



A Mind/Body Medicine Update:

What Every Practitioner
Needs to Know

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Contents

- 3 Introduction
- 4 The History
- 5 Basic Concepts with Cutting-Edge Implications
 - 5 Psychoneuroimmunology
 - 6 Inflammation
 - 6 Neuroplasticity
 - 7 Fight, Flight, or Freeze
 - 7 Spirituality and Healing
 - 8 Holism
- 8 Specific Conditions Most Amenable to Treatment
 - 8 Digestive Issues
 - 8 Chronic Pain
 - 9 Trauma and PTSD
 - 9 The Inflammation Connection
 - 10 Sugar Addiction and Insulin Resistance
 - 11 Weight Management
 - 11 Sedentary Lifestyle
 - 12 Sleep Disorders
- 13 From Amenable Conditions to Indispensable Tools
 - 13 Mindfulness Meditation
 - 14 Hypnosis
 - 15 Guided Imagery
 - 15 Tools from Neuroscience: Rewiring Emotional Habits
 - 16 Energy Psychology
 - 16 Positive Psychology: Attitudes that Nurture
 - 17 Tools for Weight Management and Eating Disorders
 - 17 Treatment of PTSD
 - 18 Psychotherapy
- 18 Who practices mind/body medicine?
- 19 Why does NICABM predict the need for more practitioners within 10 years?
- 19 How do you get started?
- 21 Resources

A Mind/Body Medicine Update:

What Every Practitioner Needs to Know

Introduction

Stress is everywhere and stress is related to a majority of the conditions for which patients seek help from physicians. The US Department of Health and Human Services reports that job stress has become a wide spread and costly problem in the American workplace, leaving few workers untouched. The American Institute of Stress estimates that 75-90% of all visits to primary care physicians are for stress related problems. Worse yet, some types of stress such as loneliness, grief, and depression are associated with impaired immune function.

But as this report will show, many of these conditions are amenable to treatments for which a specialist in mind/body medicine is well equipped.

It can come as no surprise, then, that so many of our patients, those new to aches and pains or those frustrated with long-suffering conditions, are asking us for new solutions.

More and more, patients on their own are seeking out practitioners in mind/body medicine.

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Whether looking to supplement a conventional medical protocol or looking to undertake a new health-promoting regimen, many are seeking the services of mind/body specialists.

Our dilemma is not that too few seek these services. Many clinics and even solo practitioners have developed exciting treatment programs using innovative, state-of-the-art strategies, and those with successful approaches report having many more requests for services than they can handle.

Our dilemma is one of readiness...ensuring that we are fully prepared...that we know the innovative therapies to apply and the science behind them... and that we are skilled with the right techniques and treatments and know when and, just as important, when not to use them.

This report will demonstrate not only the tools that are most often used, but also the conditions most frequently seen. But first, where did mind/body medicine begin?

The History

That's really hard to say. We could start with indigenous cultures, meditative practices from India, or even the ancient traditions of Chinese medicine. But, for the purpose of this report, we'll begin more recently and start 30 years ago.

In 1978, Norm Shealy, PhD, MD and a number of others, formed the American Holistic Medical Association (AHMA). Their hope was to unite holistic medical practitioners in furthering their understanding of the link between mind, body, and spirit in the healing process.

One year later, Jon Kabat-Zinn, PhD founded the University of Massachusetts Medical School's Stress Reduction Clinic. This program focused on the clinical application of mindfulness meditation to patients with chronic pain and other stress-related problems. His successful approach has now been replicated in clinics world-wide.

In the early 1980s, Joan Borysenko, PhD co-founded and directed the Mind/Body Clinic at the Beth Israel Deaconess Hospital in Boston and wrote, what turned out to be, a *New York Times* best selling book: *Minding the Body, Mending the Mind*. This book was significant, not only because it sold over 400,000 copies (which advanced the field in itself), but also because it described the beginnings of mind/body medicine in a prestigious medical center.

Another pioneer, Larry LeShan, PhD wrote about his approach to helping cancer patients bring their self-healing abilities to their experience of disease in his seminal book: *Cancer as a Turning Point*.

And Bernie Siegel, MD, at the time, a Yale Medical School surgeon, described his unique approach to treating breast cancer patients in *Love, Medicine and Miracles: Lessons Learned about Self-Healing from a Surgeon's Experience with Exceptional Patients*. Perhaps because he was a surgeon, many practitioners began to take note.

