

A meta-analysis of randomized and non-randomized trials of thought field therapy (TFT) for the treatment of posttraumatic stress disorder (PTSD) and stress.

Jenny Edwards, PhD and Michelle Vanchu-Orosco, PhD

Background: Thought Field Therapy (TFT) is a method of tapping on the meridians of the body to treat symptoms of psychological distress such as posttraumatic stress and anxiety. The purpose of the study was to determine whether participants, guided by TFT-trained professionals or trained paraprofessionals, demonstrate symptom reduction greater than those receiving no treatment as assessed by standardized psychometric measures for posttraumatic stress and anxiety.

Methods: A meta-analysis of studies (conducted between 2001 and current) evaluating TFT efficacy for individuals suffering from posttraumatic stress or stress was conducted. Thirty-nine databases were searched. In addition, requests were sent to colleagues to share any studies that had not been published. Every attempt was made to obtain all studies that had been done on TFT and posttraumatic stress.

Ten studies met the qualifications for inclusion in the meta-analysis: 1) Posttraumatic stress or anxiety needed to be one of the identifiers or be separated out if other psychological issues were included; 2) Thought Field Therapy needed to be the treatment or be separated out if other treatments were involved; 3) the assessment had to capture change from initial diagnosis to measuring the outcome after TFT treatment; and 4) the study needed to have means, standard deviations, and/or p-values, or it needed to have quantitative data so that pre and post measures could be compared.

In two of the studies, a 1-10 Subjective Units of Distress (SUD) scale (or in one study, presence or absence of posttraumatic stress) was used rather than a measure of posttraumatic stress or anxiety.

Results: Publication bias, examined using plots of effect sizes by weighting, funnel plots, and Duval & Tweedie's Trim and Fill, did not appear to be an issue. The overall random effect size for the pre- to post-TFT treatment in quasi-experimental conditions (-2.16) was large and statistically significant. The overall random effect size for the pre- to post control in quasi-experimental conditions (-0.51) was a medium and statistically significant effect.

Conclusions: The results show that TFT is highly effective in reducing symptoms of trauma and anxiety in a variety of populations and settings. This meta-analysis extends the existing literature through facilitation of a better understanding of the variability and clinical significance of PTSD improvement subsequent to TFT treatment.

Please e-mail requests for more information to:

- Jenny Edwards at jedwards@fielding.edu
- Michelle Vanchu-Orosco at vanchuorosco@hotmail.com