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## **Researching the Effectivity of Emotional Freedom Technique On Combat Post Traumatic Stress Disorder/Trauma**

Tom Porpiglia, MS, LMHC for Salem-News.com

### **One realistic approach for those who suffer from PTSD.**

(ROCHESTER, N.Y.) - For the last 3 years, I have been involved in some of the most important research to date on reducing the effects Combat Trauma/PTSD with Emotional Freedom Technique, or EFT. Up until the inception of EMDR and then EFT, trauma treatment of any type was at best futile.

Medication and Cognitive Behavioral Therapy (CBT) may be helpful; however, research has demonstrated that less than half the clients treated with CBT benefit from the process, and medications are not helpful at all.

There are recent reports of veterans dying in their sleep because of drug cocktails that contain Klonopin, Paxil, and Seroquel. Vietnam Veterans are still suffering the effects of PTSD because of the insufficiency of treatment methods currently used. Most of them are still scoring well over the VA threshold for PTSD on the PCL-M, Post Traumatic Stress Disorder Check List, (Military).

Currently, the VA seems invested in expensive technology, such as computer aided virtual reality programs that re-expose the veteran to similar traumatic scenes. The problem with this type of technology is that the likelihood of re-traumatizing the veteran is very high. Additionally, Dr. Roger Callahan developed the grandfather of EFT, Thought Field Therapy, because he was frustrated with using exposure therapy for phobias. It was clear to him that exposure therapy was slow and ineffective. One of the veterans I treated had been through the virtual reality program and did not receive any benefit from it. The VA has recently released an application for Smart Phones, aptly named The PTSD Coach, in an effort to allow a traumatized veteran instant access to coping skills. EFT is more than a coping technique. It actually releases the energy imprint of the trauma.

EMDR has its challenges too. No one that dissociates should use EMDR. The clinician has to be highly skilled to avoid abreactions or leaving the client in a dissociated condition. Additionally, EMDR cannot be self-applied. A clinician must administer EMDR. I am not saying EMDR is bad, just that it has limitations. Moreover, as best as I can tell, most VA centers are not using it even though it is DOD approved. There is recently published research from the UK that compared EFT to EMDR and found it equally effective.

Many EFT practitioners have attempted to introduce EFT to the VA. Many of us have been shunned, brushed off and some escorted off the premises because the VA does not want to acknowledge that something as simple as EFT can be so effective. I personally have handed VA counselors' research data to show their supervisors, only to hear back from them that the supervisors still maintained that either there is not any research, or it is insufficient. I get the impression that the VA is more concerned with research than with saving lives or improving the quality of life of combat veterans. EFT cannot do any harm and does not have adverse side effects or abreactions.

One practitioner I personally know received a threat of losing her job for using EFT to help veterans, and there may be a case of someone actually terminated from their job at the VA for using EFT at California VA facility. Ironically, there are a handful of VA centers in the New England States that have been using EFT

for over 5 years now without any research. They have been willing to accept actual outcomes as evidence of EFT's effectivity. Additionally, Gary Craig, developer of EFT, went into a VA facility in 1994, at his own expense, video recorded the outcomes of six days of treating Vietnam Veterans with EFT, and the VA totally ignored the evidence informed outcomes.

Even our lead researcher, Dawson Church, PhD of the Soul Medicine Institute, along with his colleague David Feinstein, PhD, have appeared in front of the House Veterans Affairs Committee only to be given a small period of presentation time compared to other presenters with more expensive, more elaborate and less effective technology than EFT. That was almost a year ago and the VA has not moved forward one iota. Dawson even asked them what we needed to do to get their attention. The committee chairperson, Bob Filner (D-CA), responded, "Change the name of your institute." What type of bias is that?

So, what has the research revealed? Much! Most EFT practitioners knew that EFT was effective on trauma/PTSD, and we just did not know how good it was. How good is it? I will get to that in a moment. First, let me describe the structure of the research.

Any combat veteran who qualifies as a research subject by exceeding the VA threshold for severe clinical PTSD receives six free sessions. There are coaches all over the USA that have taken training and a test to qualify them to be involved with research. We have volunteered our time to help the veterans and to document and verify the outcomes. In addition to the PCL-M, veterans anonymously fill out a confidential health history, an Insomnia Severity Index assessment (ISI), and the SA-45 psychological symptom assessment.

Some of the veterans are randomly assigned to a 30-day wait list to provide a control group, and other veterans receive immediate treatment. After 3 sessions, the veteran is re-evaluated, using the above-mentioned tools. This same re-evaluation is also done after the 6th session, after 3 months, 6 months, 12 months, and 18 months to determine sustainability of the outcomes. Additionally, the veterans learn EFT, and receive an instruction sheet on EFT. We encourage them to use EFT in between sessions and after the sixth and last session. That is the beauty of EFT. Every veteran learns EFT and is encouraged to use it at anytime on anything!

