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**“AND THE GREATEST OF THESE IS LOVE”:
Impressive results of non-traditional healing methods in treating Reflex
Sympathetic Dystrophy/Complex Regional Pain Syndrome (RSD/CRPS)**

Nancy Hopps, LMT, CSH

Abstract

This article is a summary of my work with a young woman, “Marissa,” who was diagnosed with Reflex Sympathetic Dystrophy, also known as Complex Regional Pain Syndrome (RSD/CRPS). After several months of unsuccessful nerve blocks and other allopathic approaches, the only western medical treatment options presented to her were placing a morphine pump in her back, or performing a sympathectomy (severing of the sympathetic nervous system to the affected limb.) Both are considered palliative measures, not cures. Fortunately, at that point she was referred to a physician who diagnosed Marissa’s disease as being psychosomatic in origin. Shortly thereafter, I began working with her. Because Marissa’s symptoms were so severe, the medical testing and previous treatments so extensive, and the cure so dramatic, hers is one of the most profound examples of mindbody healing I have witnessed in many years of practice. Most notable, the fact that the symptoms were such a clear metaphoric reflection of the underlying emotional issues makes this case study a wonderful example of the synergistic, (and creative!) workings of the mindbody continuum. Simply put, as the underlying emotional issues were resolved, the amazingly congruent physical symptoms also disappeared. We used many techniques and therapeutic approaches, but as is evidenced below, “the greatest of these was Love.”

Key Words: Reflex Sympathetic Dystrophy, RSD, Healing Power of Love, Guided Imagery for Healing, Healing Affirmations, Relaxation and Healing.

Introduction

My work with private clients over more than 25 years has included a wide range of mindbody issues, from stress management and performance anxiety, to anorexia, RSD, chronic pain, cancer, and clinical depression, as well as spiritual mentoring and life transitions coaching.

Of the many healing methods I use with clients, Love is the underlying and by far the most potent agent. Among the modalities I use are: deep relaxation/breathing techniques, a variety of traditional

psychological counseling approaches, interactive guided imagery, hypnotherapy, cognitive reprogramming, neuro-linguistic programming, therapeutic massage, acupressure, reflexology, energy healing, sound healing, listening, caring and prayer. It must be noted, however, that even these “labels” are inadequate to describe a highly intuitive and holistic process that is unique to each individual person and situation. Primarily, I see my role as that of a Vehicle for a Higher Power, call it what you will. I consider myself a guide to help each individual connect with an innate wisdom and healing ability that each of us possesses. I simply help people remember Who they really are, helping them shift from fear to love, from victim to powerful creator, from anger and guilt to compassion and forgiveness. I help them reframe whatever challenge they may be facing as an opportunity for growth, learning and healing. Most importantly, I *love* them, offering unconditional acceptance, and I help them rediscover how to love themselves. I have found this combined approach effective no matter what the presenting problem may be – from emotional fears, phobias or grief, to chronic migraines, bipolar disorder or cancer.

Two of my most dramatic “cases” – though to me they are first and foremost lovely young women, not merely “cases” – were both suffering from the same condition known as reflex sympathetic dystrophy or RSD (also known as complex regional pain syndrome, or CRPS.) RSD is a neurological disorder for which there is no known organic cause, and no generally accepted treatment.

The National Institute of Neurological Disorders and Stroke defines RSD/CRPS thus: “Complex regional pain syndrome (CRPS) is a chronic pain condition. The key symptom of CRPS is continuous, intense pain out of proportion to the severity of the injury, which gets worse rather than better over time. CRPS most often affects one of the arms, legs, hands, or feet. Often the pain spreads to include the entire arm or leg. Typical features include dramatic changes in the color and temperature of the skin over the affected limb or body part, accompanied by intense burning pain, skin sensitivity, sweating, and swelling. Doctors aren’t sure what causes CRPS.”

Both young women I saw were severely symptomatic; one was on crutches. Both were under the care of esteemed neurologist, Dr. Jose Ochoa, at that time head of the Neuromuscular Center at Good Samaritan Hospital in Portland, Oregon (now head of the Oregon Nerve Center at Good Samaritan Hospital.). After batteries of tests, they had exhausted all allopathic approaches available to them, and had found no relief. I’m thrilled to report that within a few short months, in one case, and a few *weeks*, in the other, of working with them, their symptoms were alleviated, and they were considered “cured.”

