaches, to provide a broader perspective of how bodily systems engaged in threat responses may interact with amygdala-based circuits in the encoding and updating of threat-related memory. Understanding how trauma-related memories are encoded and updated throughout the brain and the body will ultimately lead to novel biologically-

driven approaches for treatment and prevention.

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Merz, J., Schwarzer, G., & Gerger, H. (2019). Comparative Efficacy and Acceptability of Pharmacological, Psychotherapeutic, and Combination Treatments in Adults With Posttraumatic Stress Disorder: A Network Meta-analysis. *JAMA Psychiatry*.  
Heike Gerger, PhD, Division of Clinical Psychology and Psychotherapy, University of Basel, Missionsstrasse 62, 4055 Basel, Switzerland. E-mail: heike.gerger@gmail.com

**Importance:** Posttraumatic stress disorder (PTSD) is a prevalent mental disorder, with a high risk of chronicity, comorbidity, and functional impairment; PTSD is complicated to treat, and the debate on the best treatment approach is ongoing. **Objective:** To examine comparative outcomes and acceptability of psychotherapeutic and pharmacological treatments and their combinations in adults with PTSD. **Conclusions and Relevance:** These results suggest superiority of psychotherapeutic treatments over pharmacological treatments; network, but not pairwise, meta-analyses suggest superiority of combined treatments over pharmacological treatments in improving PTSD symptom severity in the long term. The scarcity of reported long-term findings hampers definite conclusions and demonstrates the need for robust evidence from large-scaled comparative trials providing long-term follow-up data.

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Nicosia, G. J., Minewiser, L., & Freger, A. (2019). World Trade Center: A longitudinal case study for treating Post Traumatic Stress Disorder with Emotional Freedom Technique and Eye Movement Desensitization and Reprocessing. *Work*, 63(2), 199-204. doi:10.3233/WOR-192921. Gregory J. Nicosia, Ph.D., Advanced Diagnostics PC, 3519 Bigelow Boulevard, Pittsburgh PA 15213, USA. E-mail: thoughtenergy@aol.com.

**BACKGROUND:** Emotional Freedom Techniques (EFT) and Eye Movement Desensitization and Reprocessing (EMDR) have been empirically validated as effective psychotherapeutic interventions for treating Post Traumatic Stress Disorder (PTSD). **RESULTS:** Effects of a single session of EFT assessed immediately after treatment demonstrated an elimination of clinically significant scores on both the TSI and PAI. The participant concluded treatment with nearly complete symptom remediation and a return to work. **CONCLUSION:** The combination of treatment methods appears to be highly effective and allowed this subject to return to work after many years of disability.

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Opheim, E., Andersen, P. N., Jakobsen, M., Aasen, B., & Kvaal, K. (2019). Poor quality in systematic reviews on PTSD and EMDR—an examination of search methodology and reporting. *Frontiers in Psychology*, 10, 1558.

<https://www.frontiersin.org/articles/10.3389/fpsyg.2019.01558/abstract>  
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**Background:** Different user groups regard systematic reviews as reliable and valuable sources for answering research questions. For systematic reviews to fulfill their purpose, methodological quality in all stages are of importance. The studies identified in a systematic search form the basis of the review, thus the search process methodology is important for both performing and reporting the search. The purpose of the present study was to evaluate the quality of non-Cochrane systematic reviews by analyzing how they perform and report the search. The focus of this article is eye movement desensitization and reprocessing (EMDR), a trauma-focused therapy commonly used for post-traumatic stress disorder (PTSD).

**Conclusions:** Our findings raise important questions for future debate on the risk of omitting studies, thus impairing the conclusions in a systematic review. For clinical purposes, researchers should investigate if, and how, the search strategy in a systematic review affects the body of knowledge and the results.

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Peregrinova, L., & Jordan, J. (2017). Psychotherapy for posttraumatic stress disorders among cardiac patients after implantable cardioverter defibrillator shocks. Feasibility and implementation of a psychocardiological therapy manual in inpatient cardiac rehabilitation. *Heart and Mind*, 1, 42.

<http://www.heartmindjournal.org/text.asp?2017/1/1/42/206963>

Ludmila Peregrinova, Department of Psychocardiology, Kerckhoff-Clinic Heart and Thorax Center, Ludwigstr. 41, Bad Nauheim 61231, Germany.

