

Hundreds of mental health professionals to learn "The Rewind" pioneering PTSD treatment

Submitted by: International Association for Rewind Trauma Therapy (IARTT)

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On 10th March, 440 psychotherapists, psychologists and counsellors will gather at Birmingham University to attend a free, One Day Workshop delivered by Dr David Muss MD to learn The Rewind – a technique he originated that can help treat Post-Traumatic Stress Disorder (PTSD) patients effectively, quickly and cost-efficiently.

PTSD affects people from all walks of life – not just veterans from the Armed Forces – and is a psychiatric condition caused by life-threatening events. It is not clear why some people develop the condition and others do not. However, unresolved PTSD can result in domestic violence, imprisonment, drug abuse, alcoholism, unemployment, divorce and homelessness, with considerable social and financial implications¹.

Dr David Muss MD, who for the past 20 years has held the position of Director of the PTSD Unit at the BMI Edgbaston Hospital, Birmingham and is Founder of the International Association for Rewind Trauma Therapy (<http://www.iartt.com>), intends between now and the end of 2019 to train 5000 therapists dedicated to treating trauma in the UK to use The Rewind –

In the UK, the incidence of PTSD is around 4.4% – twice the incidence of those with diabetes. In Northern Ireland alone, the incidence is 24%. Taken as a whole, that's a staggering three million plus people who are said to be suffering from PTSD as a result of trauma.

Of those who currently do receive treatment (one and half million), 75% are treated with anti-depressants and 25% with Cognitive Behavioural Therapy (CBT)² or Eye Movement Desensitization and Reprocessing (EMDR)³ – the only two therapies recognised by NICE.

The reason Dr. Muss feels it is necessary to train at least another 5000 therapists is because there are only 5000 accredited CBT counsellors and some 600 EMDR trained therapists in the UK who are currently only reaching 25% of those who do get treatment.

If the current NICE recommended CBT and EMDR therapists were to adopt the Rewind they would easily double the number of patients requiring their help. That would still leave the other 1.5 million PTSD sufferers in the UK without access to therapy.'With the current financial crisis in the NHS,' he states, 'it would be unimaginable to think that the Government could afford to train 5000 new Cognitive Behaviour Therapists (CBTs), though they could be encouraged to train in delivering the Rewind by attending a one day free seminar.

The benefits of the Rewind are clear. It is a relatively fast (usually 2-3 sessions) and effective drug

free treatment applicable to individuals and groups of any size. Aside from this, compared with traditional treatments using drugs or talking therapies, training therapists in The Rewind is particularly cost-effective because it is possible to train groups of therapists quickly and, in turn, those trained therapists can deliver multiple session trauma treatment to groups of PTSD patients,' Dr Muss points out.

'Normally, the duration of trauma-focused psychological treatment should be between eight and 12 sessions at a cost of £850.00 (NICE 2005) when the PTSD results from a single event,' Dr Muss adds. 'However, with The Rewind, which is delivered in two to three sessions (includes one follow up), the cost is £140.00.'

Currently, The Rewind technique is the only treatment – available and demonstrated – that has achieved an 85% success rate after a single group session, held by Dr Muss in Rwanda, when he treated 21 post genocide survivors in a necessarily unrepeatable single session using The Rewind⁵.

If details of their traumatic event are not disclosed to the group and, with the likely outcome being closure, many PTSD patients find group participation an acceptable alternative to the long wait for individual treatment on the NHS – or, indeed, the prohibitive cost of private treatment.

Although The Rewind has been delivered very successfully privately to groups as well as one on one, it has not yet received NICE approval. Nevertheless, the fact that so many psychotherapists and counsellors are attending The Rewind Workshop, with more on a waiting list for the next to be held on 5th of May, demonstrates that there is a strong desire and need to find a therapy that delivers on human as well as financial benefits.

Formal research and supervised trials could demonstrate its comparative efficacy and establish The Rewind as a trauma focused treatment potentially able to transform NHS PTSD practice.

ENDS

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Developer of free Self-Help App: PTSD STOPS HERE!

Please see The Rewind: A Trauma Focused Treatment Potentially able to Transform NHS PTSD Practice for Reference Notes and Explanatory Data. The Rewind: A Trauma Focused Treatment Potentially able to Transform NHS PTSD Practice

Context

Post-traumatic stress disorder (PTSD) is a psychiatric condition caused by life-threatening events. It is

not clear why some develop the condition and others do not. The incidence of PTSD symptoms in the UK is around 4% (twice that of diabetes). In Northern Ireland incidence is 24%. Unresolved PTSD can result in domestic violence, imprisonment, drug abuse, alcoholism, unemployment, divorce and homelessness, with considerable social and financial implications¹

While some sufferers are not prepared to be treated, either singly or in a group, many are. Treatment is principally through psychotherapy and prescribing antidepressants. The NHS currently reaches perhaps 25% of sufferers, due partly to unwillingness to be treated but also because approved multiple session trauma treatment therapy one-on-one delivery is expensive and the time to closure is long. Current NICE-approved psychotherapy treatments are Cognitive Behavioural Therapy (CBT)² and Eye Movement Desensitization and Reprocessing (EMDR)³.

