

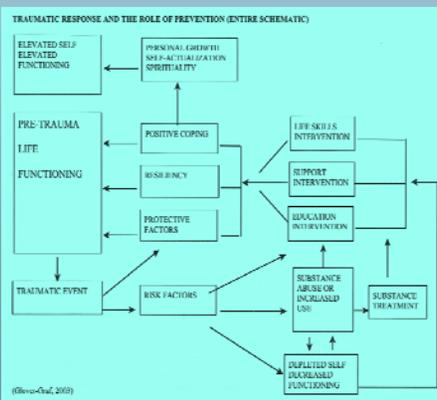


# HIV & EMDR (Eye Movement Desensitization & Reprocessing)

by: Lynnette Suarez, LPC, MA – Erie Family Health Center, Chicago, IL

## Introduction

Eye Movement Desensitization and Reprocessing (EMDR) is an empirically-based technique effective in the treatment of symptoms of Post Traumatic Stress Disorder. I trained in this technique because of the innumerable incidents of abuse and trauma that were being reported by patients in therapy. It is a systematic, 8-phase technique which utilizes imagery along with eye movement to diminish neural pathways which hold negative thoughts about traumatic events. The HIV diagnosis in itself can be traumatic and this technique has been useful in diminishing the negative feelings and thoughts affiliated with the diagnosis, allowing the patient to move forward in their lives without the thought of HIV constantly being at the forefront. The patients have responded positively.



## Methods

EMDR is an information processing therapy that gives the brain the opportunity to REprocess a negative experience. In doing so, this changes the way the information regarding the trauma is stored, therefore changing the way it affects us. (Trauma can become locked in the brain with the original thoughts, sounds, smells, visuals, etc.) The reprocessing can be analogous to a train ride where at each stop the original, negative thoughts regarding the trauma get off and the new, more adaptive perception, which was not available at the time of the event, gets on.

The 8-phase technique is as follows:

- 1) History taking; identification of possible EMDR targets
- 2) Assessment and evaluation of client stability and readiness for treatment
- 3) Narrowing down of target trauma for reprocessing and "mapping" out of images and negative self-beliefs regarding the trauma
- 4) Desensitization; actual reprocessing of the trauma using bilateral stimulus such as eye movement, tapping, or auditory stimulation
- 5) Installation: linking of the desired positive, more adaptive cognition with the original memory
- 6) Body Scan: attention is brought to any residual tension remaining in the body
- 7) Closure: procedure for closing the session
- 8) Re-evaluation of target memory



## Results

Although several of the patients that I have worked with have a clinical diagnosis of Post Traumatic Stress Disorder; many of them suffer from some symptoms but not enough to meet the criteria for a full diagnosis. EMDR has been useful in alleviating many of these symptoms that have been plaguing the patients long before their diagnosis of HIV.

At least 95% of the patients that I have treated in the past two years have been the victims of some sort of sexual assault or abuse. Most of them have been sexually abused as children often leading to risky behaviors as adults.

I have used EMDR to reprocess this type of abuse as well as physical and emotional abuse inflicted on them by their caregivers and life partners.

Many of the most traumatized patients have reported an immediate decrease in trauma symptoms such as nightmares, intrusive thoughts, and suicidal ideation.

## Lessons Learned

Talk therapy is sometimes just not enough. One can talk about a trauma over and over but it still does not remove the images locked in the brain affiliated with that trauma. That's why the VA supports and utilizes this treatment with many of our soldiers who return from Iraq; because it works.

Not only do the patients come into the clinic suffering from past trauma, many of them are re-traumatized with their diagnosis (if newly diagnosed) and some still carry around negative self-beliefs even if they have had the virus for many years.

EMDR has helped clear out some of these negative neural pathways so that these people can move on with their lives without HIV being at the forefront of their every thought, feeling, plan, and desire for the future.

Initially, when I learned the technique, the EMDR Institute trained us to work with single trauma incidents...and I panicked. Most of my patients have suffered from multiple traumas but I learned that if we focused on the one that bothered them the most, many of the maladaptive perceptions regarding the other traumas fell by the wayside.