

# OCD and EMDR

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# OCD the pathway



- My pathway into OCD therapy began in 2009
- I began working with 4 young men, who had been unemployable since leaving education
- All 4 had been referred for therapy in the past, however the form of therapy offered had failed them.

# Treatment options



- Treat with a standard protocol (EX/RP)
- Refer on
- Identify other therapeutic modalities
- Be innovative
  
- I turned to EMDR, “Because it seemed to fit”

# Protocol



- I originally turned to the phobia protocol
  - OCD often resembles a phobia
    - Now I think of OCD more in terms of TRAUMA
- Video rewind
  - Allows a client to confront issues safely
    - One thing I discovered from research into OCD was that the exposure and response prevention was often too much of a challenge.

# Two Protocols

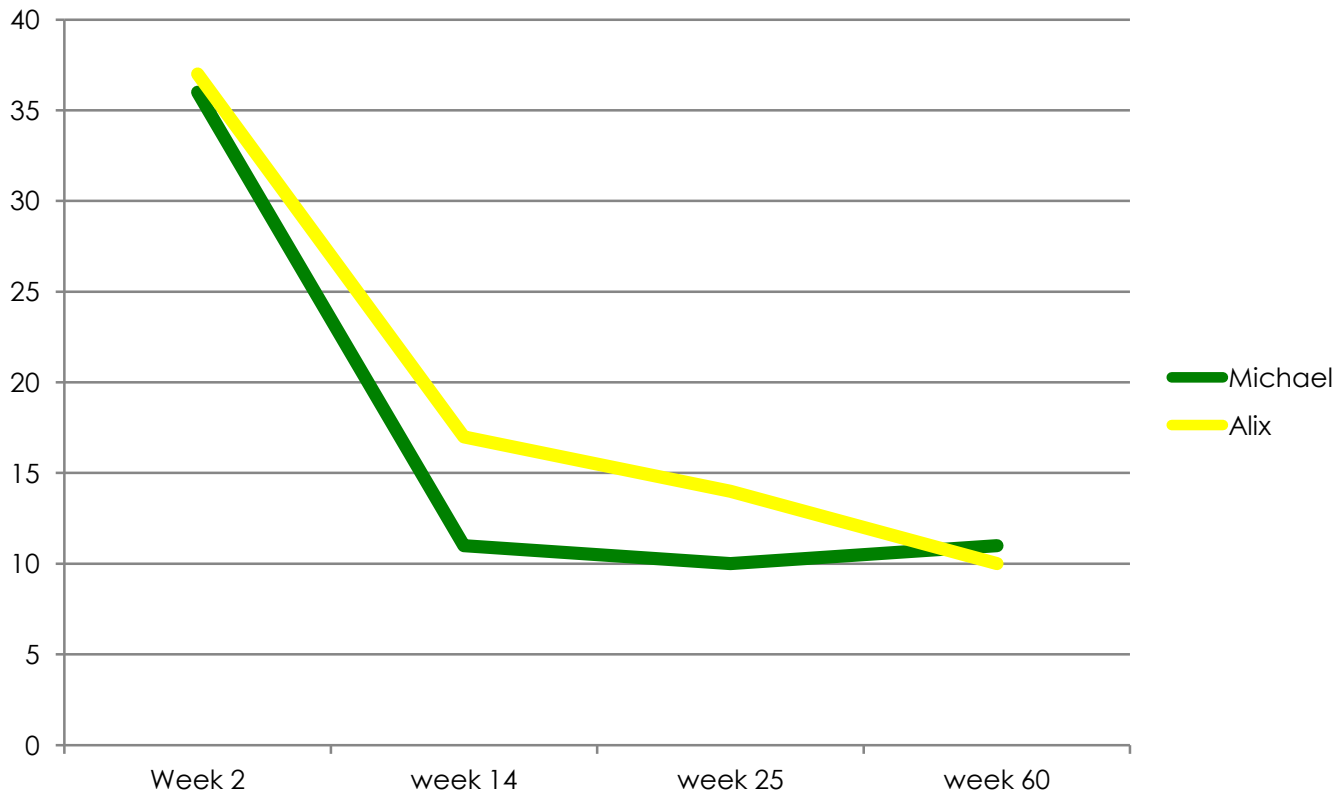


- I originally used two different protocols
- 1 based loosely around the phobia protocol
- 1 based around the phobia protocol with Video playback added.
- Both worked reasonably well



