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A revolutionary therapy is said to *wipe traumatic experiences* from your memory, helping with everything from anxiety to personality disorders. But is it a cure or just *wishful thinking*? Meg Mason puts it to the test



I'm standing in the car park of a hospital in London, with my six-hour-old baby in my arms, waiting as my husband adjusts the baffling system of car-seat straps. It's a freezing, grey day and a strong breeze is whipping around us. In a split second, the wind catches the car door and throws it against an old Porsche parked beside us. Out of nowhere, the owner appears and, seeing the shallow dent, she comes running towards me shouting, "You stupid girl, look what you did to my car! You bitch!" My legs begin shaking uncontrollably. Still weak from labour, I feel like I'm going to fall over with a newborn in my arms. It's the first time she's ever been outside. Somehow, as my husband moves in front of me to cut her off, I make it into the car, lock the doors and give in to sobs.

That was 13 years ago. Or was it yesterday? I can still hear the crack of metal against metal and feel my grip tightening around the baby as chemical fear flooded my core. Even now, if I have to go near a hospital, I'm overwhelmed with dread. Dizzy, nauseous. I can't visit friends and their new babies in a maternity ward. I bristle when anyone calls me a "girl". I fucking hate Porsches.

It's the sort of memory unlikely to ever lose its sting. Or so I thought before I came across eye movement desensitisation and reprocessing (EMDR), a form of psychotherapy that aims to uncouple traumatic experiences from the emotions attached to them.

What takes place in a session of EMDR is both simple and complex. While holding a painful memory in mind, the patient focuses on the therapist's fingers as they move back and forth at eye level, causing their gaze to track left to right. One theory is that doing so stimulates the same brain mechanisms as rapid eye movement (REM), the type of sleep that allows the brain to process and store waking experience. But in an instance of trauma – a road accident, an assault or incidence of bullying – the brain freezes, meaning in basic terms, the experience never gets shifted to the part of your memory where negative emotions are no longer present. Which is why, with little or no trigger, we can hear, taste, see and smell the event, and re-experience the fear and sense of powerlessness we felt at the time. Again and again and again.

"Trauma is held in the body so, although we logically know it's over, we never *feel* it's over," explains Claire Kullack of the EMDR Association of Australia. "[The process] enables the trauma memory to feel like a historical event, removing the constant element of danger the trauma survivor experiences." Somehow, by stimulating the brain's natural processing, the memory quite literally rewrites itself before your eyes, conforming to a version of events that would have been manageable to you, and will remain that way from now on.

Although EMDR is not widely known here, there are registered practitioners nationwide and the practice has existed for nearly 30 years. It was developed by Francine Shapiro, an American psychologist who inadvertently discovered that by moving her own eyes back and forth while calling a disturbing episode to mind, the attendant physical and emotional responses were reduced instantly. The practice was first used to treat war veterans and survivors of childhood abuse with symptoms of post-traumatic stress disorder (PTSD), before becoming more widely available as reports of its efficacy spread.

More than half of the Australian population will experience a traumatic event in their lifetime. And from the 30 or so formal studies of EMDR, it's been shown that up to 90 per cent of victims of a single trauma no longer exhibit symptoms of PTSD after just three 90-minute sessions. For victims of multiple trauma, 77 per cent respond after six sessions. "It's one of the gold-standard, first-line treatments for PTSD and other kinds of psychological distress," says Kullack.

Although EMDR is now recognised by the World Health Organization and American Psychiatric Association, scepticism persists in other quarters. And arguably, any form of treatment that promises such extraordinary results in so little time *should* be subject to suspicion. An article in *Scientific American* concluded that while EMDR may lessen the symptoms of traumatic anxiety and is better than doing nothing, "not a shred of good evidence exists that EMDR is superior to other [treatments that] cognitive-behaviour therapists have been administering routinely for decades".

"It does seem too good to be true," admits Dr Jon Laugharne, a Perth-based psychiatrist who uses EMDR. "I was definitely wary before ➔

I treated my first patient, a veteran who'd been resistant to all forms of treatment for 20 years. He got better so quickly, it blew my mind."

Still, it doesn't help that, even today, it's not entirely understood exactly how EMDR works. "The basic hypothesis is that every human being has an innate ability to integrate and make sense of every kind of experience," Kullack explains. "But in traumatic moments, there's so much going on, we're just trying to survive. Fight, flight or freeze takes over and the brain's ability to process what's happening is arrested." EMDR supposedly undoes "the freeze", allowing the brain and body to do what it's designed to do. A metaphor I've recently come across: just as the body could repair a physical wound as long as the site is clean, the brain can heal itself, but only once detritus is cleared – and often as quickly.

"What I love about it is that we're trusting the person's ability to do this themselves as we, the therapists, guide them," Kullack says. "It's beautiful to watch our clients as they begin to feel the trauma that's been so vivid for so long become foggy or distant, and the emotional and physiological charge fall away."

Since so many conditions, from anxiety and depression to addiction and eating disorders, may be caused by undiagnosed PTSD, Laugharne says addressing the root trauma may enable a patient to better overcome the presenting condition. "Even if it's a modest trauma, treat the event and it follows that mood and anxiety levels will improve."

