

## Guided Imagery & PTS

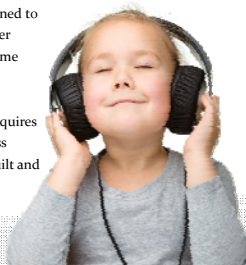
**Emerging from the Heart of Darkness:  
The Simple but Profound Power of Guided  
Imagery to Heal Posttraumatic Stress**

**Belleruth Naparstek, ACSW, BCD**  
Healing Beyond Borders Annual Conference  
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### What is Guided Imagery?

An immersive, hypnotic, self-administered audio intervention, made up of a guided narrative, scored to music, that's designed to promote relaxation, drive attention inward, and deliver the experience of a healing story with a desired outcome of healing, insight, renewal or positive change.

Considered "the lazy man's meditation," because it requires so little training or effort from listeners, it nonetheless can reduce stress, regulate mood, ease debilitating guilt and regret.



### Whom Is It Especially Good For?

- Patients facing anxiety-inducing medical procedures, such as surgery, dialysis, chemo, radiation, MRI's, cardiac cath, biopsies, proctological or gynecological procedures, ventilator removal, needle sticks, etc
- Those with emotional challenges, i.e. anxiety, depression, PTS, panic attacks, phobias, acute or chronic stress, anger & impulse management, compulsive or addictive behaviors – supports other treatment methods, without undermining or competing with them
- Members seeking tools to support a healthier lifestyle, wanting help with losing weight, sleeping better, smoking cessation, stress reduction, chemical dependency, etc
- People in pain. Increases comfort. Reduces need for and use of opioids. Applies to headache, back ache, injuries, functional pain conditions

### Whom Is It Especially Good For? (cont.)


- Soothing and calming for most Alzheimer's, dementia patients
- Cardiac, hypertension and diabetes patients benefit from stress-reducing aspect
- Helps with breathing in asthma, COPD and hospice patients
- Motor imagery strongly enhances rehab and physical therapy results for stroke, TBI, Parkinson's symptoms
- Reduces pain, aids range of motion in osteoarthritis patients
- Increases feelings of efficacy, well-being, mastery in those seeking to be proactive in their own medical care

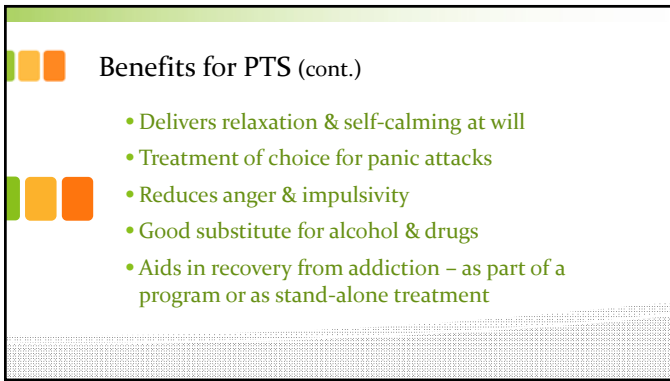
### Any Contraindications?

- Should not be imposed on anyone who is made more anxious or distressed by having to sit still, "relax" and listen to someone else's voice
- A minority of people with posttraumatic stress can become triggered or flooded with anxiety when introduced to guided imagery. For them, simple breath work, progressive relaxation, yoga or biofeedback may be a better approach
- Not recommended for severe mental illness, such as paranoid schizophrenia

### Benefits for PTS

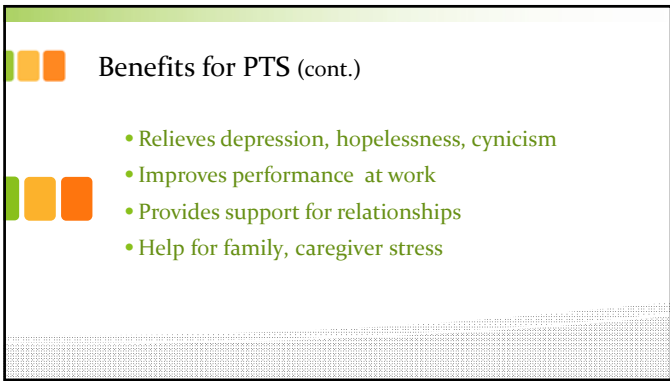
- Regulates mood and reduces anxiety
- Improves concentration & focus
- Produces deeper, sounder sleep
- Alleviates nightmares, other kinds of sleep disregulation
- Lowers pain