But just as many used that book to criticize Dr. Siegel and this new field in general. One of their many objections included giving patients "false hope."

With so many new approaches coming to the forefront, many finding acceptance and others meeting with controversy, it was becoming more and more obvious that mind/body medicine needed a hub "to pull together under one umbrella" essential training to equip practitioners with new skills for the most effective treatments.

And that's when, in 1988, the National Institute for the Clinical Application of Behavioral Medicine (NICABM) was founded.

For 20 years, NICABM has continued with this same vital mission of support – bringing innovative ideas and clinical applications to professionals in mind/body medicine.

Briefly then, this historical perspective brings us to the present.

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Since practices in mind/body medicine now span the globe, we've created this report on the state of this specialty to take stock of where we are. We'll look at the range of conditions most commonly treated and the tools being used. By publishing this report, we hope to advance a kind of "cyber cross-pollination," globally initiating and supporting ideas, their clinical applications, and just as important, all of us as practitioners.

Our hope is that we can advance a kind of "cyber cross-pollination" of ideas among the practitioners working in this field.

We would also hope that as health and mental health practitioners across the world read this report, many more might seek out training, becoming qualified in this specialty of sophisticated, and non-invasive, yet powerful treatments that can work so effectively.

Later, we'll get to some of the specific conditions mind/body practitioners most often treat, but first, let's look at a few important concepts.

Basic Concepts with Cutting-Edge Implications

Psychoneuroimmunology (PNI)

Let's begin with one of the most revolutionary ideas to inform mind/body medicine.

Psychoneuroimmunology, a term coined by Robert Ader, PhD in 1975, acknowledged a new field which studied the interplay of the nervous and immune systems and their effects upon physiological processes. His lab was probably the first to look at the relationship and effects of behavioral, endocrine, and neural processes upon immunity.

Because of Robert Ader's work, it is now generally accepted, even in mainstream medicine that there are pathways connecting the brain and the immune system and that changes in one can effect changes in another.

With Ader's findings, the immune system could no longer be studied in isolation – it was fundamentally interconnected with behavioral, neural, and endocrine processes. And today, such links between nervous and immune system interactions, with their various psychological processes, dynamically impact health and mental health practices and treatments.

Many mind/body medical practices have now been linked to psychoneuroimmunology, including hypnosis, guided imagery, and biofeedback.

Inflammation

Long considered the body's first line of defense, inflammation is a natural lifesaver. But with time and most especially in the aging body, inflammation can over-inflate. We now realize that what we once thought was just a healing process, can also become a likely precursor to the disease process.

As we know, inflammation protects us: the redness and heat at the surface of a scrape signifies protection from serious infection. But long-term and uncontrolled inflammation can wear down and destroy vital organs and body tissue.

More and more, it appears that good health may depend on finding a way to help balance the body's intricate pro-inflammatory and anti-inflammatory forces. It is important then, for the mind/body specialist to have an understanding of inflammation, its critical relationship to disease and how it might be mediated.

...long-term and uncontrolled inflammation can wear down and destroy vital organs and body tissue.

Neuroplasticity

We used to say that the brain was fixed, and that we lose brain cells as the body matures. But groundbreaking research shows that the brain has a "learning curve" of its own, with growth capacities that can extend well beyond its development in childhood.

Amazingly, the brain can reorganize itself by forming new neural connections through "axonal sprouting." This means that undamaged axons grow new nerve endings to reconnect neurons whose links were injured or severed.

This malleability of the brain is especially promising to those who've suffered brain damage, such as strokes or neurological impairments. But it is also relevant in a variety of conditions such as anxiety, ADHD and other learning disorders, and even age-related memory loss.

Scientists who study neuroplasticity (the term used to describe this brain flexibility) have begun to understand how this actually takes place. At the same time, some brilliant psychologists have looked at the clinical application of this physiological restructuring as a sort of emotional rewiring.

We'll get to more about the impact of neuroscience, neuroplasticity, and how new thinking and new beliefs can literally rewire one's brain to change emotional reactions and behavior later in this report.

