

Eye Movement Integration (EMI)

Informed Consent

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Many many people have experienced amazing treatment results through using EMI to treat numerous issues, such as trauma, anxiety, chronic anger, grief, nightmares, or even physiological symptoms like Chronic Fatigue, or Fibromyalgia. The following is a list of things you should know when preparing for EMI:

1. **RESOURCES:** How do you tend to cope when feeling distressed? At times, between EMI treatments, more issues are brought up by the brain for you to address in future treatments. We often refer to this as “The Gift” as the brain is guiding you to deal with what needs to be integrated. This is helpful, but can also be quite distressing, as what is being brought up often is not pleasant, and we need to wait for two weeks between treatments. At times what comes up is quite distressing at first, and gradually settles over about 10 days. During the 10 days, you need to find ways of coping. This is why we ask the question: How do you tend to cope when feeling distressed? What can you plan to do in order to get through this treatment without using unhealthy coping tools? What new tools may you need to practice using ahead of time? If these coping tools are not enough, you may wish to contact your EMI practitioner between EMI sessions if you need assistance in coping with what is coming up.
2. During EMI, old memories will come up, and you will likely feel as though you are right in the experience of what happened, even though you technically are in the therapist’s office. Traumatic memories come up from regions of the brain, where there is no sense of time, which is why you can feel as though you are back re-experiencing what originally happened. However, through the process of EMI this is integrated with other regions of the brain, which do have a sense of time. Through EMI the traumatic memories will gradually move to feel as though they are more distant, less in your face, and almost like dim memories. Once this integration has occurred, the “re-experiencing” of the memory can no longer occur. You will be free from this.
3. How did you cope when you were going through the event(s) of what EMI is addressing? During EMI, you will likely feel pulled to think, feel, and do what you thought, felt, and did back then. If this was to run or flee or try to make it stop, then you will likely feel, think, and want to do that while doing EMI. It is important to understand this, as you may stop the treatment of EMI, thinking and feeling that you need to stop and flee. If this happens, you may feel stuck in the place you were when you stopped the EMI, and it may take a while to come out of it. However, if you can understand that these thoughts, feelings, and impulses to act are memories coming up about the event(s), and you stick

with the EMI, you will find that these feelings will come and go with differing amounts of intensity, and gradually you will feel a sense of completion.

4. Some eye movements will bring up more intensity than others. You will find that within a couple of eye movements you will notice changes in what you are experiencing. As long as you continue with the eye movements, you will not get stuck in the unpleasantness of what comes up. Keep going, and you will notice you will shift.
5. Through this treatment the therapist can discover areas in the eye movements which feel better, and others that feel worse. Although the most distressing areas are those highlighting where we need to help the brain, it is also possible to move to areas with less intensity to allow for some reprieve. The therapist at times will “wipe the window” where he/she will have you follow the movement of their hand through the entire region your eyes have movement to, and will ask for your feedback on what you feel in the different areas. This helps identify areas which have been integrated and feel better, as well as those areas remaining to treat and resolve.
6. As EMI is a neurotherapy designed to bring healing in the brain, it is important to target areas where there is most distress. In fact, it is best to start with the most distressing memory in order to bring the most healing. We find that if we start with less distressing memories, your treatment takes longer and after you leave the office, your brain will bring up the more intense memory to deal with. Although this is helpful for the brain to do, as it is revealing what needs attention, it is best to address this first. When the primary root trauma is addressed first, other memories often resolve naturally, as they have links to this primary area. When the primary area is resolved/integrated, everything connected to it begins to naturally integrate/resolve.
7. The brain will continue the integration process for about 10 to 12 days after the treatment. In order not to overwhelm you, we need to wait two weeks between EMI treatments.
8. Before doing EMI it is important that you are stable on your psychotropic medications, if you are taking any. If you use drugs or alcohol, it is best if you do not use them at least 24 hours before EMI, and for two weeks afterwards.
9. If you experienced a trauma within the last two hours, you can receive immediate EMI treatment for this. However, if it has passed this 2 hour window, you need to wait six to eight weeks before receiving treatment. Children, who have not yet reached puberty (younger than 8-9-10 years old) may receive EMI treatment 2-4 weeks post trauma.
10. If you have experienced a concussion recently EMI should not be administered if there is a vision problem, fatigue, or difficulty concentrating. It can take 3-5 months post concussion before EMI may be administered. If executive functioning or the reptilian brain have been severely impaired, EMI will not be helpful.