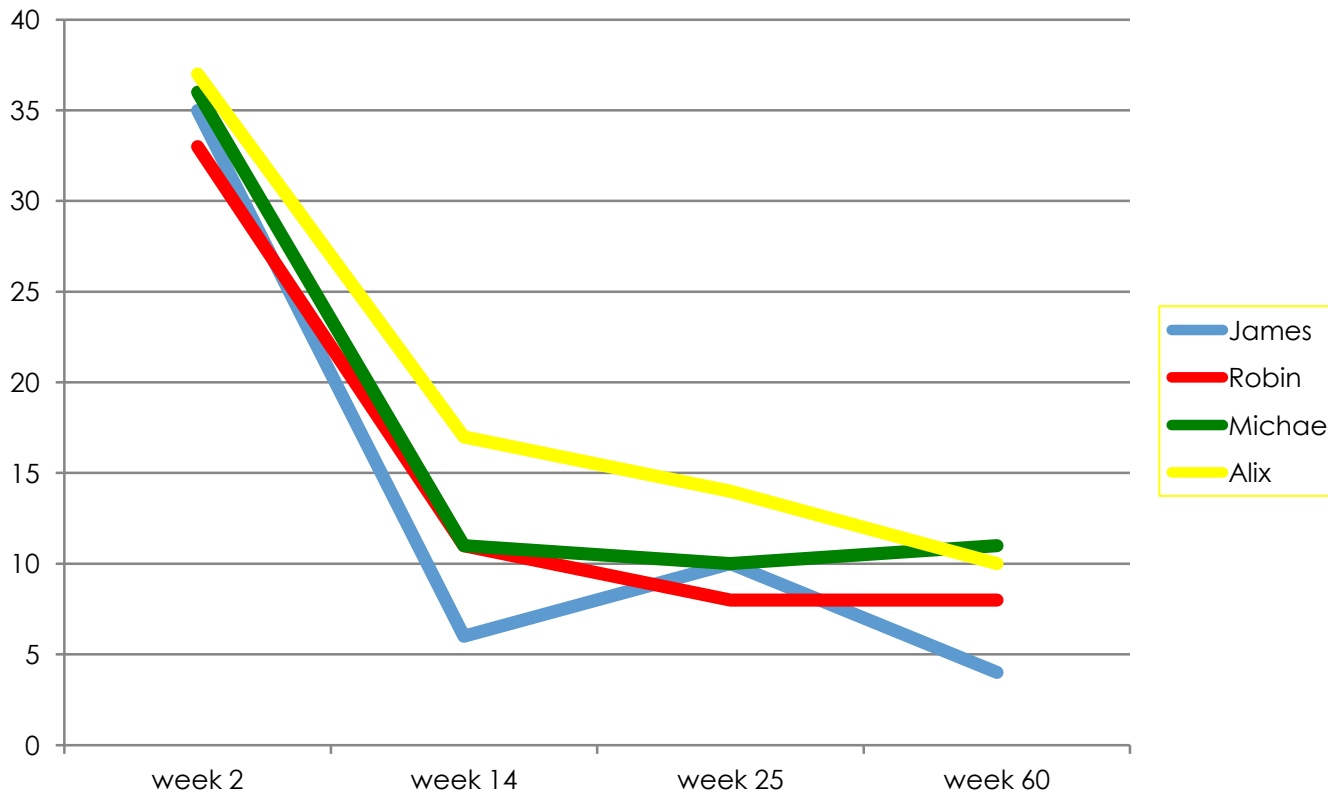
# Modified phobia protocol

time irrational dirty  
counting compulsive habits  
nervous washing behavior intrusive  
Obsessive distressed  
psychotic impulses germs  
safety paranoid hoarding  
suffer anxiety disorder  
OCD hands crazy



# Comparison

time irrational dirty  
counting compulsive habits  
nervous washing behavior intrusive  
Obsessive distressed  
psychotic impulses germs  
safety paranoid hoarding  
suffer anxiety disorder  
OCD hands crazy





# David Blore, Charles Burdett



- If it had not been for the EMDR community and people like David and Charles I would never have thought about publishing my findings.