Now, drum rolls please, the outcomes. We have seen an average of 63% reduction in PTSD symptoms in those 6 sessions. That's just 6 hours of treatment. Veterans report sleeping better which is supported by a drop in their ISI scores. Their SA-45 scores also drop, and many physical symptoms decrease or disappear all together. Veterans have stopped drinking and using illegal drugs (caution: clicking this link takes you to a realistic and intense video. It is not recommended that you watch it if you have PTSD and are not in some sort of treatment program) because they feel better and do not require self-medication to manage their emotional pain, flashbacks, and nightmares. Gary Craig's video also demonstrated this. Complete, peer reviewed and published outcomes are available for viewing at <http://www.stressproject.org/research.html>

We have deemed EFT 100% effective because every veteran treated with EFT receives benefit from using the process. CBT (Cognitive Behavioral Therapy) can only claim 40% effectivity. Additionally, researchers have recorded biological markers via blood test taken before and after sessions, again comparing the outcomes to CBT. Blood pressure, blood sugar, adrenalin, and cortisol levels drop. CBT drops cortisol 14%, compared to a 15% improvement from just resting. However, EFT produced a 25% drop in cortisol. All of these markers are significant indicators of the fight, flight, and freeze stress response.

Before this research, David Feinstein, PhD, published papers regarding the use of EFT in disaster relief efforts in Kosovo, South Africa, The Congo, and Rwanda, reporting similar results. NIBACM president Ruth Buczynski, PhD recently interviewed David about his experience of using EFT on Trauma and why this is such a powerful tool.

Some of the research has been video recorded in the two-hour documentary "Operation: Emotional Freedom." This video is intense and I do not recommend it for anyone not in treatment or that does not have some type of emotional support. I have done a lot of healing on my Vietnam experience, and this movie triggered me! Fortunately, I have EFT as a tool, and used it to reclaim my peace while I was watching the movie.

So, what is up with the VA, the DOD and Congress? Who knows? We certainly cannot get any answers, and just like after Vietnam, they are stalling, researching the issue while veterans, men and women alike are committing suicide at an alarming rate of 18 per day.

Are you angry? You should be. The men and women who defend this country and guarantee our freedom deserve better treatment than that, and EFT is available NOW. Congressman John McHugh (R-NY) commented in an Army Times interview in August of 2009 that we need to take action now, not 5 years from now. I personally contacted his office, and sent him research information that went nowhere. The same is true of the Secretary of the VA, Eric Shinseki. Ex-congressman Eric Massa's aide to veteran's affairs hand carried research for me to the Buffalo VISN director. We received a letter stating there was no research. I have been told the same thing by local VA counselors who call me and ask me to forward them information only to be shot down by their supervisors. Do they call me and ask me to come and do a presentation or demonstration? Not at all. I have other similar letters on file from other government officials stating similar information. I met the General who is in charge of the Warrior Salute program, who told me he wished he had an answer for PTSD. I gave him my card, sent him research and invited conversation. Nothing, nada, not even an acknowledgement of receiving the materials. We do not know what they are afraid of or concerned about; however, they already have egg on their face and have NOTHING to lose by using EFT. They could actually save face, save lives, save families, save money and improve their reputation if they would step out of their tightly guarded box.

What can you do? Contact your congress people and senators in DC, and tell them you want action NOW, not 5 years from now, and before you do that please visit our research web site, Iraq Stress Project. It is a bit of a misnomer as we are inclusive of all combat veterans, and we do this work in person, over the phone or via Skype with repeatable results. Let us stop repeating the outcome of Vietnam, NOW. Do you know a combat veteran that needs our help? Send him to our site, or have them contact Deb Tribbey.

PTSD Can be Managed! - Tom Porpiglia, MS, LMHC, for Salem-News.com

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Tom Porpiglia, MS, EFT-ADV., LMHC is the founder of Life Script Counseling Services, a Vietnam Veteran and a licensed mental health counselor in private practice in Rochester, NY. He specializes in the use of Emotional Freedom Technique and other Energy Psychology methods to resolve trauma. He offers a reduced rate for veterans.

His articles have been a welcome addition to Salem-News.com. We always

strives to educate our readers about the challenges facing increasing numbers of human beings living with Post Traumatic Stress Disorder. EFT from every account is effective and infinitely better for the sufferer than the standard prescription narcotics regularly prescribed by VA doctors.

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