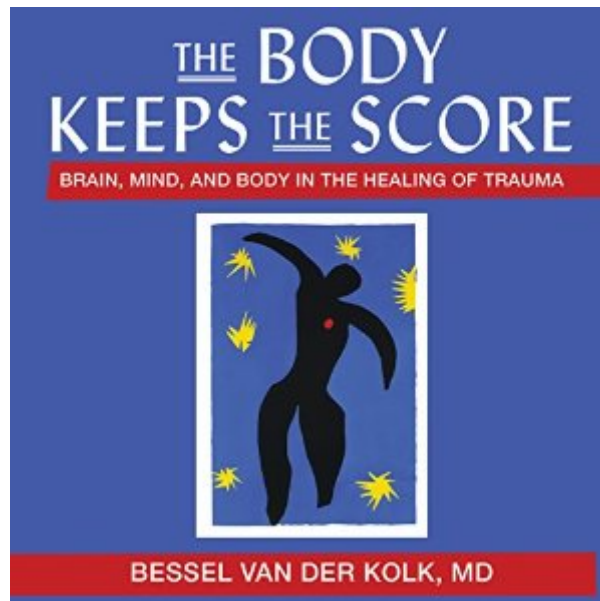


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# The Body Keeps The Score: Brain, Mind, And Body In The Healing Of Trauma



## Synopsis

A pioneering researcher and one of the world's foremost experts on traumatic stress offers a bold new paradigm for healing. Trauma is a fact of life. Veterans and their families deal with the painful aftermath of combat; one in five Americans has been molested; one in four grew up with alcoholics; one in three couples have engaged in physical violence. Such experiences inevitably leave traces on minds, emotions, and even on biology. Sadly, trauma sufferers frequently pass on their stress to their partners and children. Renowned trauma expert Bessel van der Kolk has spent over three decades working with survivors. In *The Body Keeps the Score*, he transforms our understanding of traumatic stress, revealing how it literally rearranges the brain's wiring - specifically areas dedicated to pleasure, engagement, control, and trust. He shows how these areas can be reactivated through innovative treatments including neuro feedback, mindfulness techniques, play, yoga, and other therapies. Based on Dr. van der Kolk's own research and that of other leading specialists, *The Body Keeps the Score* offers proven alternatives to drugs and talk therapy - and a way to reclaim lives.

## Book Information

Audible Audio Edition

Listening Length: 16 hours and 17 minutes

Program Type: Audiobook

Version: Unabridged

Publisher: Gildan Media, LLC

Audible.com Release Date: October 9, 2014

Whispersync for Voice: Ready

Language: English

ASIN: B00OBT7KAO

Best Sellers Rank: #3 in Books > Health, Fitness & Dieting > Mental Health > Post-traumatic Stress Disorder #3 in Books > Audible Audiobooks > Science > Medicine #4 in Books > Health, Fitness & Dieting > Psychology & Counseling > Pathologies

## Customer Reviews

This is the new Bible for anyone affected by trauma, or who works in the field. Van der Kolk has synthesized the most important new breakthroughs in neuroscience, psychology and body-centered therapies, to create a coherent blueprint for understanding and treating trauma. He writes simply and lucidly, and brings his deep insights to life with engaging anecdotes. I suffered PTSD and severe anxiety for many years, and tried all the usual therapies (CBT, medication, analysis, diet,