What follows is a brief synopsis of the course of treatment I used with “Marissa,” the first, and most highly symptomatic young woman I worked with. The basic therapeutic approach, (and what proved to be the major underlying emotional component of the dis-ease), was the same in both cases.

As stated, given that in both cases, most notably Marissa’s, the symptoms were so severe, the medical testing and previous treatments so extensive, and the cure so dramatic, hers is one of the most profound examples of mindbody healing I have witnessed in many years of practice. Most notable, the fact that the symptoms were such a clear metaphoric reflection of the underlying emotional issues makes this case study a wonderful example of the synergistic, (and creative!) workings of the mindbody continuum.

Note: I prefer to refer to the mindbody system as a “continuum” rather than the more common phrase, mind-body “connection,” because it more clearly describes what I believe is its *inseparable* nature – the “body” and the “mind” are not independent systems that are merely *connected*, but as quantum physics is definitively proving, the mindbody (or bodymind!) is literally one indivisible, elegant, still-awesomely-mysterious, interactive entity.

Simply put, as the underlying emotional issues were resolved, the amazingly congruent physical symptoms also disappeared.

Stories like the one that follows prove why this is such an important concept in healing. We are just beginning to learn...

Case Study

Presenting problems

Marissa was an 18 year old senior in high school. She was attractive, intelligent, strong-willed...and on crutches. In October of 1992, she'd been kicked in the shin during a Tae Kwon Do class. Over the next several weeks, the pain in her shin grew progressively worse, until her lower limbs became so acutely sensitive to touch that even wearing clothes was at times excruciatingly painful. Her legs were black and blue due to extreme swelling. She had loss of sensation in both feet. She had been to see a number of specialists, none of whom could uncover any neurological or other physical disorders. Reflex Sympathetic Dystrophy was the medical diagnosis that was ultimately given, which covers an array of neurological symptoms (eg - extreme sensitivity, pain, swelling, numbness, temperature change in given limbs) for which there is no known organic cause. Basically, the doctors were throwing up their hands and saying, "It's all in your head."

But it *wasn't* "all in her head." Her feet were so swollen she couldn't walk on them!

By the end of November, she had the whole array of full blown symptoms. Physical therapy, several unsuccessful nerve blocks, and many other treatments and specialists later, she was no better. The pain in her feet was so severe that if she tried to walk more than across the room she would get hot flashes and nearly pass out. Harsh drugs of questionable effectiveness and/or a sympathectomy (surgical severing of the sympathetic nervous system to the affected limbs) were the only Western medical options left.

Fortunately for Marissa, she was referred to Dr. Jose Ochoa, who had been doing extensive research regarding the mindbody connection in RSD cases in Portland, Oregon. He suggested Marissa's symptoms were psychosomatic in origin.

Understandably, she (and her parents) were growing increasingly distraught and desperate. Shortly after seeing Dr. Ochoa, Marissa's mother, a casual friend, told me of Marissa's situation. She knew I did "some kind of healing stuff," and told me of Marissa's situation, asking if I had any suggestions. I told her I'd certainly be happy to meet with her. Although I'd been a healing practitioner for nearly ten years at that point, this was the most extreme case I'd been presented with to date. So we *all* began with a "Well, who knows, but what do we have to lose?" attitude.

Early stages of intervention

We first met in March of 1993. Marissa came in for her first session on crutches and in a great deal of pain. It was evident that Marissa's approach to the world was a macho-type bravado, which, as we talked, quickly revealed a very vulnerable little girl aching (interesting choice of words!) to be seen, heard, and taken seriously. Just before the end of the first session, she shared with me rather matter-of-factly that she had been sexually abused repeatedly by her older brother between the ages of 10 and 13. It was clear from the beginning that Marissa truly *wanted* to heal.