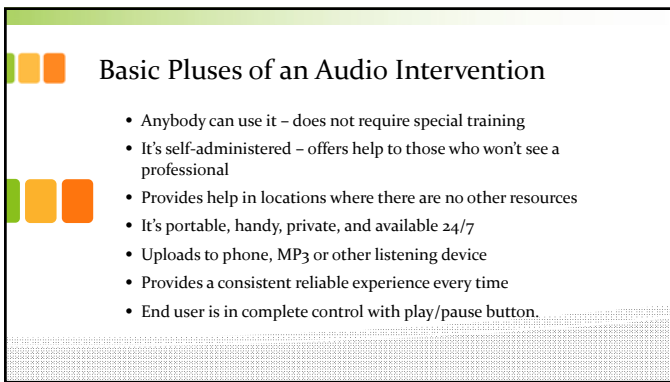
### Benefits for PTS (cont.)

- Delivers relaxation & self-calming at will
- Treatment of choice for panic attacks
- Reduces anger & impulsivity
- Good substitute for alcohol & drugs
- Aids in recovery from addiction – as part of a program or as stand-alone treatment



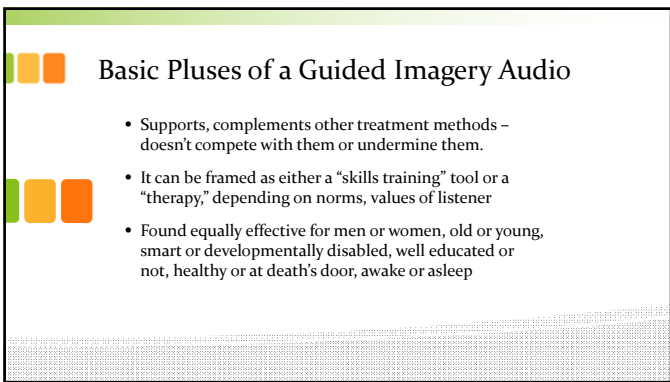
### Benefits for PTS (cont.)

- Relieves depression, hopelessness, cynicism
- Improves performance at work
- Provides support for relationships
- Help for family, caregiver stress



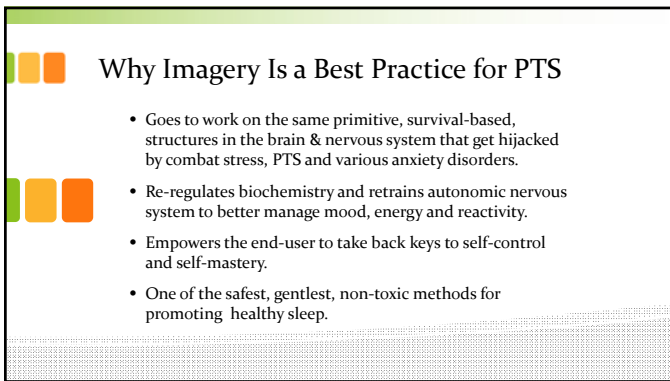
### Basic Pluses of an Audio Intervention

- Anybody can use it – does not require special training
- It's self-administered – offers help to those who won't see a professional
- Provides help in locations where there are no other resources
- It's portable, handy, private, and available 24/7
- Uploads to phone, MP3 or other listening device
- Provides a consistent reliable experience every time
- End user is in complete control with play/pause button.



