

# Diagnosing and Treating Emotional Factors in Mind-Body Symptoms

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**Dr. Angela Cooper**

**Clinical Psychologist & Assistant Professor**

**Dalhousie University, Halifax, Canada**

# Outline

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- Key theories of emotion and symptom formation
- 3 discharge pathways of unconscious anxiety and symptoms
- The central role of guilt in the development of mind-body symptoms
- Treatment Model – Intensive Short-term Dynamic Psychotherapy
- Clinical videos: assessment and treatment phases
- Brief exploration of one's own emotional processes to build awareness

# Introductions

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- Who, What, Why
- <https://www.youtube.com/watch?v=-4EDhdAHrOg>



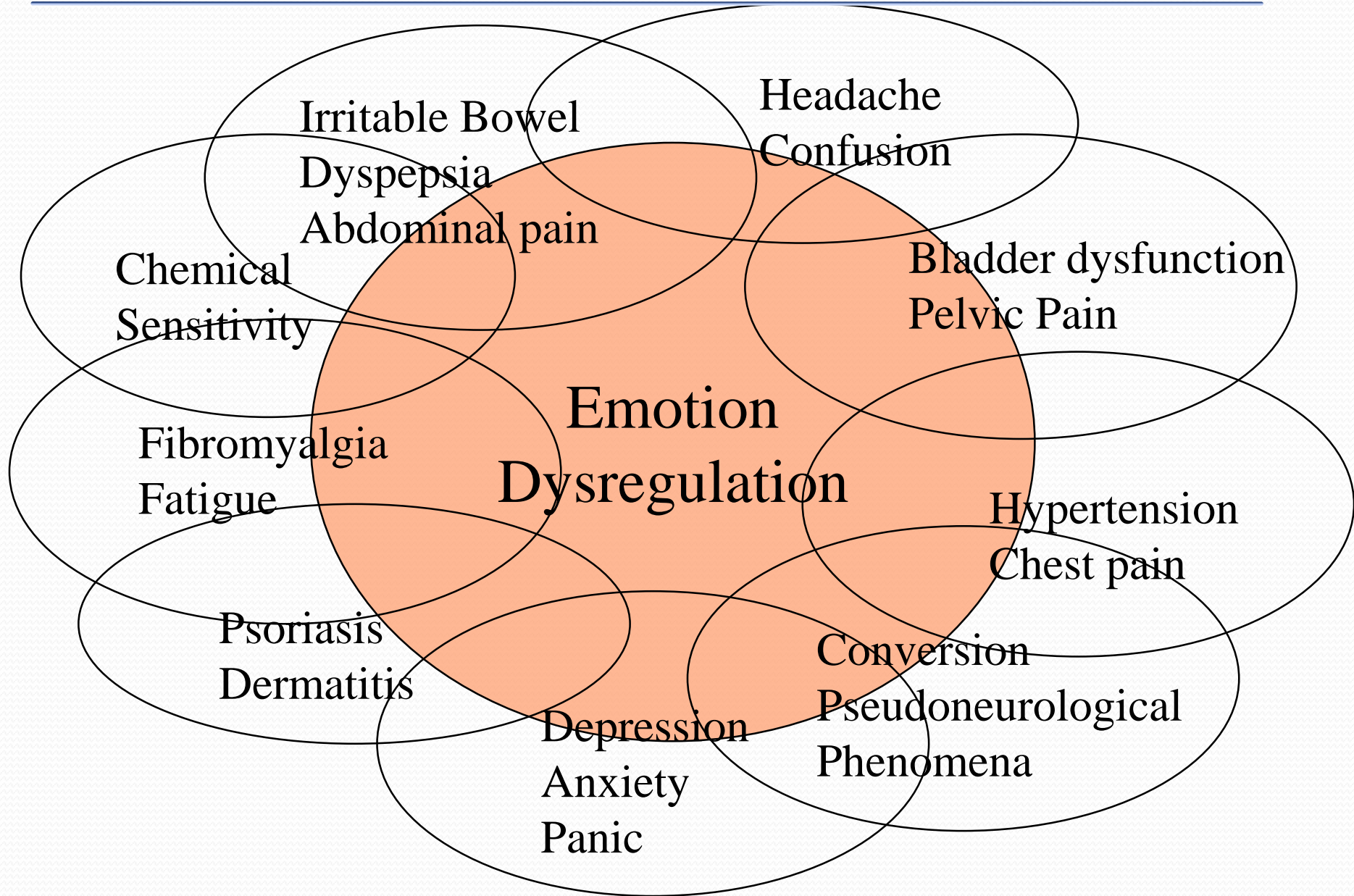
# How do Emotions Affect Health?