We began to build a foundation of trust between the two of us, but also a foundation of trust in herself, and in life in general. Gradually, during our weekly sessions, Marissa began to let her guard down. She began to learn to breathe more deeply, which in turn helped relax and release deeply stored tension, trauma and, most importantly, memories. Using interactive guided imagery, hypnosis and Neuro-linguistic Programming (NLP), I guided her in listening to the wisdom of her body – asking the sensations (i.e. - pain) to reveal the source of the its dis-ease. Step by step, as she was ready, with my assistance, her subconscious wisdom guided us back to several past traumatic events, primarily the ones of sexual abuse, and subsequent denial by her mother of its occurrence. These were events she had never disclosed to anyone (save her disbelieving mother). Hence, the trauma had been stored in her body and her psyche for over 10 years, until finally manifesting as a physical dis-ease. As we listened to her body's wisdom, it was revealed that she had subconsciously created a built-in armor that protected her from having to deal with her understandable fear of intimacy, sexual or otherwise, and basically gave a clear message to the world: "Don't touch me!"

This may sound like a rather obvious and "heady" correlation, one that could easily be unearthed in traditional psychotherapy, but what to me is most striking is that the correlation was *discovered and experienced by Marissa*, as her own inner wisdom guided the process. Of course I *facilitated* the process, but it was not simply a matter of a left-brain, cognitive psychoanalysis that led to these life-changing insights. Instead, it was a matter of helping her establish a foundation of safety and trust that then allowed her to open to releasing this long-held emotional pain, which was now crying out as physical pain. This required her being able and willing to shift from a victim consciousness to one of self-empowerment, learning to let go of rage and blame and replace it with compassion and higher understanding. She was ultimately able to replace fear with love.

Again, this is not a new or ground-breaking approach to healing, but what always astounds me is the rapidity and the relative ease with which these profound shifts can occur when the guidance comes primarily from *within the client*.

The client/therapist rapport was certainly a necessary element, but of even more importance was the rapport Marissa began establishing with herself. My experience has shown that clients will only open to remembering, embracing and releasing old, painful memories when they have a strong enough sense of self to do so. They must have confidence in their ability to be creators, not victims. They must believe they have the skills and strength to direct their own course of action and response, and know in their hearts that they will not be sucked into a black hole of intense emotional pain as past issues are brought up into the light of healing. In my experience, it is not even always necessary to revisit a specific event. Healing often occurs on an energetic level. Hence, if the intention to heal is clear, it may not always be necessary to "re-live" each specific event, as is customary in traditional therapy. Rather, a whole series of past traumas can be healed in one energetic transmutation.

By learning to look at all life as an energetic continuum, and understand how emotion is simply "energy in motion," it is possible to allow any blocked emotional energy to be released, while maintaining a sense of Self that is much larger than any transitory emotional tidal wave. Hence, the client is able to move swiftly from denial, fear, blame, rage, and guilt, to acceptance, self-responsibility, compassion, forgiveness and love.

As Einstein said, "A problem cannot be solved from the same consciousness level in which it was created." By raising the awareness level, the sense of Self becomes large enough to contain it all. The blocked emotional energy is freed to move through and be released and transmuted, with the person who is doing the clearing remaining centered and not being "sucked into it."

In Marissa's case, she was a self-proclaimed "recovering Catholic," so we addressed her religious and spiritual beliefs, and she gradually revised her image of God from one who had forsaken her for her

sins, into one of a loving, compassionate, forgiving and unconditionally accepting Presence. The Christ Presence, for her, became a source of comfort. (I often work with a healing Light image, allowing the client's own belief system to customize the terminology used. For Marissa, it was Christ Presence; for someone else, it may be simply Higher Power, or Divine Mother, or...I personally don't think Spirit cares *what* you call it!)

Marissa and I met weekly initially, then bi-weekly or so over the remaining seven month period, with a few follow-up visits. Although we used *many* approaches, obviously too numerous and varied to include in their entirety in this article, a few session notes stand out as important elements and/or turning points of her healing journey:

Highlights of Therapy

3/17/93: Rapport, trust-building...Near end of session, Marissa shared a matter-of-fact account of sexual abuse, and the response from mom that, in essence, "It was your fault." We began gentle, interactive guided imagery work, starting with breathing techniques (hers had been quite shallow), then imagining herself completely healthy, vibrant, joyfully living her life in rich, specific detail. Affirmations of safety were included. (e.g. "It's safe for me to express my feelings, to speak my truth...") Healing begins, although she expresses deep skepticism re: imagery and affirmation... "not logical"...Very guarded, but good start at building a foundation upon which healing can take place. I assigned Bernie Siegel's *Love Medicine and Miracles*, for reading prior to next session, to help educate her in mindbody healing and learn about others' successes with these approaches.