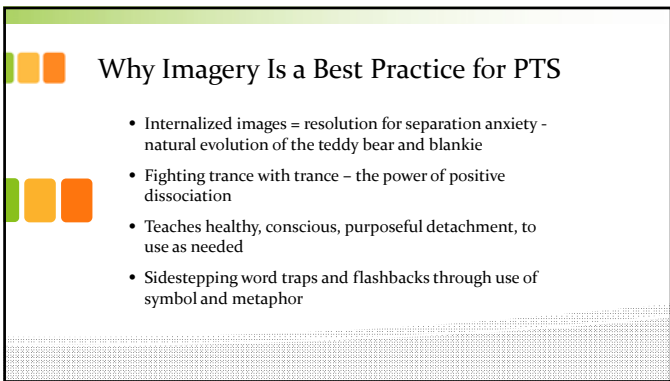
### Basic Pluses of a Guided Imagery Audio

- Supports, complements other treatment methods – doesn't compete with them or undermine them.
- It can be framed as either a "skills training" tool or a "therapy," depending on norms, values of listener
- Found equally effective for men or women, old or young, smart or developmentally disabled, well educated or not, healthy or at death's door, awake or asleep



### Why Imagery Is a Best Practice for PTS

- Goes to work on the same primitive, survival-based, structures in the brain & nervous system that get hijacked by combat stress, PTS and various anxiety disorders.
- Re-regulates biochemistry and retrains autonomic nervous system to better manage mood, energy and reactivity.
- Empowers the end-user to take back keys to self-control and self-mastery.
- One of the safest, gentlest, non-toxic methods for promoting healthy sleep.



### Why Imagery Is a Best Practice for PTS

- Internalized images = resolution for separation anxiety - natural evolution of the teddy bear and blankie
- Fighting trance with trance – the power of positive dissociation
- Teaches healthy, conscious, purposeful detachment, to use as needed
- Sidestepping word traps and flashbacks through use of symbol and metaphor

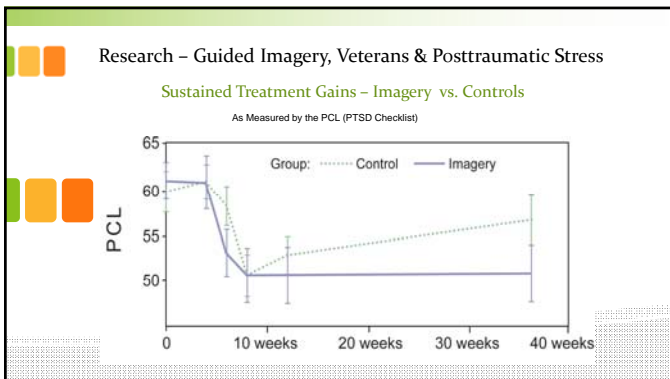
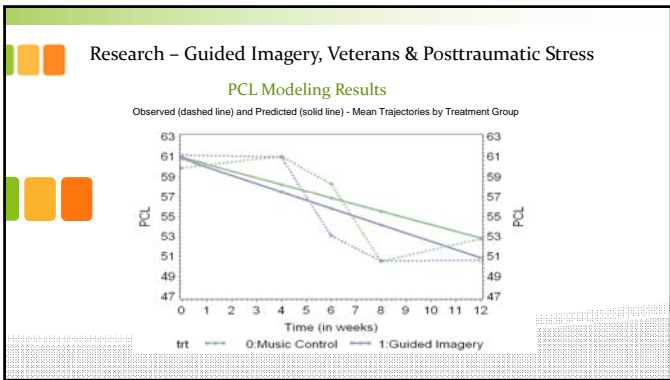
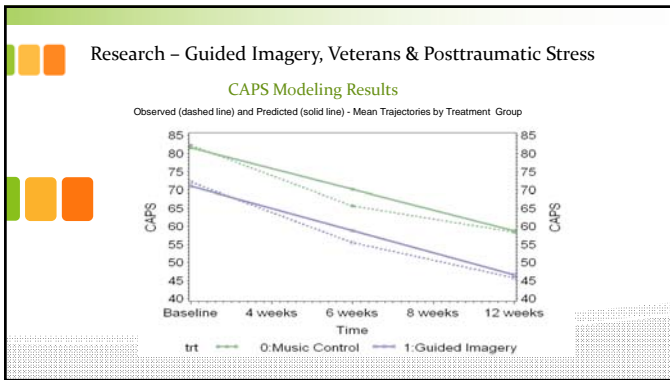
### Why Imagery Is a Best Practice for PTS

- Provides structured ways to reconnect with the body, get grounded and stabilized
- Heart-based imagery releases serotonin and other calming, uplifting neurohormones – further eases pain, anxiety, depression
- Can help fill the breach when recovering from addictive substances
- A back door to rediscovering and experiencing the nourishment of spiritual connection, even for the disillusioned.