Furthermore, many PTSD patients would find group participation an acceptable alternative to individual treatment. Provided - as is the case with The Rewind⁴ - that details of their traumatic event are not disclosed to the group and the likely outcome is closure. NICE consequently does not currently recommend CBT or EMDR should be delivered to groups of sufferers. Although The Rewind has been delivered very successfully privately to groups as well as one on one, it has not yet received NICE approval. Research and supervised trials could formally demonstrate its comparative efficacy.

Discussion

Please see Page 2 which provides background, including numerous success stories from trained therapists⁵.

CBT and EMDR successful therapy outcomes are described as 'significant symptom improvement'. The Rewind instead addresses the trauma cause, aiming to get patients to 'file the traumatic event'. What this means in everyday practice is that involuntary recall of the traumatic event is brought under voluntary recall. All symptoms fade away.

Unlike CBT and EMDR, The Rewind usually needs just two treatment sessions. The first comprises psychoeducation, completion of a PTSD self-assessment questionnaire such as the Impact of Events Scale (IES) or the PTSD Checklist 5 (PCL 5), and a succession of two-minute duration treatments. The purpose of the second session is to confirm the outcome: usually closure. In those few cases where the outcome is not positive – i.e. the IES or PCL 5 score has not altered – a third session is undertaken. If still unsuccessful, Rewind is not attempted further.

As well as reducing treatment duration and eliminating symptoms, Rewind offers huge human and financial benefits:

Rewind drop-out during treatment is extremely rare, because subjects do not have to disclose the details of their trauma. CBT and EMDR have a subject drop-out rate of around 15%.

The £100-£200 one day Rewind training cost is far less than is required for CBT and EMDR counselling.

Rewind is effective from the age of four.

Compared with CBT and EMDR, The Rewind's hugely reduced trauma course duration, low drop-out and 2x comparative success rate gives it a significant cost-benefit single client advantage.

In addition, The Rewind's unique concurrent group capability advantage allows 10 or more patients to be treated together in just one or two sessions. Potentially, this offers the NHS substantial additional savings.

Therapist compassion fatigue burn-out is avoided because causal event details are not disclosed.

Conclusion

The Rewind is applicable to multiple life-threatening traumas, is ethical, enjoys a 90% - 95% success rate. It is thus an efficacious and cost-effective transformative alternative to current NHS NICE-approved practice. Group-conducted Rewind – where one counsellor leads multiple participants who do not share conditions – has, in addition, successfully treated 18 out of 21 patients in a single session⁵.

These considerations combine with interest in discovering why The Rewind works to make it a superb candidate for research, including randomised controlled individual and group study quality improvement projects aimed at achieving NHS adoption.

Potential outcomes include obtaining NICE approval, leading to a significant increase in the number of PTSD cases treated by the NHS, accompanied by much-improved therapeutic success and reduced overall State costs. Volunteer Counsellor availability and other charitable resources could perhaps limit Institution costs mainly to providing a research assistant to observe treatment sessions and perform statistical processing, written up by a post-doc.

Exploratory Data

Notes:

1 Including Adult Psychiatric Morbidity Survey: Survey of Mental Health <https://digital.nhs.uk/catalogue/PUB2174>

2 Cognitive behavioural therapy (CBT) - NHS Choices

3 EMDR: Eye Movement Desensitization and Reprocessing - WebMD

4 IARTT: International Association for Rewind Trauma Therapy www.iartt.com/

5 Rewind outcomes <http://iartt.com/therewindtechnique/case-histories>, Selected Rewind Veteran, Sexual Abuse and Rewind Cases. 85% success achieved treating 21 post genocide survivors in a necessarily unrepeatable single session: <http://tmt.sagepub.com/content/early/2011/03/10/1534765611412795>

6 APT: Mental Health Training Courses Association for Psychological Therapies

- 7 The Rewind treatment is offered irrespective of existing substance abuse or depression condition
- 8 Estimate based on current CBT Counsellor salary range £26,500 - £41,500 pa, 100% overhead and 1,800 hours pa worked.
- 9 There is no clinical limit to the size of a Rewind therapy group
- 10 Assuming 15% of 5,000 CBT & 10% of 660 EMDR accredited counsellor time is currently spent on NHS PTSD therapy sessions

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