exercise, acupuncture, vitamins, group therapy etc.). Frankly, nothing really worked until I discovered - and applied - the somatic (body) techniques espoused by van der Kolk, and other luminaries such as Peter Levine, Pat Ogden, and Eugene Gendlin. It took me a long time to understand and accept their message that trauma impacts the more ancient (reptilian) part of the brain where talk-therapies just can't reach, let alone affect. The only way to communicate with this pre-verbal system is through the body, which can signal to the brain stem that it is OK to begin the process of unfreezing the emotional paralysis that has plagued us for decades. So much depends on our willingness and capacity to feel and experience what is going on inside us - not just think about it. Of course, it is also important to understand what is going on at a cognitive level in order to make sense of things. So there is certainly a role for traditional talk therapy, but it is not the main game. By combining a bottom-up (somatic) and a top-down (cognitive) approach, as van der Kolk suggests, it is possible to move towards genuine healing - not just a suppression of symptoms. This is not theoretical for me. I have experienced it. The other truly great book on this subject is Peter Levine's *In an Unspoken Voice*, which explains his somatic experiencing (SE) therapy. Levine's book is arguably narrower in scope than van der Kolk's, but his writing has such a poetic quality that it communicates more than the words themselves. The first time I read Levine's book I felt my body respond to his truths at a visceral level. It is a deeply healing and magical work.

Psychiatrist, professor, world-class researcher, and traumatologist Bessel van der Kolk MD requires no introduction to trauma psychotherapists. My enduring impressions of him over many years is one of relevance, cogency, frankness, and accessibility - served up with a subtle dash of impishness. He tends to be a bit disruptive - something of a provocateur - and everything of his I have ever read has taught me something, confirmed something important, or pushed my thinking in a new direction. When he has something to say, I want to hear it. However, I almost didn't buy this book: I was put off by the title. Familiar with major reviews of PTSD psychotherapy outcomes research, I know that research support for body-oriented approaches to treating psychological trauma psychopathology is thin at best, and such treatment models simply do not have the research validation of either EMDR (Eye Movement Desensitization and Reprocessing) and PE (Prolonged Exposure), neither of which are especially body-focused. J. Interlandi's excellent article anticipating publication of this book - "A Revolutionary Approach to Treating PTSD" (New York Times Magazine, 2014.05.22 - available online) - initially supported my fears that for some inexplicable reason van der Kolk was now

promoting some treatment model for which we have little confirming research. "Psychomotor therapy is neither widely practiced nor supported by clinical studies," Interlandi informs us. Provocateur he may be, but I'm strongly biased in favor of paying attention to therapies for which we do have solid empirical validation. Our clients do not deserve to be experimental subjects - maybe not even if they agree to this, as I'm not sure they can ever know enough to make a truly informed consent. Knowledge that PTSD and related disorders are usually highly curable, when using the right treatment protocols, sadly remains the possession of a minority of people, even in the professional psychotherapy world. Yet the account of van der Kolk's therapy work in Interlandi's article is gripping. Becoming completely absorbed in the account, I was convinced. (I've been here before, reading van der Kolk's own accounts of his work.) And so the disruption begins! Deeper into the article, he has me. Van der Kolk's critique of CBT (cognitive behavioral therapy - a general class of therapies) and PE (E. Foa's exposure therapy model) is withering and correct: neither really work. "Trauma has nothing whatsoever to do with cognition...It has to do with your body being reset to interpret the world as a dangerous place....It's not something you can talk yourself out of." Interlandi reports that "That view places him on the fringes of the psychiatric mainstream." But he's right, and I can't stress this enough. Why? Because as a trauma treatment professional I'm well aware of what the trauma treatment outcomes research actually says. The best current summary of this research well may be chapter 2 of Ecker, et al.'s (2012) "Unlocking the emotional brain". (Buy this book, too!) Ecker et al. brilliantly presents a synthetic summary that encompasses 11 existing therapy models which actually DO cure trauma psychopathology, if done right. In this context, what van der Kolk is doing makes perfect sense. Finally, it appears, the trauma psychotherapy field is moving toward a consensus which has strong credibility. Van der Kolk's new book has many virtues. Parts One and Two (102 pp) provide a substantial review of the neuropsychology of trauma's impact on a person. It's fun, interesting, informative reading, for professional and layperson alike. Part Three (64 pp) surveys childhood development, attachment experience, and "the hidden epidemic of developmental trauma". Van der Kolk has for years been a leading champion of the idea that there is a type of PTSD which substantially differs from all the rest. It develops in response to chronic child abuse and/or neglect. I completely share his belief that the diagnosis of Developmental Trauma Disorder (sometimes called C-PTSD, with "C" meaning "Complex") is overdue for formal recognition. I find his review of the struggle to legitimize DTD as gripping and distressing as anything else in the book. It is anguishing to know that a major problem exists, AND that the psychiatric establishment simply refuses to acknowledge it. DTD/C-PTSD is no fantasy. We see and treat these people, as children and adults. They exist, and they are nothing like "ordinary" PTSD