**Context:** The reported psychopathological symptoms in patients following implantable cardioverter defibrillator (ICD) shocks differ. Reports concern mostly psychosocial distress with trauma-related symptoms: high hyperarousal, re-experiencing, and avoidance behavior. Patients suffering from these impairments require targeted therapy. Until now, only a few publications report psychological treatment for patients with ICD shocks. The aim of the present work was to examine whether the implementation of the specific psychotherapy, including eye movement desensitization and reprocessing (EMDR), during inpatient cardiac rehabilitation is safe and feasible (health-care study) and to explore whether this intervention leads to a reduction of psychopathology in cardiac patients after ICD shocks. As we have no control group design, we can only describe the change but we do not know whether the health status would be the same without our intervention.

**Conclusion:** Our results suggest that an inpatient cardiac rehabilitation program with intensive targeted psychotherapy including EMDR is a safe intervention for posttraumatic stress in patients who are distressed after receiving ICD shocks. In particular, patients accepted the EMDR treatment, emotional arousal was tolerable, and no cardiac complications occurred during EMDR confrontation. Future strategies could be investigating the impact of intervention on long-term effect, stability, and mortality in this population. In addition, our study showed that some patients had a very long time between ICD shocks and the beginning of the professional therapy. Hence, this

leads to the finding that a waiting control group could be acceptable by the ethical commission.

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Rahimi, F., Rejeh, N., Bahrami, T., Heravi-Karimooi, M., Tadrissi, S. D., Griffiths, P. et al. (2019). The effect of the eye movement desensitization and reprocessing intervention on anxiety and depression among patients undergoing hemodialysis: A randomized controlled trial. *Perspectives in Psychiatric Care*. Nahid Rejeh. E-mail: reje@shahed.ac.ir

Purpose: This study examined the effect of the eye movement desensitization and reprocessing intervention on depression and anxiety in patients undergoing hemodialysis.

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Rousseau, P. F., El Khoury-Malhame, M., Reynaud, E., Zendjidjian, X., Samuelian, J. C., & Khalfa, S. (2019). Neurobiological correlates of EMDR therapy effect in PTSD. *European Journal of Trauma & Dissociation*, 3(2), 103-111. <http://dx.doi.org/10.1016/j.ejtd.2018.07.001> .  
P.F. Rousseau. CNRS and Aix-Marseille University, Timone Institute of Neuroscience, UMR 7289, Faculté de Medecine, 27, boulevard Jean-Moulin, 13005 Marseille, France. E-mail address: paf.0526@gmail.com

Objective. – Posttraumatic stress disorder (PTSD) is a trouble that arises in the aftermath of a traumatic event. The overwhelming resulting stressful memory can be desensitized by a brief therapy, Eye Movement Desensitization and Reprocessing (EMDR). The aim of the present study is to explore the functional brain correlate of such an effective treatment (EMDR) in PTSD.

Conclusions. – The healing process of traumatic memory desensitization by EMDR would act through a functional decrease in brain regions shown to be disrupted in PTSD. Given the role of these structures in memory, self-perception, fear extinction, REM sleep, reward, and attention, we discuss possible explanations of EMDR mechanisms of action in PTSD that may help further improve this therapy.

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Rousseau, P. F., Malbos, E., Verger, A., Nicolas, F., Lançon, C., Khalfa, S. et al. (2019). Increase of precuneus metabolism correlates with reduction of PTSD symptoms after EMDR therapy in military veterans: an 18F-FDG PET study during virtual reality exposure to war. *European journal of nuclear medicine and molecular imaging*, 1-5.

<https://dx.doi.org/10.1007/s00259-019-04360-1>

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The prevalence of posttraumatic stress disorder (PTSD) is higher among veterans, and can lead to disastrous consequences such as suicide. Eye movement desensitization and reprocessing (EMDR) is recommended in first-line psychotherapies for PTSD. Virtual reality exposure (VRE) coupled with 18F-FDG PET imaging can highlight the activated brain regions during stress exposure. The objective of this study is to identify, after EMDR therapy, the regions of brain metabolism that evolve during the stress exposure of a war scene with symptomatic remission in a group of military veterans suffering from PTSD, and to secondarily search for predictive metabolic features. Conclusion: The clinical improvement in military patients with PTSD after EMDR is related to increased precuneus metabolism upon VR stress exposure.

