Four Points to Consider Before You Buy EMDR Products: A Reply to Shapiro et al.

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Shapiro, Rouanzion, Hoffman, and de Jongh (1998) allege that we published misinformation on EMDR (Rosen et al., 1998). Here are four points to consider before you accept their arguments and buy the EMDR products they recommend.

THE IRRELEVANCE OF EYE MOVEMENTS
The defining feature of EMDR is the induction of eye movements or other bilateral stimulation; that is what distinguishes it from other imaginal exposure techniques. As documented by Lohr, Tolin, and Lilienfeld (1998), there is no convincing or even suggestive evidence that bilateral stimulation adds one iota to the effects achieved by the exposure elements of EMDR. Indeed, the very meta-analysis cited by Shapiro et al. demonstrated that EMDR was no more effective than other exposure-based methods (Van Etten & Taylor, in press).

RELATIVE EFFICACY
Shapiro et al. claim that EMDR works faster than other exposure methods, but this claim rests on comparisons across studies. Scientists know that only between-group comparisons within the same study can address the issue of relative efficacy or efficiency. When Devilly and Spence (in press) and Muris et al. (1998) conducted such trials, EMDR was less effective than other cognitive-behavioral therapies.

IGNORING THE TENETS OF SCIENCE
Shapiro et al. insist that claims made on behalf of EMDR be accepted until proven wrong, thus reversing the very logic of science. Shapiro et al. take this position when they dismiss multiple studies demonstrating that eye movements add nothing to treatment outcome, and argue that
psychologists must still accept the role of eye movements. Shapiro et al. adopt a similar position when negative findings on EMDR are dismissed with the argument that: “Training researchers to a point of fidelity acceptable to the originator of the method being tested is a mandatory part of useful research.” Unfortunately, Shapiro fails to acknowledge that, as the originator of EMDR, she keeps changing what is “acceptable”? Shapiro now proclaims that Level II training is required to learn EMDR, while once upon a time, Level II training was sufficient, and before then, simple written descriptions sufficed. This ever changing definition of “fidelity acceptable to the originator” ties in with the notion that EMDR is a deeply complex method. All of this results in linguistic legerdemain whereby findings negative to EMDR are always the fault of the therapist rather than a reflection of the method.

PERSONAL EXPERIENCE vs SCIENCE
Shapiro et al.’s final contention that, “Academic debate often obscures clinical issues...there is no substitute for first hand experience,” is deeply disturbing. Personal experience may form the basis for miraculous claims, but it has no bearing on the proper testing of hypotheses. Instead, careful analysis of well controlled research is the cornerstone of scientific progress. The preference expressed by Shapiro et al. for informal clinical impressions over empirical findings suggests a desperate attempt to disregard data not to their liking.

CONCLUSION: SAVE YOUR MONEY
What should the practicing psychologist do about EMDR? Shapiro et al. recommend a number of products, such as two books by Shapiro ($14.00; $45.00), audio tapes from CPA ($24.00), and a video tape from APA ($69.95). We suggest saving your money and reading (for free) relevant studies and reviews. These articles demonstrate no basis for seeking specialized training on how to wave fingers before a client's eyes. Unless convincing data is forthcoming, it may be time to consign EMDR to the dustbin of history.

REFERENCES


