EMDR in Liaison Psychiatry: **Treatment of Psychological** Trauma in Persons with **Functional Symptoms**





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Introduction:

Medically unexplained persistent disturbances in bodily functioning, described as 'functional symptoms' can be varied in how they present. Evidence highlighting relationships between psychological trauma and the development of functional presentations later in life emphasise the need for a psychiatric component to the treatment. Previously 'Eye Movement Desensitisation and Reprogramming (EMDR) therapy' has been shown to be effective in the treatment of psychological trauma and related functional symptoms. Many persons with functional symptoms may attend hospital services frequently with little improvement in condition. There is little evidence of EMDR therapy being used for trauma in a general hospital setting.

What we planned:

Sunderland Psychiatric Liaison Team (SPLT) delivers a range of assessment and specialist intervention mental health pathways for persons requiring general medical care at Sunderland Royal Hospital. Recognising a need for treatment of functional symptoms with EMDR SPLT opened slots within its nurse consultant outpatient clinic.

How we did it:

All adults (over 18 years of age) with medically unexplained functional symptoms relating to historic trauma were eligible for referral to a nurse consultant outpatient clinic. Referrals came directly from the hospital to the SPLT. Treatment consisted of EMDR therapy. Therapy took place either in a psychiatric outpatient clinic or in the persons own home. Data was collected via a medical recording system and log sheets. The Impact of Events Scale (IES) was used as a measure of the subjective impact of trauma on a person's life.

What we found (the science bit): Females, 9 Males, 3 Reduced scores on the Impact of Events Scale was observed for all patients. A Wilcoxon Signed-Rank test indicated that the Impact of Events Impact of Events Scale Post-EMDR Scale Pre-EMDR median score on the IES post-test (Mdn=3.5) was Median = 3.5 • Median = 57 significantly lower than the pre-test score, (Mdn=57), W(7)=0, p≤0.01. "You changed my life, Age Mean = 37 I am not scared anymore" 20 Mean = 11

What this means:

Integrating EMDR into psychiatric liaison therapy might be clinically beneficial, reducing subjective stress relating to a specific traumatic event and its impact on somebody's life. The evaluation did not measure physical symptomology but we feel these results demonstrate the need for clinical trials. We would hope these clinical trials explore the impact on mental health, physical symptoms and the wider services.

Why we are proud of this work:

Service Users are often frustrated when their symptoms cannot be explained and healthcare staff can feel at a loss. By exploring new ways of working together across disciplines we can hopefully improve lives and provide hope for a better quality of life.



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