

A position paper of the (Israeli) National Council for Mental Health: Guidelines for the assessment and professional intervention with terror victims in the hospital and in the community.

The council is an advisory body to the Ministry of Health and is composed of the top people in the mental health field in Israel.

The members of the sub-committee of the council who wrote the paper included: Prof. Avi Bleich (Chair of the sub-committee, head of a psychiatric hospital, in the past head of Mental Health services in the army), Prof. Moshe Kotler (the vice-chairman of the National Council of Mental Health, head of a psychiatric hospital, in the past head of Mental Health services in the army), Dr. Elan Kutz (not a regular member of the council, was invited because of his work in this specific field, head of psychiatry at Meir Hospital, claims he was trained by Francine S., and is the one I am sure is responsible for the inclusion of EMDR in the paper. Has spoken and written in the past about his use of EMDR in the ER), and... Dr. Arik Shalev (not a regular member of the council, was invited because of his work in this specific field, head of psychiatry at Hadasa Hospital, you know of him). Also participated Ms. Bornshtein (chief nurse?) and Dr. Dor (psychiatrist?).

General description of the paper:

- 1) Background – terror and its impact.
- 2) Psychological reaction – ASR, ASD, PTSD.
- 3) Organizational preparations in the ER
- 4) General guidelines for interventions
- 5) Medication
- 6) Psychotherapies: Interventions vs a vie individuals: (see details later)
- 7) Psychotherapies: Group interventions.
- 8) Sending the victim back to the community
- 9) Ongoing treatment in the community
- 10) Interventions by family physicians

Part 6) Psychotherapies: Interventions vs a vie individuals

- a) EMDR – enables by simultaneously focusing on painful traumatic images, and guided eye movements to dim and lessen the intrusive memories. The use of this technique was seen as effective in reducing, sometimes dramatically, the powerful traumatic memories and images that might cause severe distress.
- b) Hypnotic techniques – these techniques used by a person who was trained in their use, may be effective in calming down and giving a sense of control of traumatic memories and the anxiety that comes with them.
- c) CBT – such interventions are probably the most promising in their preventative impact on the development of PTSD in the future, but it is a long/ongoing therapy plan.