# Key Ideas about Emotions

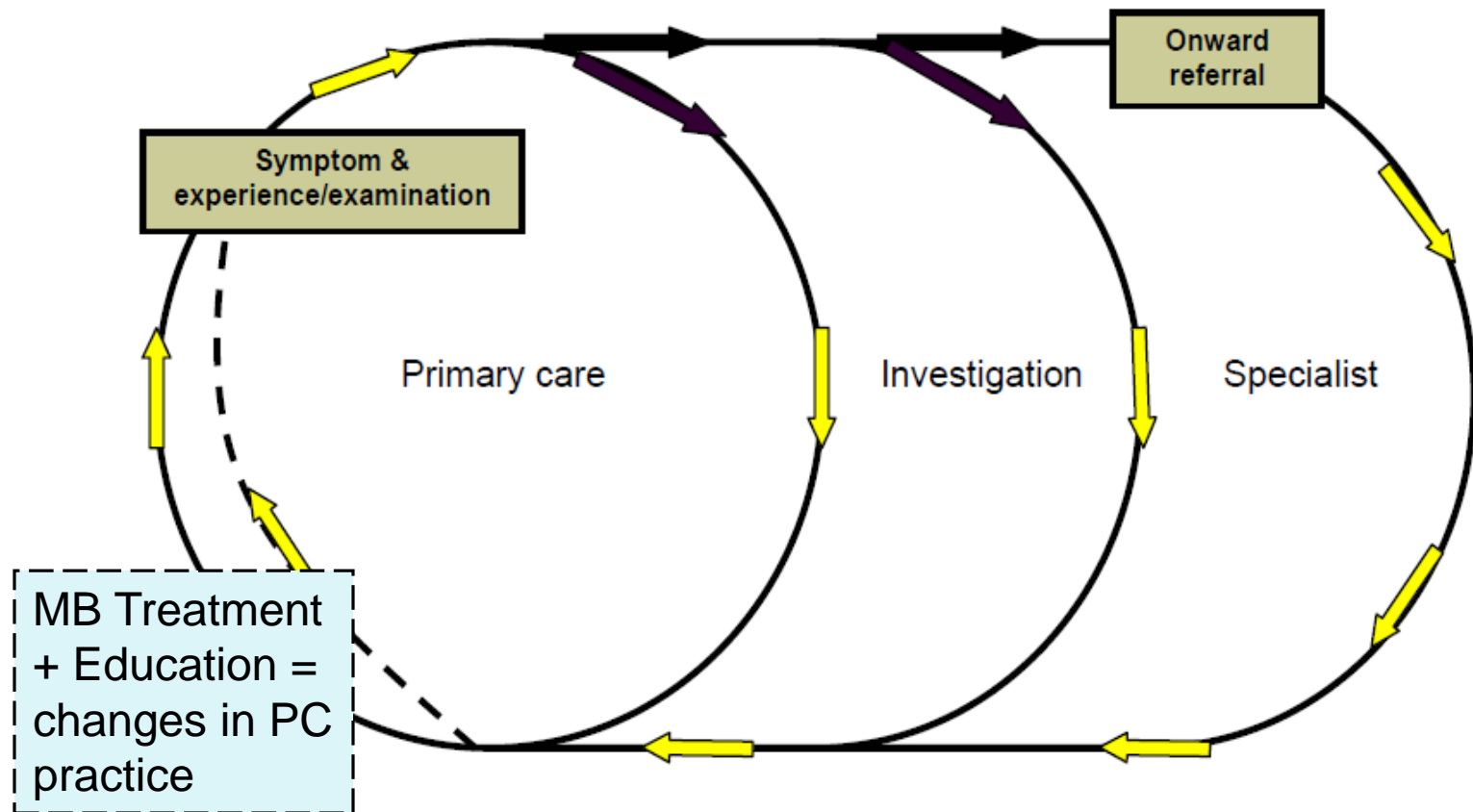
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- Emotions are *pre-conscious* neurobiological events that serve to guide behavior from birth. Without access to our emotions we don't know who we are or what we need.  
**They are our compass for life**
- If our emotions are blocked, punished or ignored regularly in early development (e.g ACE), our bodies begin to automatically produce anxiety and behaviors to keep the feelings locked down. This comprises our emotional/physical growth and functioning
- If our bodies chronically repress feelings/needs then overtime this leads to altered autonomic, endocrine and immune system activity related to the development of physical symptoms – it affects every bodily system!

