


AACC Grief, Crisis and Trauma Counseling



Cutting Edge Research and Techniques for Treating Trauma and PTSD

Presenter:
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AACC **Old and New**

New research is shedding light on what we have known for a long time.

Interventions I will discuss are largely lifestyle and relationship interventions that have been applied in the past, but new research is shedding light on why they are effective.

AACC **Session Overview**

- The limits of traditional therapy
- Recent clinical models for trauma therapy
- Lifestyle interventions
- Oxytocin

AACC **Cognitive Behavioral Therapy**

- Traditional talk therapy still most recommended and effective
- Traditional forms of therapy involve one hour with therapist per week
- Sometimes we add support group or group therapy but therapeutic intervention usually 1-3 hours per week

AACC **Limits of Traditional Therapy Model**

- If there are 168 hours in each week
- If 1-3 hours are spent in therapeutic environment
- What is going on other 165-167 hours?
- Is the rest of a clients life supporting health and healing?
- What else can we recommend to shift the balance toward healing?

AACC **Non-Traditional Clinical Models for Treating Trauma**

- Lots of controversy surrounding these techniques
- EMDR – Eye Movement Desensitization and Reprocessing – developed by psychologist Dr. Francine Shapiro
- TFT – Thought Field Therapy – developed by psychologist Roger Callahan
- NET – Neuro-Emotional Technique – developed by chiropractor Scott Walker
- Other similar models/techniques



Do they work and how?

- Most clinically researched with randomized controlled trials and other studies is EMDR.
- Others have had a few studies but not as many and results are not conclusive
- Studies have show EMDR to be effective treatment



Mechanisms of Action

- Uncertain
- The theory: Statement from EMDR Institute, Inc.
- Some theorize that the effectiveness comes from exposure just like traditional exposure therapy.



Endorsements for EMDR

- American Psychiatric Association (2004) found EMDR to be an effective treatment for trauma. (practice guideline for treatment of patients acute stress disorder and PTSD)
- Department of Veterans Affairs and Department of Defense placed EMDR in Category A as “strongly recommended” for treatment of trauma (practice guideline for management of Post Traumatic Stress)



Should I Use Non-Traditional Therapy

- If you choose to use or refer clients:
 1. Choose the most researched and supported - EMDR
 2. Get certified or refer to a certified practitioner
 3. Use in conjunction with traditional therapy and other interventions



Lifestyle Interventions

1. Sleep
2. Nutrition
3. Drug/Medication/Supplement Use
4. Physical fitness/activity



Warning!

Do not practice a profession you are not trained to practice



Importance of Assessment

- Social History should include:
 - Information about sleep and sleep patterns
 - Medical history – including illnesses (past and present), medication use, all practitioners currently providing tx
 - Lifestyle assessment – Diet, exercise, sexual, financial, stress levels
 - Support systems – Family of Origin, Marriage, Church/Spiritual, Work, Friendship, Pets, Hobbies



Sleep

- Getting enough and good quality sleep is critical to the brain healing from trauma.
- Study by psychologist and neurologist, Matthew Walker and team at University of California Berkley looked at effects of sleep on PTSD.
- It has long been believed that the REM (rapid eye movement) stage of sleep helps us process and cope with troubling emotions.



Berkley Study (2011)

- Study showed that REM sleep plays key role in helping us cope with trauma and troubling emotions.
- During REM sleep – stress hormones are suppressed in the amygdala – allowing processing of traumatic memory.
- Study had two groups exposed to traumatic stimuli in two sessions with brains being scanned.
- In first session – both groups amygdala lit up



Berkley Study (2011)

- Second session – 12 hours later – one group had sleep and other group had no sleep.
- The group who slept had mild reactions to traumatic stimuli.
- The group who had no sleep had even stronger reaction to the traumatic stimuli than in the first session.
- Conclusion – Getting enough REM sleep is critical to processing of traumatic memory which decreases the brains reactivity to triggers.



Berkley Study (2011)

- Quote from Berkley Researcher:
 "Mother nature has programmed us with some elegant biology that naturally does its thing every time we allow our heads to hit the pillow for a sufficient amount of sleep," Walker said.

 "But we are in a society now that is desperately shortchanging our brains emotional regulation potential because we don't allow ourselves sufficient sleep.

 "The average now seems to be below seven hours for the U.S. That's frightening."



Diet/Nutrition

- No conclusive results show a specific nutrition plan will treat PTSD.
- However, healing and recovery can be slowed and symptoms exacerbated by poor nutrition and supported by good nutrition.
- Have clients consult their physician and work with a nutritionist.

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Drugs and Foods That Impede Healing from Trauma

Most significant:

1. Large doses of caffeine
2. Large quantities of sugar
3. Highly processed foods with lots of chemical additives
4. Alcohol

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Concerns to Address with Physician

- Use of Nicotine
- Use of Caffeine
- Long term use of narcotics

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Exercise

- Physical exercise ***with doctor's permission

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Trauma and the Brain

- During a traumatic event - the brain releases cortisol (stress hormone)
- This is a natural "alarm" system that triggers the "fight or flight" response.
- Syndrome called Post Traumatic Stress
- Normal response to traumatic event
- Should diminish in days or weeks
- If symptoms persist more than 30 days - can diagnose PTSD

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Oxytocin

- Oxytocin is a hormone in mammals produced in the hypothalamus and released from the posterior lobe of the pituitary gland that primarily acts as a neuromodulator in the brain.
- Oxytocin is best know for the role it plays in reproduction during and after childbirth.
- Called the "bonding" hormone, the "cuddle" hormone or the "trust" hormone.