Fight, Flight or Freeze

We used to describe stress as the fight/flight response. However, Robert Scaer, MD, a leading neurologist researching the effects of trauma and PTSD has taken us a giant step beyond this concept. He, along with other psychologists, has looked at a more discrete and pivotal component in stress, now referred to as the freeze response.

And so, we are now thinking it is more correct to see stress through the lens of the fight/flight/freeze response.

Beyond PTSD, trauma victims often experience a wide variety of health problems. In looking at the neurophysiology of traumatic stress, Dr. Scaer has suggested that the freeze response is implicated in many chronic diseases, such as fibromyalgia, chronic fatigue syndrome, irritable bowel syndrome, gastro-esophageal reflux disease, reflex sympathetic dystrophy, and phantom limb pain.

We'll come back to this innovative work in our section on Conditions Most Amenable to Applications in Mind/Body Medicine.

We are now thinking it is more correct to see stress through the lens of the fight/flight/freeze response.

Spirituality and Healing

In some cases, disease might actually be a gift – not one that you would choose of course, but nevertheless, one that can significantly alter the course of one's life.

And that's one reason why Joan Borysenko, Larry LeShan and Bernie Siegel's books made such a difference. They each used as part of their work, what could be considered a spiritual approach to helping patients bring their own self-healing abilities to their experience of disease.

At this point, while the number of books on spirituality and healing are too numerous to mention, another thinker that stands out is Christine Page, MD. She is a physician from London who writes on awakening to an inner journey by listening to our own voice of intuition. Her contribution has been to train practitioners in developing their own skills in intuition through navigating the soul's journey.

Beyond that, science has shown that altruism and spiritual attitudes are correlated with positive health effects. With such evidence, it seems increasingly important for practitioners to consider a spiritual approach in formulating a vision for how their treatments might unfold.

Holism

Medicine used to look at the body from each of its discrete and separate parts. But the body is more like a hologram, an elegant and wonder-filled, interrelated design. And as such, the body needs to be viewed holistically.

As a result, the over arching strength of mind/body medicine's holistic vision is a context that includes the self in community.

Specific Conditions Most Amenable to Treatment

Now, let's turn to the conditions and ailments most frustrating to our patients, yet so amenable to treatment approaches in mind/body medicine.

Digestive Issues

According to the National Institutes of Health, as many as 1 in 5 Americans have symptoms of irritable bowel syndrome (IBS), making it one of the most common disorders diagnosed.

Stress and feeling tense, angry, or overwhelmed can stimulate colon spasms and compound digestive disorder even further. Because the colon has many nerves connecting it to the brain, stress control is very important in reducing IBS symptoms.

And, not only is faulty digestion directly responsible for a large number of gastrointestinal disorders, it can be linked to a vast array of seemingly unrelated illnesses, including arthritis, migraines, and auto-immune diseases.

Chronic Pain

More than 26 million Americans between the ages of 20 and 64 experience frequent back pain. As the leading cause of disability in Americans under the age of 45, back pain is the second most common reason why people in the US visit their primary care physician.

Nearly one in five adults has arthritis, which is also a frequent cause of disability. As practitioners, our work is cut out for us. Think of arthritis as one of those pernicious effects of chronic inflammation.

Research suggests, as well, that our attitudes about pain contribute as much life-disrupting power as the actual painful sensations themselves. The discouraging cycle of hope, frustration, and continued pain can be as damaging to an everyday life as the pain itself.

Trauma and PTSD

If we were just facing soldiers returning from combat duty, that alone could deplete the energy and expertise of highly trained practitioners. But, in addition, we have victims reeling from natural disasters (hurricanes, tornadoes, cyclones and earthquakes) and those catastrophes that can bring in their own “tsunami” of trauma needs.

Virtually any event that is life threatening or that severely compromises the emotional well-being of an individual may result in PTSD. And the causes, we know, are extensive: experiencing/ witnessing a severe accident, receiving a life-threatening medical diagnosis, being the victim of rape or assault, exposure to combat and other disasters, enduring physical, sexual, emotional or other forms of abuse...the list is legion.

And how do those with such devastating, trauma-induced experiences heal? The mind/body medicine practitioner, whether from a medical or mental health background, is uniquely suited to diagnosing and treating trauma.

It takes an understanding of the freeze response and how trauma imprints memories and neural pathways in the brain and at the same time, an understanding of how those who experience trauma are more likely to develop many of the chronic conditions we see today.