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Schwarz, J. E., Baber, D., Barter, A., & Dorfman, K. (2019). A Mixed Methods Evaluation of EMDR for Treating Female Survivors of Sexual and Domestic Violence. *Counseling Outcome Research and Evaluation*, 1-15.

<https://doi.org/10.1080/21501378.2018.1561146>

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This study assessed the efficacy of eye movement desensitization and reprocessing (EMDR) for women who experienced trauma due to sexual or domestic violence. Twenty-one adult female clients at a nonprofit agency participated in this mixed-methods study during which they completed 8 sessions of EMDR, pre- and post-assessments, and an in-person interview (four counselors were also interviewed). These results support EMDR as an effective treatment modality for survivors of sexual and domestic violence and highlight the need for its inclusion in counselor education programs.

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Slotema, C. W., van den Berg, D. P. G., Driessen, A., Wilhelmus, B., & Franken, I. H. A. (2019). Feasibility of EMDR for posttraumatic stress disorder in patients with personality disorders: a pilot study. *Eur J Psychotraumatol*, 10(1), 1614822.

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Background: Trauma and posttraumatic stress disorder (PTSD) are prevalent in patients with personality disorders. Despite the established efficacy of eye movement desensitisation and reprocessing (EMDR) for PTSD, EMDR has barely been examined in patients with comorbid PTSD and personality disorders.

Conclusions: The addition of EMDR techniques to treatment, as usual, may be beneficial in the treatment of PTSD in patients with personality disorders in order to reduce symptoms of PTSD, dissociation and insomnia. Although one-third of these patients did not complete the additional EMDR treatment, no severe complications (e.g. suicidal behaviour or hospitalisation) occurred. Controlled studies are needed to further investigate the validity of these findings.

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Taylor, A., & McLachlan, N. H. (2019). Treating a 16 Year Old with a History of Severe Bullying: Supplementing Cognitive Behavioural Therapy with EMDR within the Context of a Case Formulation Approach. *Journal of Child & Adolescent Trauma*, 1-10.  
Alice Taylor, Child & Adolescent Mental Health ServicesCambridgeshire & Peterborough Foundation Trust Peterborough, UK. E-mail: [alice\\_taylor\\_16@yahoo.co.uk](mailto:alice_taylor_16@yahoo.co.uk)

This article describes the use of a case formulation approach, integrating evidence-based treatment in the context of individual clinical traits. It focuses on the supplementation of cognitive behavioural therapy (CBT) with eye movement desensitization and reprocessing (EMDR) in the treatment of a young person, presenting with an initial diagnosis of obsessive-compulsive disorder (OCD). A case formulation suggested the possibility of a differential diagnosis of Adjustment Disorder, indicating the usefulness of the addition of EMDR sessions to process memories of severe bullying. Previous studies promote the idea of using EMDR in cases that do not meet the threshold for Post-Traumatic Stress Disorder (PTSD), in order to reduce the presentation of anxiety. Earlier research suggests that each of these models has specific strengths and attributes in the treatment of mental health difficulties and, whilst based within the context of a well-established case conceptualisation, can be effectively integrated.

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Valedi, S., Alimoradi, Z., MoradiBaglooei, M., Pakpour, A. H., Ranjbaran, M., & Chegini, V. (2019). Investigating the effect of Eye Movement Desensitization and Reprocessing on pain intensity in patients with primary dysmenorrhea: a protocol for a randomized controlled trial. *Trials*, 20(1). doi:10.1186/s13063-019-3507-0  
Open access: <https://trialsjournal.biomedcentral.com/articles/10.1186/s13063-019-3507-0>  
Sahar Valedi, Social Determinants of Health Research Center, Qazvin University of Medical Sciences, Bahonar blv., Qazvin 34197-59811, Iran. E-mail: [zainabalimoradi.sbmu.ac.ir@gmail.com](mailto:zainabalimoradi.sbmu.ac.ir@gmail.com)

**Background:** Unpleasant experience with the previous menstruation can increase the sensitivity to pain which may lead to moderate to severe pain in patients with dysmenorrhea. Eye movement desensitization and reprocessing (EMDR) is a psychological method to alleviate the distress from unpleasant memories and related events and can be used for other conditions such as anxiety, depression, and chronic pain. This protocol was designed to investigate the effect of EMDR therapy on pain intensity in patients with dysmenorrhea.