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Oxytocin

- Oxytocin is also released when we have contact individuals with whom we share close, intimate bonds - especially when we touch, hug or kiss them.
- Oxytocin is released during sex - particularly in long-term, monogamous relationships. In long-term relationships - just seeing the partner can increase levels of oxytocin.
- Many of the studies done on prairie voles




My Interest in Oxytocin

Book: Made for Each Other




Oxytocin

- Has calming effect over the fight/flight defensive network
- If the amygdala excites the sympathetic nerves, they will cause the arousal centers of the brain to release noradrenalin, which gets our hearts pumping blood to our muscles and makes us feel anxious.
- Oxytocin can block this effect by dramatically increasing the number of noradrenalin's inhibitory receptors that act as off switches. In this way, oxytocin not only prevents a rise in heart rate and blood pressure but actually causes both to be lowered, producing a sense of well-being.




Oxytocin

- Psychological effects of oxytocin
 - Evokes feelings of contentment
 - Reduces anxiety
 - Increases feelings of calmness and security
 - Increases trust
 - Reduces fear




Oxytocin

- A number of studies in the last 2 – 3 years suggesting that oxytocin might be beneficial in the treatment of PTSD.
- One published article titled “The rationale for the use of oxytocin in the treatment of Post-traumatic stress disorder” from the University of Amsterdam in the Netherlands



Oxytocin

- **Abstract**
- Although cognitive-behavioral therapy (CBT) is an effective treatment for posttraumatic stress disorder (PTSD), many patients fail to attain remission with CBT. The authors propose augmentation of CBT with oxytocin in the treatment of PTSD. Oxytocin has a combination of pharmacologic effects that result in a "sense of safety" for the patient, which is a prerequisite to successful treatment of PTSD. We suggest a dual explanatory mechanism as to why oxytocin may be effective: through a reduction of fear response (decreasing amygdala activation, inhibiting fear response, and enhancing extinction learning) and through an increase of social interaction (activating social reward-related brain regions increasing engagement in the therapeutic alliance). Given that PTSD is marked by deficits in anxiety/stress regulation and in social functioning, and that oxytocin is implicated in both of these areas, oxytocin seems a likely candidate for treatment of patients with PTSD. Further clinical studies of the therapeutic value of oxytocin are indicated.



Access to Oxytocin

- Safe and intimate relationships
- Relationships that involve safe touch



Oxytocin and Pets

- 2003 study by two South African researchers (Johannes Odelindall and R.A. Meintjes) showed that when eighteen men and women interacted with their dogs (talking to them and gently petting them) the owners blood levels of oxytocin almost doubled.
- The owners had a significant decrease in blood pressure and a significant drop in their levels of stress hormones.



History of Animal-Assisted Therapy

- Long history of animals utilized for physical and emotional support.
- 1792 – animals were used therapeutically at York Retreat for mentally ill in England. It used gardening and caring for animals as part of the therapy program.
- Florence Nightingale is credited as a pioneer of animal therapy. In her “Notes on Nursing” she recommends a “small pet animal” as an “excellent companion for the sick.



History of Animal Assisted Therapy

- In 1960s, Dr. Boris Levinson, an American child psychiatrist, discovered by accident that communication with a non-verbal child was significantly improved when his dog was present in the session.
- Animals have been utilized therapeutically in a variety of ways in the last few decades.
- Only in last 4-5 years, pet therapy for trauma and PTSD is increasing and studies are being done.



Saved

- Series on Animal Planet about how animals “save” people.
- This story caught my attention.
- About a family who lived in New York city in an apartment in lower Manhattan in 2001.
- Father a psychologist. Little girl named Kate (2) was home with nanny on September 11, 2001.



Kate and Scout



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Dogs and Veterans with PTSD

- Pets for Vets – One of largest organizations providing trained therapy dogs to veterans with branches across the country.
- Numerous local and state non-profit organizations providing service animals to veterans.
- Many are specifically for vets with PTSD to assist in therapy and readjustment.

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Story



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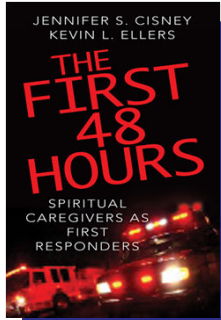
Instructors

- Jennifer Cisney Ellers – jscisney@gmail.com
- Website – www.institute4compassionatecare.com

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Teaching Resource

- The First 48 Hours: Spiritual Caregivers as First Responders
- Abingdon Press
- Target audience: frontline emotional and spiritual care providers



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A Ministry of Presence?



**Weep with those who weep...
Rom 12:15**