Inflammation’s relation to disease is arguably one of the most dynamic concepts in disease prevention and treatment today.

The Inflammation Connection

While not a disease in and of itself, inflammation is linked to the risk of heart disease, digestive disorders, diabetes, allergies, and chronic pain, as well as diseases associated with aging, such as arthritis, Alzheimer’s, osteoporosis, and some cancers.

The concept of inflammation, then, takes on a whole new meaning, the significance of which is certain to play a center-stage role in disease prevention and treatment, as you’ll discover when we discuss the tools below.

William Meggs, MD, PhD, is at the cutting-edge of this research, both in uncovering the connections and in describing treatment approaches for patient protection. Most important for us as practitioners are the steps Dr. Meggs recommends that we take right now in minimizing the risks of inflammation.

A compelling notion, inflammation's relation to disease is arguably one of the most dynamic concepts in disease prevention and treatment today.

Sugar Addiction and Insulin Resistance

Can stress make you fat? And dieting even fatter?

It is important here to understand the role of insulin resistance, because for some, it is a critical factor. To maintain normal blood glucose, the pancreas secretes insulin. In some cases (about 1/3 of the people with insulin resistance), when body cells resist or do not respond to even high levels of insulin, glucose builds up in the blood, causing high blood glucose or type 2 diabetes.

Sugar seems to alter the brain's neurochemistry.

Since insulin resistance is implicated in diabetes, heart disease, obesity, and hypertension, the regulation of insulin is a major health consideration.

When we think of addiction, alcohol and tobacco seem most obvious, but most recently, we find sugar to be a menacing interloper gaining ground. And stress is right there as an accomplice, providing a pivotal link between eating habits and life-style choices.

Many scientists and practitioners including Kathleen DesMaisons, PhD have started to look at how sugar, acting like a drug, seems to alter the brain's neurochemistry, impacting mood, including feelings of depression and anxiety, and influencing eating patterns, obesity, and diabetes.

With a high sugar diet, the consumption of junk food, and erratic meal-time schedules, even the slightest sugar sensitivity can grow into an addiction. DesMaisons and others are now starting to think of sugar sensitivity as the gateway to other addictions.

But into this mix of sugar addiction and insulin resistance emerges another most significant factor: stress.

Karen Wolfe, MMBS, MA is one of the practitioners asking: Is stress fattening? This physician from Australia is showing the link between stress and weight gain, the role of cortisol and insulin resistance in maintaining optimum weight, and why the fat-free diet mentality may be adding on pounds.

With therapeutic tools such as hypnosis, mindfulness, guided imagery, and energy psychology, all of which you'll read about later, practitioners can make remarkable headway in successfully treating the disorders and debilitating conditions that frustrate so many of our patients.

But before getting into the tools of treatment, let's look at three more areas of concern: weight management, which is so directly related to sugar addiction/insulin resistance, sedentary lifestyle, and sleep disorders, which seem, more and more, to plague even those who consider themselves to be healthy.

Weight Management

About two-thirds of U.S. adults are overweight, with almost one-third qualifying as obese, according to data from the National Health and Nutrition Examination Survey 2001 to 2004. And as we know, this has been steadily increasing since the 1970s.

Because being overweight is associated with an increased risk of heart failure, hypertension, osteoarthritis, type 2 diabetes, stroke, gallbladder disease, sleep apnea, respiratory disease, and some cancers, it is a cause of great concern.

The benefits of a healthy life-style – physical activity and weight loss – can vastly improve insulin response. In a major 2001 study, the National Institutes of Health completed the Diabetes Prevention Program, a clinical trial designed to find the most effective ways of preventing type 2 diabetes in overweight people with pre-diabetes. Researchers found that such changes in life-style not only stabilized blood glucose levels, but reduced the risk of diabetes by 58%.

What a complex issue. Based on the sleek and sophisticated camera shots promoted by advertisers, most of us have had more than a passing glance at how we think we should look. And counter-posed to that, we inherently seem to recognize the more wholesome images, too, of what it means to have a healthy body.

Weight management is about our relationship with food, and fortunately, mind/body medicine offers so many approaches to move that relationship into a journey from low self-esteem and struggle to one of self-discovery and optimal health.