**Discussion:** The results are expected to provide the information on the efficacy of EMDR therapy to manage moderate to severe pain in patients with primary dysmenorrhea.

**Ethics and dissemination:** The research proposal is approved by the human ethics committee of Qazvin University of Medical Sciences (IR.QUMS.REC.1397.100). The results of this trial will be submitted for publication in a peer-reviewed research journal.

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van Bentum, J. S., Sijbrandij, M., Kerkhof, A. J. F. M., Huisman, A., Arntz, A. R., Holmes, E. A. et al. (2019). Treating repetitive suicidal intrusions using eye movements: study protocol for a multicenter randomized clinical trial. *BMC Psychiatry*, 19(1), 143. J. S. van Bentum, Department of Clinical, Neuro- and Developmental Psychology, Amsterdam Public Health Research Institute, Vrije Universiteit Amsterdam, Van der Boechorststraat 7, 1081 BT Amsterdam, The Netherlands. E-mail: j.s.van.bentum@vu.nl

**BACKGROUND:** Suicide is a major public health problem, and it remains unclear which processes link suicidal ideation and plans to the act of suicide. Growing evidence shows that the majority of suicidal patients diagnosed with major depression or bipolar disorder report repetitive suicide-related images and thoughts (suicidal intrusions). Various studies showed that vividness of negative as well as positive intrusive images may be reduced by dual task (e.g. eye movements) interventions taxing the working memory. We propose that a dual task intervention may also reduce frequency and intensity of suicidal imagery and may be crucial in preventing the transition from suicidal ideation and planning to actual suicidal behaviour. This study aims a) to evaluate the effectiveness of an Eye Movement Dual Task (EMDT) add-on intervention targeting suicidal imagery in depressed patients, b) to explore the role of potential moderators and mediators in explaining the effect of EMDT, and c) to evaluate the cost-effectiveness of EMDT. **DISCUSSION:** If proven effective, EMDT can be added to regular treatment to reduce the frequency and vividness of suicidal imagery. **TRIAL REGISTRATION:** The study has been registered on October 17th, 2018 at the Netherlands Trial Register, part of the Dutch Cochrane Centre ( NTR7563 ).

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van Veen, S. C., Kang, S., & van Schie, K. (2019). On EMDR: Measuring the working memory taxation of various types of eye (Non-) Movement conditions. *Journal of Behavior Therapy and Experimental Psychiatry*, 101494. <https://doi.org/10.1016/j.jbtep.2019.101494>  
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#### Background and objective

A recent large randomized controlled trial employing different forms of eye (non-) movements in Eye Movement Desensitization and Reprocessing (EMDR) showed that fixating eyes on a therapist's moving or non-moving hand led to equal reductions in symptoms of post-traumatic stress disorder (PTSD). However, numerous EMDR lab analogue studies found that eye movements produce larger memory effects than eyes stationary. These beneficial effects are typically explained by differences in working memory (WM) taxation. We tested the degree of WM taxation of several eye (non-) movement conditions used in the clinical trial..

**Conclusions:** In line with previous lab studies, making eye movements was more

taxing than eyes fixed. We discuss why this effect was not observed for reductions in PTSD symptoms in the clinical trial (e.g., differences in dependent variables, sample population, and intervention duration). For more comprehensive future insights, we recommend integration of mechanistically focused lab analogue studies and patient-oriented clinical studies.

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Wampold, B. E. (2019). A smorgasbord of PTSD treatments: What does this say about integration. *Journal of Psychotherapy Integration*, 29(1), 65.

In this special section of the *Journal of Psychotherapy Integration* a variety of treatments for PTSD, including prolonged exposure, EMDR, interpersonal therapy, memory specific training, schema therapy, and narrative-emotion process therapy, were described. In this comment, two issues were discussed (a) psychotherapy integration, and (b) mechanisms of change and treatment effectiveness. A case is made that all the treatments for PTSD are integrative, whether or not this is explicit in their presentation. It is noted that all treatments for PTSD are approximately equally effective and that the evidence for the mechanisms of change underlying the various treatments is weak.

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