

Chronic Illness: How Solid is it?

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Facilitating Mind Body Dialogue in Chronic Illness

Interactions between Mind and Body

Despite a common cultural and medical perspective that mind and body are separate entities, many of us know from personal experience that the relationship is one of mutual interdependence. During sitting practice in meditation, for example, a thought may affect physical sensations and emotions as well as our ability to remain on the cushion. Conversely, small physical discomforts can affect our thoughts, growing to grand proportions that temporarily take over our capacity to witness our experience in the present moment.

We are also often invited to consider chronic diseases as being “solid” and irreversible, yet everyday experiences suggest otherwise. A persistent ache unexpectedly abates when we feel particularly touched or ‘met’; chronic fatigue lifts for a few hours when we have to meet an important deadline, or worsens following the receipt of seemingly ordinary, yet stressful news; an individual with diabetes experiences a sudden low blood sugar at a time when it is unlikely to be due to an insulin dose or activity levels... How can a body that no longer makes insulin exert such an effect on sugar levels? How can chronic pain from an old injury temporarily abate?

Variability in symptom expression seems surprising in the face of purportedly fixed physical changes. How is it that symptoms associated with nerve damage or loss of function from a gland such as the pancreas are sometimes inconsistent over time? Although often labeled as permanent, it would appear that many chronic symptoms are more changeable than predicted by

perspectives that view mind and body as interrelated and interdependent.

Environmental Factors in Chronic Illness

Chronic physical illnesses such as multiple sclerosis, diabetes, and arthritis are increasingly understood to be influenced by strong interactions between mind and body, and between the bodymind and the environment. Scientific evidence clearly supports these findings and research demonstrates that non-genetic factors in early life as well as in every day life shape the nervous system. Experience influences how the nervous system learns to perceive and respond to its environment, and therefore play an important role in risk for symptoms as well as variability of symptom expression from day to day.

The Role of Perception

The manner in which we learn the unconscious process of perceiving the world is a common factor linking mind, body, and the environment. Perceptions tell the nervous system, which regulates emotional responses as well as physiological processes, when it needs to protect us from danger and when it is safe to relax, play, and grow.

The fact that the nervous system learns how to perceive its environment from life experience supports what we know from mindfulness practice, which is that nonjudging curiosity and self-observation can reshape our perceptions to perceive our environments with a less reactive mind. We also know that the way we come to perceive the world is an evolving process that is unique to each individual.

I learned about these perspectives, not in my medical training, but as a consequence of following a deep curiosity regarding personal symptoms for which the western medical system has no effective treatment.

Self-Regulation

In an organism that learns from early on to perceive the world as a dangerous place, the nervous system intelligently complies by repeatedly activating certain reactions, such as the stress response of fight or flight. A certain event that is unconsciously perceived as stressful, for example, may result in neck pain and headaches in one individual, or numbness and throat tightness in another. Someone else may perceive the same event as pleasurable, and experience a decrease in symptoms. In yet another, perceived threats may elicit chronic fatigue or exacerbations of multiple sclerosis.

From a perspective that sees mind and body as interdependent, symptoms represent an intelligent attempt by the organism to adapt to a challenging environment. In this context, symptoms are not fixed. Instead, they are renewed moment to moment as a consequence of current and ongoing perceptions.

Some of us, for example, tend to perceive all sticks as snakes and to experience a stress response each time. Through mindful attention to the present moment, the stick occasionally comes to be perceived as the non-threatening inanimate object that it actually is. A gap forms between perception and response, and the organism learns a new pattern of perception. The rapidity, intensity, and degree of response can then also shift.

Mindfulness practices, attention to bodymind interactions, and the capacity to observe without reacting help to reorient perceptions, which can be inaccurate. While curiosity and nonjudgment promote a dialogue between parts of our bodymind, the practice of witnessing without reacting retrains the nervous system. Indeed, such practices elicit evolutionarily well-established patterns for states of energy conservation and “inactive alertness”. This process fosters increasing capacity for self-regulation in our thoughts and reactions, as well as in our physiologies.

Befriending Symptoms

As the capacity to notice without reacting increases, we begin to befriend our symptoms as well as our bodies. We may consequently learn a great deal, such as realizing that our bodies have not failed us but have simply been attempting to respond intelligently in the only way it knew. We may also experience more pleasurable ways of living and being in the world.

Unexpected additional benefits can also occur. As our relationship to illness shifts, for example, we sometimes no longer perceive our symptoms as negative or terrifying. In addition, symptoms may gradually stabilize, improve, or even resolve. As with many processes involving mindfulness practice, this proceeds at its own pace, and the outcome of mindful observation is different for each one of us.

I continue to be amazed how an approach that seeks to observe rather than to fix can be so powerful. Even though I am not Buddhist, I have found myself aligning with this perspective from the deepest recesses of my soul. This exploration ultimately seems to enable us to most fully participate in the experience of life through the incredible vehicle of our bodyminds.

Perspectives that cultivate the ability to consider symptoms as no more solid than thoughts provide us with powerful opportunities: they enable us to find the courage, patience, and curiosity from which to ask our symptoms for the first dance.

Veronique is a Somatic Psychotherapist in Boulder who utilizes the interdependence between mind and body as a foundation from which to work with individuals with chronic illness and unusual symptoms. Her background as a family physician informs this work.

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*for more perspectives on the role of more
mind/body interactions in chronic illness*