Sedentary Lifestyle

We've known for years that aerobic exercise has been shown to be as effective as antidepressants in treating depression and anxiety. It increases levels of serotonin, norepinephrine and dopamine in the brain. Lower incidences of cardiovascular disease and cancer have also been linked to an active life-style.

The latest research however, also suggests that inactivity not only makes people more vulnerable to disease, but can actually speed up the aging process. And consistent with other findings, inactivity makes us more susceptible to inflammation.

We are now starting to understand that exercise is also useful in treating ADHD, addictions and possibly in preventing Alzheimer's disease as well as in increasing our capacity for creativity and learning.

Because toxic levels of stress erode the connections between nerve cells in the brain, exercise is so highly recommended. It is also an essential component in healthy aging because of how it strengthens the brain's infrastructure.

Inactivity can actually speed up the aging process and make us more susceptible to inflammation.

Spark: the Revolutionary New Science of Exercise and the Brain, by John Ratey, MD, gives an excellent overview of all of the new evidence supporting the importance of consistent exercise. NICABM hopes that this single book becomes one of the year's best sellers because of how thoroughly motivating and compelling this evidence has become.

Sleep Disorders

For so many, the multi-tasking that propels us through the day idles on automatic pilot throughout the night, keeping us wide-eyed and muscle-tensed.

A recent National Sleep Foundation poll reports that 67% of American women surveyed said they regularly have trouble sleeping. But sleep is not just a women's issue.

Lack of sleep may be related to both obesity and inflammation.

With long work hours, stress, sugar-laden cappuccinos, and of course, wanting to fit too much into one day so endemic to our culture, insomnia should come as no surprise. Because we've focused on doing and obtaining more, we've come to devalue the importance of rest and sleep in the overall quality of our lives.

And that's just the "tip of the iceberg." Recent research has discovered critical links between inadequate sleep and a broad range of health problems including depression, cardiovascular disease, and diabetes.

Dr. Wolfe, mentioned above, and others are also looking at how sleep is vital to replenishing the brain's energy, and how a lack of sleep may be related to both obesity and inflammation. It is becoming clear that a stress-filled life-style can be detrimental to healthy brain chemistry.

Even more daunting is that most health care professionals who encounter sleep disorders in their practices on a regular basis, find that they are ill prepared in treatment approaches, and as a result, sleep disordered patients remain undiagnosed and untreated.

Along with successful techniques in hypnosis, mindfulness meditation, guided imagery, energy psychology, and psychotherapy, new applications to treat sleep disorders are ever emerging.

From Amenable Conditions to Indispensable Tools

What then, makes mind/body medicine so exciting? Grounded in research and innovation, it thrives on approaches and treatments that work.

In addition to the general conditions we've highlighted (digestion, chronic pain, trauma and PTSD, inflammation, sugar addiction and insulin resistance, weight management, and sleep), mind/body medicine also benefits other, more specific conditions such as hypertension, depression/anxiety, asthma/allergic reactions, concentration/memory, as well as aiding in preparation for surgery and other medical procedures, and in mitigating the side effects of chemotherapy and radiation.

Mind/body medicine has solutions...
Its innovation brings us clinical applications.
The clinical applications become the tools we use.
And the tools we use bring solutions our patients seek.

But what are those approaches and treatments that can innovate and expand our practice? What are the indispensable tools that leading practitioners use?

Mindfulness Meditation

We hear this question so often: How can something so simple be so effective?

Mindfulness is a deceptively simple way of relating to experience that has been successfully practiced for over 2500 years to alleviate human suffering. Recently, practitioners and clinicians have been rediscovering the merits of this ancient practice.

By developing a personal mindfulness practice, we can transform our therapeutic presence at a deeper level.

Mindfulness meditation has been shown to be effective in reducing hypertension, and in treating anxiety and depression. Researchers at the University of Wisconsin have also found it to have positive effects upon the brain and to influence immune function.

So much of treatment success in medicine points to the relationship between practitioner and patient. Knowing how to connect deeply with awareness, compassion, inner attunement, patience, and empathy is not easily taught. But in developing a personal mindfulness practice, we can transform our therapeutic presence at a deeper level.

Christopher Germer, PhD and Ronald Siegel, PsyD, are co-editors along with others of *Mindfulness and Psychotherapy*, a comprehensive introduction to mindfulness and its contemporary clinical applications. In just the two years since it was published, it has become the seminal work in this field.