treatment clients. Part Four (29 pp) focuses on memory. I've long thought that much writing on treating psychological trauma seems to miss the point: trauma memory is what causes the problem. Deal with that and the symptoms vanish. Why is this so hard to understand? Yet, it is not a common understanding at all. Explaining how trauma memory works is invariably enlightening to my clients. And experiencing what happens when we change the nature of trauma memory is revelatory to someone who's lived with it for years, if not decades. As he does throughout the book, van der Kolk offers fine stories about clients who have experienced exactly what I've seen happen in my clients, making excellent use of what cognitive research tells us: people understand things best through narratives. Offer a good narrative and you convince. Psychological trauma therapy is complex, but we are now well prepared to launch into the book's core content - Part Five (154 pp), "Paths to Recovery". He gets right to it: we cannot undo the trauma, but we CAN undo its effect on us, and so get our "self" back. Ch. 13 reviews existing therapies. His approach is to repair "Descartes' Error" (see Damásio's 1994 book of that title) by viewing mind and body as a single coherent functional unit. His topical coverage is complete and his critique of current therapies acute - not to be missed. He then writes of the importance of language (Ch. 14). We construct our narrative mainly in words, and the words we choose are critical. But language is not enough (this anticipates his next two chapters). Our senses encompass a larger world, and it's center is our body, where all our sensory receptors are located. Then he introduces the treatment model he's long advocated: EMDR (Eye Movement Desensitization and Reprocessing). I'm trained in EMDR, and in fact van der Kolk and I had the same instructor for our advanced training: Gerald Puk PhD. Van der Kolk tells an amusing and self-deprecating story about his advanced training experience, in which Puk was able to provide a strong corrective to his approach to clients. This is typical van der Kolk - he's a truth-teller, even when it may put him in a poor light! And, after all, at this point he has nothing to prove to anyone. Finding an EMDR therapist is not hard (see his "Resources" section). Nor is it hard to find a yoga instructor, and yoga is what he advises for helping a trauma victim get back into their body. Yoga is a wise choice, because it is available, already widely known, and adaptable to a wide range of individuals and capabilities. There is much more in Part Five, and the focus is on self-empowerment. "Victim no more!" as they say. Most trauma therapists have a keen interest in seeing their clients leave therapy charged up and ready to fully embrace their life - that certainly is my own emphasis. Van der Kolk's thoughts on self-empowerment for those in recovery from psychological trauma will be invaluable to any trauma psychotherapy client. For psychotherapy professionals, this book will be both delightful and confirming. For everyone else, it will be a readable, gripping, highly educational tour of topics all of which are critical to a successful transition

back from the impact of psychological trauma. That he gives prominent though not dominating emphasis to developmental trauma disorders is entirely appropriate. Our society has yet to grasp that child abuse and neglect is a more often chronic than not, and that its impact is largely ignored and poorly treated, if at all. This does not have to be. Get educated (this book will do that), then commit to being an advocate for children as well as for adults impacted by trauma. They all deserve the chance to be healed, and we can now do that. Van der Kolk shows us how. The physical book: Jacket design is pleasant and interesting. Binding is less so: color of spine wrapping is semi-florescent, and of paper, not cloth. The book feels substantial and pleasant to hold and look at. Organization - \* 6 pp: prefatory praise by peers and related luminaries (interesting comments from some important people in the field);\* 2 pp: Table of Contents;\* 356 pp: actual text;\* 4 pp: Appendix: Consensus proposed criteria for developmental trauma disorder\* 3 pp: Resources\* 4 pp: Further reading\* 51 pp: Notes\* 21 pp: Index

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