

Cancer Diagnosis and E.M.D.R.

Q.

I am 50 years old and was diagnosed with an aggressive form of breast cancer five years ago. My doctor has given me a clean bill of health, but I can't shake my fear that it will return. I thought that with time I'd feel better, but I don't. Everyone tells me it is important to "be positive." Could E.M.D.R. help me to get on with my life?

ML Williams, North Dakota

Dr. Shapiro responds:

A. You are not alone in experiencing fear. In a study of 244 breast cancer survivors five to nine years post-diagnosis, published in the journal *Oncology Nursing Forum*, researchers found that fears of recurrence were frequent. The most commonly reported experiences that triggered fear included yearly follow-up appointments, doctors' appointments, hearing of another's cancer, physical symptoms or pain, news reports about breast cancer, and the anniversary of the diagnosis. The time that had elapsed since diagnosis was unrelated to the frequency of such triggers. Sadly, some people mistakenly believe that this overwhelming fear is the inevitable and "natural" outcome of cancer.

Receiving a life-threatening diagnosis can be classified as a trauma. Many people with a cancer diagnosis have entered E.M.D.R. therapy because of anxiety and fear that persists even after the medical treatment has been successfully completed. These long-lasting negative reactions can often be tracked back to the moment of diagnosis or something that happened during treatment that was particularly distressing.

The information processing system of the brain has stored the experience — with the emotions, physical sensations and beliefs that occurred at the time of the event. So, even though medical tests may now show no sign of the disease, the fear and anxiety encoded in that unprocessed memory remains. These feelings can increase dramatically around the time of yearly testing or by any event that reminds the person of the cancer experience. E.M.D.R. therapy is successfully used to process and alleviate these disturbing responses. The therapy allows people to get on with their lives without being haunted by fear.

Also relevant to many breast cancer survivors are unpleasant or painful physical sensations at the site of the surgery. Many times, these sensations can be caused by unprocessed memories. As I noted previously in "E.M.D.R. and Pain," above, research has been published on the successful E.M.D.R. treatment of phantom limb pain, and the principles guiding the therapy applications are the same in the cases of "phantom breast sensations" which persist after a mastectomy in up to 55 percent of cases (Dworkin, 2006). Although E.M.D.R. therapy cannot eliminate pain caused by actual nerve damage, it is successful in treating the uncomfortable sensations and chronic pain caused by stored unprocessed memories.

The important thing to remember is that no matter how long it has been since diagnosis and treatment, fears of recurrence need not be a permanent psychological scar of breast cancer.

Read more from Dr. Shapiro about EMDR at: http://consults.blogs.nytimes.com/2012/03/16/expert-answers-on-e-m-d-r/?_php=true&_type=blogs&_r=0

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