A variety of psychotherapies have been developed based, in part, upon mindfulness meditation such as Acceptance and Commitment Therapy, Dialectical Behavior Therapy and Mindfulness Based Cognitive Therapy.

Hypnosis

When treating conditions, emotions and behavior that happen beyond conscious intent, hypnosis is an especially effective tool.

While there is no evidence that hypnosis cures individuals facing various diseases, it is proven that hypnosis helps to control symptoms of diseases, relieving individuals of pain, stress, and post-traumatic syndromes.

Hypnosis can significantly influence our health by effectively treating autoimmune disorders, hypertension, allergies, sleep, skin and stomach disorders, anxiety associated with surgery, and in mitigating the side effects of chemotherapy and radiation. It has also been shown to reduce inflammation and strengthen the immune system.

Though Milton Erickson, MD did not invent hypnosis, his ingenious approach to it has been studied by thousands of health and mental health care practitioners.

He is known for his innovative use of the unconscious mind as a creative and solution-generating self-healing resource. Its permissive nature ensures that it can be used with a broad range of clients, even those who have been resistant to other methods or who are afraid of losing control. We are indebted to him for his inspired contribution to mind/body medicine.

Bill O'Hanlon, MS, LMFT is one of the many leaders in the use of Ericksonian hypnosis. He is perhaps the most effective teacher of hypnosis and has trained thousands of practitioners throughout the world to use this approach.

Guided Imagery

Another most elegantly effective tool in the practitioner's toolbox is guided imagery. Guided imagery is a right brained intervention that has been shown to have a positive impact upon health, creativity and performance.

It has been associated with the reduction of blood pressure, cholesterol and glucose levels, blood loss during surgery, and post-surgical medications. It has also been shown to mitigate the side effects of chemotherapy, most especially nausea, depression and fatigue.

Belleruth Naparstek, LCSW is one of the most gifted practitioners in the use of guided imagery. She is a renowned leader who has taught thousands of practitioners to customize guided imagery to meet the unique needs of individual patients.

Tools from Neuroscience: Rewiring Emotional Habits

Remember our earlier discussion of neuroplasticity?

Instinctively, it seems, people are caught in patterns of behavior in which they, over and over again, utilize responses that don't work.

Psychologists have been talking about this for years. But most recently, they've been tying this question to the brain, looking into the brain's specific neural response systems to shed light on how our brains seem to take control, especially when we feel threatened or upset.

A step-by-step therapeutic intervention can rewire the brain for greater emotional flexibility.

Perhaps one of the first to use the science of neuroplasticity in clinical work was Ernest Rossi, PhD, who applied this work with patients suffering from stroke. He looked at how the experience

of novelty, environmental enrichment and physical exercise can optimize gene expression, neurogenesis (brain growth) and healing.

Brent Atkinson, PhD has taken the lead in the application of neuroplasticity by developing a step-by-step therapeutic intervention that can interrupt the cycle of counter-productive emotional habits and rewire the brain for greater emotional flexibility.

Another practitioner to watch, someone you might literally have watched in *What the Bleep* is Joe Dispenza, DC who looked at how we can "reformat the brain" to help our clients break the habit of being themselves long enough to bring about effective, long-lasting change.

Energy Psychology

As we know, change is hard. Beliefs, thoughts, and behaviors often continue as if they have a life of their own...and that's why the new approaches we were just talking about in neuroscience are so cutting-edge and timely.

Techniques grounded in energy psychology are similarly effective. Combining meridian-based treatments with the most recent discoveries from neuroscience, these energy psychology approaches can initiate change. Though still controversial, they are rapid, non-invasive techniques with few side-effects.

Energy is the vital, moving force at the foundation of our existence. Energy medicine and energy psychology work directly with electromagnetic fields and the electrical signals that control the brain and other organs, impacting them with simple touching and breathing techniques.

Later, we will talk about Emotional Freedom Technique (EFT) with weight management issues. EFT, developed by Gary Craig, is an example of an energy psychology approach that successfully treats chronic pain as well as limiting beliefs, anxiety, unwanted habits, and behaviors.

There are many thinkers and teachers who have made energy psychology what it is today. Among them is Donna Eden, well known as someone who has taught these approaches to thousands of practitioners.