3/31/93 – Discussed pros and cons of illness – what are the benefits she's deriving, and how can these be better met? Also, the difference between personal responsibility and "new age guilt" – the "if I create my own reality, then I really blew it and this is all my fault" syndrome. Very enlightening for her.

4/7/93 – She was advised by Dr. Ochoa to stop using crutches. "It's even worse when I don't have any crutches, because then I don't have *any* kind of support." Felt duty to stay living at home to support her mom (emotionally). "I don't know if they know to what extent my pain really goes. We're talking REALLY severe pain."

Imagery: Pain control/clearing circuitry: Cold, playing in snow. Dangle feet in warm bathtub, immerse whole body. Child self enters - help into tub. Play with toys. Marissa of today to child self: "I'm here with you, I want to give you a chance to express and heal...you're safe. Embrace child into adult self. ("Child self smiling at me".....felt comfortable and happy.)

4/16/93 – Eight days ago...intentional overdose of meds...stomach pumped, charcoal, in ER. Told her of course I was surprised, but in a way, I *wasn't* surprised...basically, that "I know you more deeply than you think I do, and I see an incredible beauty, and strength... and a lot of pain"... No judgment or blame, just love and compassion.

"I've had my life all planned out since I was six years old, and everything was falling apart all of a sudden. "I'm not willing to lower my standards." (Dreams "falling apart", 18th birthday depression, thwarted plans to leave home - catalysts for suicide attempt). Proud of how she'd planned it several days ahead of time, and hadn't leaked it to anyone. Proudly reported how "I put on my nice little act, and he bought it," referring to her convincing the doctor not to send her to the psyche unit. I asked her if she's been telling me the truth. She said, "Yeah, usually. I thought after I took the pills that you were the only one who probably wouldn't be surprised."

Told her she's not fooling me or anyone as much as she thought. Discussed her dichotomy of in-charge, capable, mature young woman and vulnerable, scared little girl. "Hard for me to let emotions out." Made commitment of truthfulness and integrity, and choice to keep coming. (Note: conferred with docs... Our consensus: "no immediate danger" Back on crutches.)

4/23/93 – Looked at how life had been planned out: What was the main thing that fell apart? "I had to sell my horse. (Moto)"

How did you feel? "I don't know" If you had to guess – Sad, angry, guilty...all three?

Tears...first tears!. Had her visualize herself there with Moto, and verbalize her feelings to him.

Powerful emotion, choking back, but beginning to release. Had her repeat after me:

I am a wonderful, loving person.

I didn't do anything wrong or bad. (really choked on this one)

I did the best I know how to do.

It's okay to feel the depth of my love and the depth of my pain.

I know Moto forgives me and I forgive myself.

(Moto healing prepares foundation for sexual abuse healing. Heart connection is activated! Work w/affirmations will allow further opening/safety.)

Commitment to listen to *Relaxation/Affirmation Techniques* tape daily...and incorporate above affirmations and forgiving visualization of Moto.

4/30/93 – Introduced my first 4 “Bottom Line Spiritual Truth” Affirmations:

- *I choose to make my love (desire or intention) stronger than my fear.*
- *I can only operate in accordance with the beliefs I hold about myself.*
- *Whatever I think and hold in consciousness as being so manifests in my body and affairs. (Therefore...)*
- *I stand guard continually at the door of my mind and let in only those thoughts and feelings I wish to see manifest.*

Did five minutes of watching thoughts (mindfulness meditation) – then, visualized receptacles for past/present/future thoughts – witnessing, placing thoughts in approp. receptacle for approx. five min. (hers were scales...almost all thoughts were in past.)

Guided imagery: guiding within to place of peace... she interrupts with: “not peaceful...dark, cold place” in stomach]...later, with suggestion of being surrounded by bubble and drifting up, she said she felt out of control and broke out of bubble and shriveled up into a crusty image and floated around. “Felt kind of dead.” Talk of how it's okay that she's not able to find a place of peace within right now. Trust it will come. Trust the process. Lots of affirmation of the good work she's doing. More in-depth discussion of how “reprogramming” works. She's beginning to grok it.

