

Psychological trauma in patients with substance use disorder. Can EMDR therapy help in this population?

Abstract

The study of psychological trauma has become increasingly important in the field of mental health research due to the strong negative impact on the course and prognosis of psychiatric pathologies, including substances use disorders (SUD). In addition, SUD can also lead to a large psychological burden on substance users and their environment. Finally, SUD are responsible for a large financial burden on society, such as those related to hospitalizations, law enforcement, and criminal activities.

Up to 45% of the patients with SUD experience comorbid posttraumatic stress disorder (PTSD). Of note, approximately 90% of SUD patients have experienced at least one traumatic event in their lives which influences negatively the course and prognosis of their disease. Although exists a strong direct link between both clinical conditions most SUD patients do not receive treatment for PTSD or negative life events. The results of two independent studies using EMDR have shown that treating psychological trauma in SUD patients improves symptoms related with craving, depression, anxiety and self-esteem. A limitation of both studies include its small sample sizes. For this reason, our research team is carrying out the first single blind, randomized and controlled trial comparing the efficacy of EMDR versus treatment as usual (TAU) in a large SUD sample with a history of traumatic events. Patients in the EMDR group, in addition to TAU are receiving 20 sessions of individual therapy of 60 minutes each focused on treating traumatic events. All patients are being evaluated at 4 time points: pretreatment (T0), mid-treatment at 3 months (T1), posttreatment (T2) and follow-up evaluation at 12 months (T3). Evaluations are including psychopathological, neuropsychological, functional and biological variables.

The main objectives of this presentation are: 1) Giving an overview about SUD; 2) Explaining the negative consequences of not taking into account the traumatic events in SUD patients' treatment; 3) Describing literature and current studies that have evaluated the effectiveness of EMDR in patients with SUD; 4) Debating future perspectives about psychological treatment with EMDR in SUD.