David Feinstein, PhD has recently published an article reviewing the research literature on energy psychology in *Psychotherapy: Theory, Research, Practice, Training*, one of the American Psychological Association's flagship clinical journals.

It's also interesting to wonder how energy psychology might be considered an application of neuroplasticity. More thinkers exploring the connections between energy psychology and neurogenesis will, without doubt, be integral to advancing new understandings in both fields.

Positive Psychology: Attitudes that Nurture

Positive Psychology is a relatively new branch of psychology that was launched by Martin Seligman, PhD, who, at the time, was president of The American Psychological Association. His argument was that rather than investing all of our time and research funds in psychopathology, we should spend some of our resources studying what makes individuals happy.

Many researchers have expanded upon this premise. Among them is Sonja Lyubomirsky, PhD, at the University of California at Riverside, who used longitudinal studies to look at the characteristics evident in happy people. She found they not only feel good, but they experience enhanced productivity and creativity, more fulfilling relationships, superior physical health, and even longer life.

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Promoting a similar approach is Robert Emmons, PhD, who looks at hope, optimism, and appreciation. Dr. Emmons reports that those who keep a consistent gratitude journal are able to raise their level of happiness over time.

Tools for Weight Management and Eating Disorders

There is no shortage of “experts” offering advice on weight loss strategies. We will highlight just a few who stand out because of the uniqueness of their contribution.

Many mental health care clinicians, including Carol Look, LCSW now see part of weight management as an emotional issue. Remember our discussion of Emotional Freedom Technique (EFT)? Look and others use EFT to treat weight loss at its root.

DesMaisons (mentioned above) offers a 7-step food plan that seems to be successful for some people in healing the underlying imbalance that creates the vulnerability for sugar addiction.

A 7-step food plan can regulate insulin, enhance serotonin production, and stabilize beta-endorphin priming.

Because it’s designed to correct sugar’s negative impact, her food plan promotes healing by regulating insulin, enhancing serotonin production, and stabilizing beta-endorphin priming.

Michelle May, MD is teaching physicians to reconsider the whole eat-repent-repeat cycle and urging them to counsel the development of “normal” eating patterns in response to hunger cues rather than using food as a substitute to satisfy other needs. Her work differentiates instinctive, restrictive, and overeating patterns to resolve food-related problems/behaviors and to build a more healthful lifestyle free of deprivation and guilt.

At this point, it can be no surprise that eating disorders, both anorexia and bulimia, can erupt out of frustration and repeated attempts to regain control. Though these are difficult disorders to treat, there are some exciting new ways to look at and potentially work with these conditions.

Anita Johnston, PhD, a clinical psychologist who specializes in women’s issues and eating disorders, brings fresh vision. Through multicultural myths, legends, and folktales, she universalizes the journey of millions of women, from pre-occupation to confrontation, from obsessing to facing their negative attitudes toward food.

Treatment of PTSD

With astounding acuity, Dr. Scaer (mentioned above) digs deep. With “stress in the face of helplessness,” Dr. Scaer presents dysfunctions that can occur in both the central and autonomic

nervous systems of traumatized patients and gives us an integrated neuropsychobiological model of various therapies to treat trauma pathology.

Victoria Follette, PhD uses Acceptance and Commitment Therapy (ACT, one of the therapies partially based upon mindfulness meditation) to heal post-traumatic stress and trauma-related problems, diminish painful feelings and chart a new course for a purposeful life.

Another approach inspired by somatic-based therapies is the Trauma Resiliency Model developed by Laurie Leitch, PhD, LCSW which helps to stabilize the nervous system in the aftermath of a traumatic experience.

It is also essential to understand attachment theory in working with people who are survivors of trauma, as well as in working with families and couples. Susan M. Johnson, EdD, at the University of Ottawa, is one of the thinkers who stands out in this area.

Psychotherapy

Before we leave this review of the tools that are most commonly used in mind/body medicine, it is important to note that psychotherapy, while generally used to impact mental health, has also been shown to have a positive effect in enhancing physical health.

Listening is the foundation of all effective practice.

And, not to be forgotten is good, old-fashioned listening. Not just for psychotherapy, listening is the very footing of respect and rapport. Easy to say, but so often hard to do, listening is the foundation of all effective practice.