# Common Factor of Emotion Dysregulation



# Costly Loop



A pictorial representation of the loop that people with MUS can pass around

# Emotions and Wellbeing

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- Research evidence suggests that the free and unencumbered experience of emotion is vital for physical, as well as psychological, health (Pennebaker, 1990).
- <https://www.youtube.com/watch?v=4o-VplYrqBs>
- We are wired for emotion and wired for attachment. When we start blocking our emotions regularly, bad things start to happen in the body.
- *Simpson's video*
- Patients who convert their feelings of pain, grief, and anger about life events into anxiety and depression double their risk of disease, including asthma, arthritis, headaches, ulcers, and heart disease (Fleshner et al., 1993; Friedman & Boothby-Kewley, 1987)
- Inhibition of the emotions evoked by upsetting life events leads to stress and impaired immune functioning, whereas free expression of these feelings leads to a decrease in physiological reactivity and improved immune functioning (Malan & Coughlin Della Selva, 2006).



# Precipitating Events

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Local case evaluation revealed:

- 35% - Death or Illness of a loved one
- 30% - 'Other' Stressful event e.g moving/having children/work conflict/marriage
- 18% - Accident or Illness of self
- 12% - Relationship Breakdown

# The Scale & Cost of the Problem

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## **Royal College of General Practitioners (2011)**

- Associated with 20-50% greater costs
- Associated with 30% more hospitalisation.
- Patients frequently experience unnecessary referrals to medical specialities, yet high health-care utilisation is actually associated with poorer outcomes for this group (Richardson & Engel, 2000)
- In the UK, the annual cost estimate for MBS was £18billion or \$CAD 29 billion (Edwards et al., 2010).
- This includes: hospital admissions, investigations, treatment, lost productivity, unemployment

# Unexplained Symptoms: Specialty Referrals (Nimnuan et al, 2001)

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<b>Specialty</b>	<b>% with 1 or more unexplained symptoms</b>
<b>Gynecology</b>	66
<b>Neurology</b>	62
<b>Gastroenterology</b>	58
<b>Chest Clinic</b>	51
<b>Rheumatology</b>	45
<b>Total</b>	52



BOND  
With  
Parents  
(LOVE)

Trauma

PAIN  
FEAR



BOND  
With  
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Trauma

PAIN  
FEAR

Reactive Anger, Guilt  
about the Anger & Grief

This results in problems handling conflicts/anger,  
relational problems, ill health and life stressors



