A Brief Guide to Imagery Rehearsal Therapy (IRT) for Nightmare Disorders for Clinicians and Patients

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In 2010, the American Academy of <u>Sleep</u> Medicine published the first summary guidelines on how to effectively treat <u>nightmare</u> disorder (Aurora et al., 2010). Based on a comprehensive review of the literature, the two top interventions were psychological and pharmacological. They are Imagery Rehearsal <u>Therapy</u> (IRT) and venlafaxine or Prazosin. The data show the two interventions as comparable in efficacy and, therefore, a trial of the psychological intervention — before <u>medications</u> — is usually recommended. The context and nature of the nightmares, of course, are central to how best to use this approach and, thus, an equally important recommendation, is that you the client or patient seek the assistance of a clinical provider trained and qualified to deliver this treatment.

The Four Steps of Imagery Rehearsal Therapy (IRT)

1. WRITE DOWN the narrative or the central elements of the bad dream. To facilitate recall, it is best to use a lighted pen and paper at your bedside to record the content. Do not use your phone or tablet because of excessive light stimulation. You may also use a dedicated microrecorder to orally record content upon awakening.

Later, spend some time turning the notes into a more detailed paragraph or two describing what happened in the dream and to whom. What is most important is to capture the most frightening elements of the dream on paper: the actual injury or death, horrific images or sounds, and what led up to the dramatic ending.

Please note that this alone may be intolerable for some <u>trauma</u> survivors with severe posttraumatic stress disorder (<u>PTSD</u>), problems with dissociation, or other severe mental illness. For those of you with extreme fear, make sure you have professional or personal support before attempting this alone!

- **2. REWRITE** the dream on another piece of paper CHANGING the arc of the story so that it results in **A POSITIVE ENDING**. This requires some imagination but can be done with the help of heroic stories of survival you recall from literature, the movies or the media. The story can be outlandish, introduce rescuers, invoke your own Super Hero superpowers or a realistic use of self-defense, martial arts, weaponry and/or the help of well-trained defenders such as the military or law enforcement.
- **3. JUST BEFORE FALLING ASLEEP, INDUCE THE INTENTION TO RE-DREAM.** Use each of the following steps and do not skip any of them! Please note that the simple intention of being receptive to having the nightmare again leads to immediate remission (absence) of the recurrence for a lucky few. The steps below have elements of a technique borrowed from a phenomenon called lucid dreaming, the experience of being aware that you are dreaming while you are dreaming. Do not be discouraged if you do not have that gift. You will still get excellent results without being able to lucid dream.

- 1. Say this to yourself (really use these exact words), "If or when I have the beginnings of the same bad dream, I will be able to INSTEAD have this much better dream with a positive outcome." (If you think you are a lucid dreamer, you can say to yourself, "If or when I have this dream again, I will be aware of having it and not only can I dream the better version, but I will shape it more positively while it happens!")
- 2. **IMAGINE the details of the REWRITTEN DREAM** from beginning to end. Review any part to make sure you can really see it or feel it.
- 3. Repeat to yourself the statement in **Step 1 above ONCE MORE**, **before you allow yourself to FALL ASLEEP.**
 - 4. Once you have successfully had your first success, **REJOICE IN YOUR RE-DREAMING!** You are on your way to managing and mastering the content of your upsetting dream life. REPEAT the procedure every time you have a nightmare or fear a recurrence. If you do not have success on the first many attempts, do not despair. Keep experimenting with rewrites. All efforts will be a good source of information that you can provide to your physician or psychologist. Give the techniques a minimum of a 10-night trial. Note the challenges you are facing. Typical problems that interfere are related to alcohol or cannabis use (try abstaining while you attempt the methods) or breathing problems related to asthma, allergies or apnea. Get additional help for these problems and when suspecting severe sleep disorder, consider a sleep medicine specialist (physician, neurologist, clinical psychologist, or neuropsychologist). Although not a panacea for the problems surrounding nightmares such as PTSD or recent traumatic exposure, IRT is indeed powerfully effective in reducing and eliminating nightmares. This technique has been used with great success by psychologists with veterans of war and survivors of abuse, physical and sexual, for decades. It is gratifying to finally see the leaders in

Happy Re-Dreaming to All!

Reference:

Aurora, R. N., Zak, R. S., Auerbach, et al. (2010). Best practice guide for the treatment of nightmare disorder in adults. *Journal of Clinical Sleep Medicine*, *6*, 389-401. Downloadable at https://aasm.org/resources/bestpracticeguides/nightmaredisorder.pdf.

sleep medicine research doing the research to warrant formal endorsement.

https://psychcentral.com/blog/a-brief-guide-to-imagery-rehearsal-therapy-irt-for-nightmare-disorders-for-clinicians-and-patients/