On the subject of "modest" trauma: at the beginning of my first EMDR session, the therapist mentions she's been working with a victim of one of the Paris terrorist attacks, and my impulse is to stand up and leave. Surely my experience is too insignificant to qualify. Not at all, my

therapist says. Because as individuals, how we would experience the same event differs wildly. Another new mother could have emerged from that car park unscathed if her brain reacted differently in the moment, while for me, it becomes a life-defining event. "What I view as traumatic may not be for you. We are unique and we all process differently," says Kullack. "As long as those classic trauma symptoms are occurring – intrusive images, triggers, flashbacks, avoidance behaviours, hyper-vigilance – there's something for us to work on there. And when the person feels like their trauma has been validated and they've been listened to, the healing begins right there."

It's true that when my therapist asks me to give "a headline version" of what happened that day and I burst into tears, her quick acknowledgment of how intense the memory clearly is for me comes as an immense relief. After an explanation of how we'll proceed, the process begins, even though I'm still inwardly wondering if it's quackish. But as the memory rises and the bilateral eye movement begins, within minutes I can feel the memory reforming itself. In the version I'm creating, the woman never comes near me. Instead of standing pinned to the spot, I watch myself turn back to the hospital and receive the comfort of a nurse. I realise, even as I type this now, the idea seems preposterous, but hand on my heart it happened exactly this way. And the

following day, when I tried to summon the original memory – perhaps as a test – it wouldn't come. All I could see was the woman, far off in the distance, battling the wind.

It surprised me that there was barely

any talking during the session – which for those of us who have attempted traditional "talk therapy", diligently hauling a memory out in a 50-minute session, packing it away again and dashing back to work, red-eyed and exhausted, the fact that EMDR doesn't require verbal narration is

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a revelation. It makes complete sense that, because there are no words or language in that primal part of the brain where trauma lives, our attempts to articulate those feelings into submission are mostly useless.

"I saw a counsellor for three-and-a-half years," says Maddy Hearne, a 17-year-old student. "It was okay at the start but after a year or so, I knew talking about the one event over and over wasn't helping me." The event was a major car accident that occurred when an oncoming car crossed the freeway's median strip and collided head-on with the car she and her father were travelling in. Hearne was 14 at the time and not only suffered whiplash and a knee injury, but emotionally, she just wasn't the same. "I was constantly angry, miserable all the time because I didn't want to go out and do anything. It was constantly in my dreams. Even if I woke up and went back to sleep, it would still be happening. I blamed myself for the accident, I think, because we were on our way to my netball training."

Last year, Hearne's mother googled alternative treatments for what was suspected by then to be PTSD and came across EMDR. "I didn't understand it at the start," Hearne says, "but I knew I had to try it because I wanted to feel better. At the time I found it so hard to physically tell people what had happened because I could still picture it, hear the slamming of the two cars and all that stuff. But as I went through the process, those pictures became really blurry. They're still there, but it feels like they've moved. There was a sense of relief that I could let go of what had happened."

Even when the trauma doesn't occur as an isolated event, but as something ongoing, EMDR can be just as effective. "I grew up with a very unwell mother, who had severe schizophrenia, untreated until I was 12," says Grace*, now 45. "Whenever there's mental illness in a family, you live with the fear of seeing it in yourself. You know that your behaviours and reactions are based on events in childhood that aren't useful to you."

In adulthood, marriage and motherhood moved Grace towards dangerous lows, and she spent many months on antidepressants for post-natal anxiety. "I could intellectualise it all because of past counselling, which would unlock the emotions but just leave me drained." Again by chance, Grace connected with EMDR therapist Dr Sarah Schubert and, she says, "I knew after the first session that something had cleared in me. I walked away lighter."

Twelve sessions in "the memories are still there, but I can look at them without having



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the same response in my body," Grace says. "My marriage has improved because I don't feel constantly under threat, meaning I can actually be engaged, present and less reactive. I view everything differently now."

Such a radical change in overall perspective is not uncommon. No matter how vivid, our memories are neither 100 per cent accurate nor static, explains Laugharne, meaning we can reconstruct them and apply new meaning by addressing them head-on. "Memories aren't fixed like a video tape. They can become fluid again, giving us the chance to alter them into something more manageable, before shifting them into the filing system. That's why we can see rapid change in our related narrative in so little time."

A potent example from America's EMDR Institute: "A rape victim shifts from feeling horror and self-disgust, to holding the firm belief that, 'I survived it and I am strong'... The net effect [is that] clients [feel] empowered by the very experience that once debased them."

I certainly don't claim to have experienced a trauma that ranks on that scale, or that EMDR would work for everyone. It's expensive, and a baseline emotional stability is required. But after a single session I know it has been life-changing. While in reality I was a terrified girl in a car park, now I feel myself walking forward as a woman whose instinct from her very first day as a mother was to protect her baby.

But to Grace must go the final word: "For the first half of my life, events in childhood were my anchor. But now, as a woman in my forties, I have a drive and energy I've never had before. I'm feeling myself become the person that, underneath, I was always meant to be." □

To find a registered EMDR practitioner, visit emdreaa.org. If you or someone you know is struggling, visit lifeline.org.au