BOND  
With  
Parents

Trauma

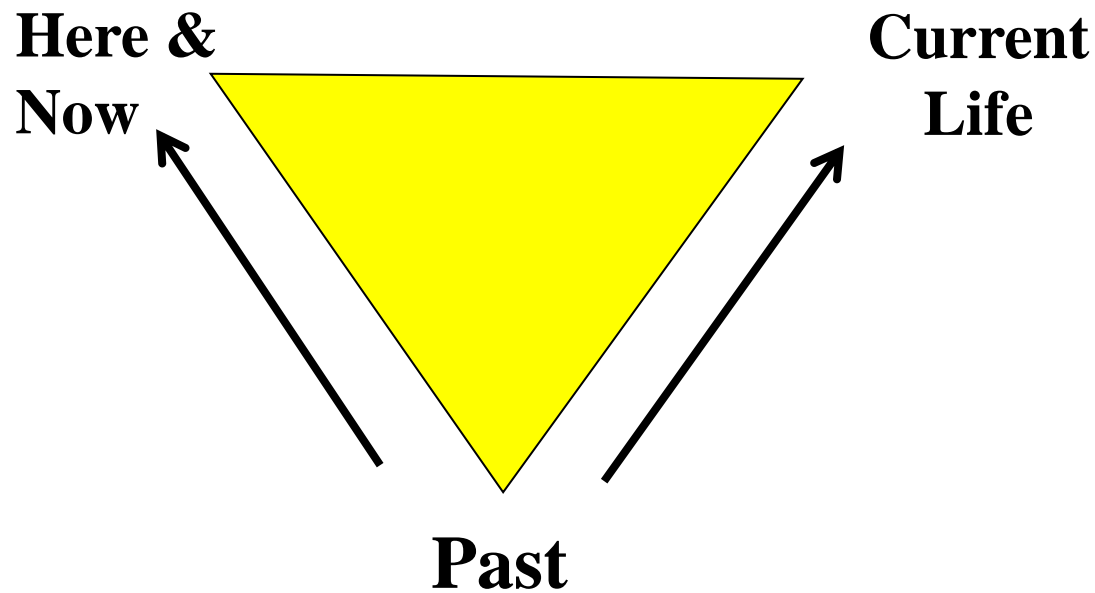
PAIN  
FEAR

Anger, Guilt, Grief

MBS

# Theory of MBS development

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**Triangle of Person**

Emotions that provoke threat or abandonment from the care-giver are not regulated and come to be associated with danger, triggering anxiety and defense mechanisms aimed at affect dissociation instead of affect regulation

Neborsky, 2010



# Somatic Pathways of Emotions

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- How do we feel emotions?
- Rage: upward from feet to ears to arms: moves out anxiety
- Guilt: content is remorse, solid waves, chest/neck pain, can't talk
- Grief: content is loss, softer, waves: not physical pain
- Love: warmth in chest, urge to embrace

# Anxiety Pathways & Symptoms\*

## Striated Muscles (Somatic NS)

- Hand clenching
- Tension in arms, neck, shoulders, head
- Sighing respiration
- Fidgeting, tension in legs, feet and abdomen

- Rheumatology
- Orthopedics
- General Surgery

## Smooth Muscles (Sympathetic NS)

- Bladder urgency
- IBS and diarrhoea
- Migraines
- Asthma
- Pain

- GI
- Respiratory
- CV
- Urology

## Cognitive-Perceptual Disruption (Parasympathetic)

- Drifting, dissociation, confusion
- Visual blurring or narrowing of visual field
- Fainting, freezing, fugue state
- Hallucinations

- Neurology
- Psychiatry

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# Bringing it Together

❖ Life Stressors e.g. loss/divorce/transition trigger old unprocessed emotions e.g. pain, rage, guilt, grief

Avoided emotions lead to somatization, self destructive behaviors, and excess social and health care expense.