### Research on Guided Imagery & PTS

**Jennifer L. Strauss, et. al. A Tele-Mental Health Approach to Enhancing Treatment Engagement and Symptom Self-Management for Women Veterans with PTSD Related to Military Sexual Trauma: RCT Results. VA Mental Health Conference, August 2010, Durham, North Carolina.**

An RCT with 52 veterans with longstanding, tx-resistant PTSD. Listened 30 min/day, 5 days/week, 12 weeks. Controls listened to music only. Interviewed & assessed pre-, mid- and post. Weekly phone check-ins by team. Measures used: PCL, CAPS and Beck Depression.



### Research – Guided Imagery & Posttraumatic Stress

**GIFT (Guided Imagery for Trauma) Significantly Reduced PTSD Symptoms:**

- CAPS\* GIFT mean change = -24.4; 95% CI = (-33.5, -15.3); p-value < .0001; Cohen's d = 1.43.
- PCL\*\* GIFT mean change = -10.0; 95% CI = (-15.7, -1.2); p-value = 0.0011; Cohen's d = 0.99.

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**Research – Guided Imagery & Posttraumatic Stress**

**New study, new name: SMART (Self-Management Audio for Recovery from Trauma) – a pilot for men with combat stress**

- 8 weeks versus 12 weeks
- Stronger focus on skills training/PTSD symptoms
- Five skills training audio tracks to choose from:
  1. Self-Regulation Through Conscious Breathing
  2. Word and Phrase Repetition
  3. Progressive Body Scanning
  4. Deep Relaxation Guided Imagery
  5. Restful Sleep Guided Imagery

**Research – Guided Imagery & Posttraumatic Stress**

**SMART (Self-Management Audio for Recovery from Trauma) Results**

- N = 20 male combat veterans (5 OEF/OIF)
- Demographically similar to prior sample
- Open pilot
- A large reduction in PTSD symptoms was observed
  - ❖ CAPS Cohen's d = 1.45
  - ❖ PCL Cohen's d = 0.82

**Research – Guided Imagery, Active Duty & Posttraumatic Stress**



**Jain S, McMahon G, Pasen P, Kozub M, Porter V, King R, Guarneri E. Healing Touch with Guided Imagery for PTSD in Returning Active Duty Military: A Randomized, Controlled Trial. Military Medicine, 177, 9: 1015, 2012.**


**Research – Guided Imagery, Active Duty & Posttraumatic Stress**

Active duty Marines between deployments at Camp Pendleton with symptoms of PTSD (n = 123) were randomized to either 6 one-hour sessions (within 3 weeks) of Healing Touch plus PTSD-specific guided imagery (taking home the CD to use at least once a day and more if desired); or treatment as usual (psychotherapy, meds, CBT, biofeedback and/or relaxation training).

Outcomes measured were PTSD symptoms, depression, quality of life, hostility, cynicism, using the PTSD Checklist-Military, Beck Depression Inventory, SF-36 and Cook-Medley Hostility Inventory.


**Research – Guided Imagery, Active Duty & Posttraumatic Stress**

- Statistically and clinically significant reduction in PTSD symptoms in the HT+GI experimental group as compared to the treatment as usual (TAU) group (p < 0.0005, Cohen's d = 0.85)
- Statistically and clinically significant reduction in depression in the HT+GI group as compared to the TAU group (p < 0.0005, Cohen's d = 0.85)
- Significant improvements in mental quality of life in the HT+GI group as compared to the TAU group (p < 0.002, Cohen's d = 0.58)
- Significant improvement in cynicism in the HT+GI group as compared to the TAU group (p < 0.001, Cohen's d = 0.49)



**Research – Guided Imagery, Active Duty & Posttraumatic Stress**

- Active duty, combat-exposed Marines receiving HT+GI for 3 weeks experienced a swift and clinically significant reduction in PTSD, depression and related symptoms.
- Effect sizes were comparable and sometimes superior to first-line pharmacological and psychological tx's.
- Attrition rates were extremely low (12.2%) as compared with other empirically supported tx's for PTSD (20.5%-54%).
- Intervention both reduced targeted symptomatology and achieved receptivity & engagement from service members and health providers.



**Thank you**

For Questions:  
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