Beyond that, Eastern practices such as yoga, Tai Chi and Qigong have been found to be associated with positive health outcomes.

As you can see, many conditions are amenable to mind/body medicine interventions, and thus, many more practitioners are needed who are trained in their applications and treatments.

Who practices mind/body medicine?

Practitioners in this specialty come from a variety of backgrounds. Yes, many of them are from mental health – licensed psychologists, social workers, psychotherapists, counselors, and marriage and family counselors. But almost as many more are from medicine – physicians, nurses, physical therapists and also occupational therapists.

Let me tell you a story. Just this winter, I was at a business conference in Los Angeles, and I met another attendee who was a nurse practitioner. Now I hadn't expected to meet anyone else in healthcare at this conference, and I asked her why she was there.

She told me that she had left direct patient care because she recognized what she considered to be a futile pattern. Patients would present with a problem, for which she would eventually give a prescription. Two weeks or so later, they'd be back, needing another medication, this time to counteract the side-effects of the first pharmaceutical intervention she had given.

Thankfully, most physicians and nurses do not leave practice, but they do recognize the irony of this pattern.

What is important to note is that most mind/body medicine interventions do not have side effects, which is all the more reason to develop expertise in this area.

Why does NICABM predict the need for more practitioners within 10 years?

The wave of baby boomers “coming of retirement age” has already begun, and the numbers will only be increasing. Retirement is a time when most people begin to experience more aches and pains, and when the incidence of heart disease, hypertension, and other medical concerns become more frequent and serious.

Most interventions in mind/body medicine do not have side effects.

Beyond that, it's an issue of stress. As the pace of daily life increases and our resolve to improve air quality hangs in the balance, the world is likely to become more stressful.

How do you get started?

Practitioners who are new to this approach to medicine or psychotherapy often wonder where they could start to build their expertise. Ideally, you would want to concentrate on four broad areas.

One, you will want to make sure that you have a thorough understanding of the theoretical concepts at the foundation of mind/body medicine, such as psychoneuroimmunology and neuroplasticity. We suggest adding to that, inflammation and insulin resistance as well.

Two, get a basic understanding of at least some of the variety of conditions that patients most often present with – digestive issues, inflammatory disorders, chronic pain, infectious diseases,

sugar addiction and insulin resistance, cardiac disease, cancer and the surrounding issues that accompany cancer. These are just some of the conditions for which you might play a vital role on a treatment team.

Three, develop expertise in using one or more of the tools. Mindfulness meditation, hypnosis, energy psychology, guided imagery, and Eastern practices such as Qigong are some we recommend you learn first. While we suggest mastery of at least one of them, more is better, simply because it expands your skills and expertise.

Four, find ways to immerse yourself in the practical aspects of working with these issues. Subscribe to journals, join a forum or list serv, take a class, attend a seminar or conference. But don't go it alone – it will take you much longer and it's too easy to wander off in less productive or false starts.

Continuing education is key. Of course that is true in all specialties, but it is particularly crucial in mind/body medicine. Not only because you can learn from experts, but also because you will have the support and collaboration of other practitioners.

Meeting and talking with other professionals who are working with these issues is one of the most important steps you can take. This gives you a chance to find out what is working and what is not. And, it will help you develop a network of practitioners to call upon when questions arise.

The Psychology of Health, Immunity, and Disease Conference is the oldest and most prestigious gathering of practitioners in mind/body medicine. Thousands of health and mental health practitioners have attended this annual meeting, held every December in Hilton Head, SC. (The conference this year will be December 8 – 14, 2008.)

If you are a licensed health or mental health provider, this is the quickest and most reliable way you can get up-to-speed with all of the powerful tools that have been developed. Just as important, you can stay up-to-date (the field is changing fast) on the latest theoretical perspectives.

This conference is the oldest and most prestigious gathering of practitioners in mind/body medicine.

Several of the leading thinkers mentioned in this update will be presenting at this year's conference.

Credit will be available for physicians, nurses, psychologists, social workers, psychotherapists, counselors, and marriage and family counselors. (Full details will be in the conference brochure and posted on the conference website.)

As a final note, NICABM will be offering a series of free teleseminars to provide the professional community with more information on the ideas presented in this update. Look for more details in emails to come.

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