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Pilot Study

Introduction

Integral Eye Movement Therapy (IEMT) is a psychotherapy model that has gained attention for its effectiveness in reducing intense negative emotional states. The therapy involves the patient recalling and maintaining a negative image of a past event, while the therapist directs eye movements in specific patterns. The aim is to induce a shift in emotional coding of the image, resulting in a reduction of negative emotions associated with it.

The roots of IEMT can be traced back to eye-movement integration therapy (EMI) and eye-movement desensitization and reprocessing therapy (EMDR), developed by Steve Andreas, Connirae Andreas, and Francine Shapiro, respectively. Andrew T. Austin, a therapist from the United Kingdom, developed IEMT, building on the psycho-neurological phenomena observed during therapeutic eye movements.

IEMT has shown promise in reducing the emotional impact of neurological imprints related to emotion and identity. This pilot study aims to explore the effectiveness of IEMT in reducing negative emotional states associated with traumatic memories. By investigating the effects of IEMT on a small sample of participants, this study seeks to contribute to the growing body of research on the therapeutic potential of IEMT.

Purpose of the study

The purpose of this pilot study is to investigate the effects of IEMT on traumatic memories. IEMT proposes that combining eye movements with the visualization of a traumatic memory will induce specific changes in its representation. These changes include distancing the memory, dissociating from the representation, age progression, reduced focus, and decreased emotional intensity. IEMT suggests that these changes provide a therapeutic advantage by depotentiating the emotional charge associated with the memory.

The current study seeks to evaluate the changes, if any, that occur in the representation of the memory when using IEMT and how the effect of time influences the outcome. Specifically, the study aims to investigate the persistence and magnitude of the changes induced by IEMT over a 20-minute period.

This pilot study will provide preliminary evidence on the potential therapeutic benefits of IEMT and will inform the design of future randomized controlled trials. The findings of this study may have important implications for the treatment of trauma-related disorders.

Structure of the study

The study was conducted with a sample cohort of 12 participants. Interviews were conducted remotely via Zoom or Skype to assess the effects of IEMT on negative memories. Participants were instructed to identify a negative memory and provide a one- or two-word label for later identification. No disclosure of information about the memory was required, but participants were asked about the submodalities of the memory.

After the initial assessment, participants received instructions on how to move their eyes. Immediately following the eye movements, the memory was reassessed using the same questions as before. The assessment was repeated 20 minutes and 5 days later to determine the persistence and magnitude of the changes induced by IEMT.

The study design included a pre- and post-treatment assessment, with a follow-up assessment after 20 minutes and 5 days. The interviews were conducted remotely to ensure consistency and reduce the potential for bias. The use of standardized questions and protocols ensured that the study was conducted in a systematic and controlled manner. These measures helped to ensure the validity and reliability of the study findings.

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