# The Protocol



- In the following OCD Protocol, targets are desensitized in the following sequence, starting with the current triggers (OCD compulsions and obsessions); followed by past related disturbing memories (if any); and then by the future template (imagining successful future action). In the OCD Video Playback Protocol, each current target is fully processed using a modified standard EMDR procedures.

# Phase One: Client History.



- As with standard EMDR, a full client history is taken, providing the therapist with insight into the client's issues. Identification of triggers is on going.

# Phase Two: Preparation.



- The client is prepared as in the standard EMDR protocol with a calm place, and with the addition of an imaginable nurturing figure, strength figure, or a protection figure if needed.
- The stop signal is taught
- A dry run of the therapy is conducted,

# Phase Three: Video playback procedure on identified triggers.



- The following procedure is used separately for each trigger (i.e., each OCD event).
- “Play the mental videotape of the circumstances of this OCD event. When you begin to experience anxiety similar to the anxiety that you experienced during the actual event, let me know. ”
- The modified EMDR protocol for phase 3 is then applied

# Process



- client asked to identify the various components. These include: a representative image, an emotion that accompanies the image, and the body location of the emotion. The SUD score can be taken to provide a reference. I tend to rely upon feedback from the client as to level of anxiety.

# Phases Four and Five.



- EMDR processing is conducted as per standard EMDR procedures; until there is little or no disturbance (SUD = 0 or 1). The body scan is not conducted until all triggers have been processed.
- **Repeat Phases 3, 4, and 5 for Each OCD Event or Trigger.**

# Touchstone



- During the processing of the trigger events a touchstone event often presents. Touchstone events should be acknowledged and saved for processing once all trigger events have been processed.



# Past Disturbing Memories

## Phases 3, 4, and 5



- After all OCD triggers (i.e., all compulsions and obsessions) have been fully processed, any related past disturbing incidents are assessed and processed as per phases 3, 4, and 5 of the standard EMDR protocol (Shapiro, 1995, 2001)

# Future Template



- After all OCD triggers and all past disturbing memories are fully processed, the future template is installed as per Shapiro's phobia protocol (Luber, 2009b, p. 173).

# Phase 6: 7: 8



## ■ Phase 6: Body Scan.

- Body scan is conducted as per standard EMDR protocol after completion of phase 5.

## ■ Phase 7: Session Closure.

- Each session is closed as per standard EMDR procedures.

## ■ Phase 8: Re-evaluation

- At the start of each session, re-evaluation of previous work is conducted as per standard EMDR procedures.

# ECO trial (EMDR vs CBT in OCD)



- Obsessive Compulsive Disorder (OCD) is the 4<sup>th</sup> most common mental health disorder.
- OCD is in the top 10 most handicapping illness as described by the World Health Organisation.
- OCD in terms of loss of income and decreased quality of life (Vale and Wilson 2005)

# OCD evidence



- Cognitive Behavioural Therapy (CBT) is the only well-established psychological treatment for OCD recommended by NICE Guidelines (NICE, 2005)
- CBT for OCD (in the UK) comes in two forms;
  - Exposure and Response Prevention Therapy (ERP<sub>UK</sub>) EX/RP. Most commonly used
  - Cognitive Restructuring Therapy (CT)
  - Both models have similar efficacy to medication.

# OCD evidence



- CBT is effective at reducing the intensity of OCD symptoms for about 50 to 60% of patient's who complete treatment, when full remission of OCD symptoms (e.g. recovery is used as an index of improvement the efficacy drops to 25% (Fisher & Wells 2005)
- Maher et al 2010 demonstrated within research that EX/RP is less than appropriate or effective for around 50% of those treated.

# R010\_ECO\_trial



- This RCT will be a two year study by NHS Leeds Primary Care Mental Health and IAPT Service.
- Zoe Marsden and Jaime Delgadillo are the main organisers
- This will be the first RCT into the treatment of OCD with EMDR compared to CBT in the world.

# Questions

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