Emotional factors can be directly diagnosed

Identifying and experiencing avoided emotions can reverse these cycles



# Intensive Short-Term Dynamic Psychotherapy (ISTDP)

# What is ISTDP?

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- Integrated model with emphasis on building emotional capacities and handling the spectrum of treatment obstructing behaviours (resistance)
- The ultimate objective being to heal attachment trauma through direct experience of unprocessed feelings.
- A sophisticated form of (internal) Exposure + Response Prevention
- Has two main methods, a standard approach and a graded approach (tailored based on response to intervention not diagnosis or hx)

## 2 Main Clinical Patterns

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- 1: Patient becomes tense and detaches from therapist, and uses behavioral defenses
- 2: Patient loses muscle tone and goes flat
  - → depressive, smooth muscle anxiety, conversion
  - → cognitive disruption, sensory conversion, projection (fear)

# Benefits of Experiencing Emotions, Especially GUILT!

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- Experiencing emotions including anger and guilt (mechanism of internalization) overrides unconscious anxiety about hurting those we love (our deepest fear)
- This can permanently change brain operations so that the frontal inhibitory forces can relax (e.g. worrying)
- Guilt and the need to self sacrifice and self punish (self-criticism/sabotage) are diminished or removed which improves self-care (compassion)
- ANS is reset: BP, muscle tone, bowel etc normalize

# Guilt: The Psychic Glue

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- Guilt integrates all complex emotions – when love can be consciously experienced at the same time as anger
- Positive feelings brings up the anger then guilt about it in milliseconds as if the person already did something wrong!
- IF guilt can be held consciously and the person can see that they are still a good person, even for a few seconds it brings a wealth of benefits:
  - Anxiety tolerance increases
  - The need to suffer decreases
  - Empathy for self and forgiveness for others builds which helps build emotional strength



# Sympathy Symptoms

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1. Unprocessed guilt (Love + Anger):
  - Can cause the same symptoms as what the person unconsciously wanted to induce in another:
  - Headaches = impulse to smash heads,
  - Choking symptoms = impulse to strangle,
  - Chest pain= Chest damage
- Here, the pain/symptoms both express and defends against the real feelings/impulses
- Greater than 1000 videotape case examples

# Response to Intervention

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- Similar to concept of palpation – except a psychological/emotional form.
- Going to use what we know about the body's physiology, palpate and observe i.e.
  - Activate the emotional system,
  - Monitor how the body responds,
  - Differentiate between feelings, anxiety and defence
  - See if their response is consistent with a MBS presentation or not.
- The more someone can feel true feelings, the more they can heal their symptoms

# Clinical Video Examples

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- Assessment phase
- Treatment Phase

# How effective is ISTDP?

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- Over 40 published outcome and process studies
- Meta-analyses: Large persistent effects in mixed disorders, somatic disorders and personality disorders (Abbass et al, 2013, Town and Driessen, 2013)
- 15+ studies support cost effectiveness (Abbass and Katzman, 2013)

*Treatments with focus on Emotional Experiencing found to be more effective than Insight focused models (ES: 0.60 to 1.31)*



# Your Own Emotions

# Get to Know your own Triangles

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- If you don't know what you are feeling or tend to avoid emotions, you too are in danger of developing MBS, depression, unhealthy behaviors etc.
- Much of our own stuff can get in the way of optimal functioning – yet we don't like to admit it!
- Build your own self-reflective capacity – think and link
- Increase your work/life enjoyment – by avoiding the build up of anger, guilt, worry, frustration

# Experiential Exercise\*

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1. Bring a person to mind who is mobilising strong emotions within you – patient/colleague/family/friend
2. Pay attention to your body – how does it immediately respond? Feelings/anxiety/defence/symptoms?
3. See if you can allow the immediate feelings to come up through your body and in your mind - visualize how the feelings want to express themselves with that person.
4. Do you have any secondary feelings towards that person once you have expressed the initial feelings?
5. Now, look into the eyes of the person in the image, what do they look like? How do you feel towards them now? Does it remind you of anything in your past? What information does this provide you?



# Questions.



# Contact Details

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- Dr Angela Cooper
- [www.drcooper1.com](http://www.drcooper1.com)
  - [drcooper1@hotmail.com](mailto:drcooper1@hotmail.com)
  - @drcooper1 - Twitter
  - @emotihealth – Instagram