Assigned: continue using Relaxation/Aff. Tape and commit “Bottom Liners” to memory.

5/7/93 – No longer seeing psychiatrist- She saw him four times after overdose – she was happy to be done – their rapport was not good. Did “Values” exercise – what she's moving toward/away from (pain/pleasure links)

Viz of End of Life Celebration. While still in deeply relaxed state, brainstormed “do/have/be/experience” life goals, then wrote them. Integrated values and goals. Time-lined and prioritized. (It was great to see M's enthusiasm as she reconnects with her passions.)

5/14/93 – Continued talk of balance and self-care along with passion to achieve/change the world. One step at a time, allowing goals to change as life changes, while keeping her innate gifts, passions and goals aligned. Did more specific plan of action goal sheet. - “To get enough HS credits so only have to take one summer school credit.” (University in fall.)

Integrated values and affirmations w/ her goals.

Introduced examples, ways to identify, clarify “gross distortions of negative thinking.”

Assigned: Keep journal of distortions of negative thoughts.(eg – over-generalizing, personalizing, either/or thinking, etc.)

5/21/93 – Reviewed End of Life Viz from 5/7: “Small, formal gathering – I used my time wisely, created a house that took in runaways; health clinic for underprivileged; speaker all over US for health care reform; child welfare issues.” (Future associates were there.)

e.g.'s from last week's gross distortions journal:

- Drs care more about \$ than patients.
- Humans think they're superior to everything else.
- I'm having a coughing fit in class – they must think I have some sort of terminal disease.
- Medications never work on me.
- I always look fat in pictures.
- I always look fat in bathing suits.
- Either I get to room with Lila, or I won't move out at all.
- Dr. V said nobody wants to deal w/ me, so Dr. Ochoa won't want to see me.

Spoke of: Asking good questions to “access files” in subconscious (eg: Instead of asking “What's wrong with me?” “Why am I so disorganized?, etc”, ask, eg – “ What can I do to help my recovery? How can I use my time most efficiently? What fun things do I have planned?)

Brief intro talk of bodymind connection w/ allergies – she's slightly symptomatic – itchy eyes, sneezing, fatigued – basic histamine overreaction– diet, exercise, viz, world safe, not overreacting, etc.

Then, “Imagine something you really want to do” (“Skip down sidewalk!”):

Had her ...

HOPE vs EXPECT

TRY vs INTEND ...to skip down sidewalkshe really felt the difference. Talk of how that applies to her healing, power of thoughts/images/emotions, etc.

Hope often implies fear (hope to, but afraid I really won't...) She got it - empowered by idea of expectation and intention of healing! Yea!! Really seeing her ready to reclaim her power.

(Note: she'd done her assignment of viz and creating affirmations from Plan of Action Goalsheet really well.

Also – she'd seen Dr. Ochoa on Tues. He hugged, said “doing really well”...offered to treat for free, and write letters to Dr. V and R voicing his opinions regarding her healing and their treatment. Yea!!) She looked great today – smiling, radiant...happy! Can see her confidence growing weekly. Physical healing (secondary in therapy focus, after emotional healing) following suit!

I wrote letter of thanks and hooray for you to Dr. Ochoa, affirming how important his caring attitude had been for Marissa.)

He called in response. See below for Dr. Ochoa's chart notes he later shared with me.

(I was out of town...hence time gap....)

6/15/93 – Marissa graduated on Saturday. Is getting a car, and a job.
We did gratefulness viz on life in general, and of Ochoa and staff.

Introduced my fifth “Bottom Line Spiritual Truth”:

- Everyone, including myself, always does their best, according to their present level of awareness.

Ready now for...Introduced talk of forgiveness...forgiveness vs condoning. How forgiveness is primarily for the one who does the forgiving...but is healing for all involved.

Asked if anything/anyone came up as we talked of this? ("my brother") Agreed to intention of beginning healing process re: sexual abuse with brother.

Assigned: 4 morning questions to trigger mind set – e.g. (what am I grateful for?) Also assigned "Journal of Awareness" of thoughts, (whose voice are the negative, condemning thoughts in? Specify in present tense, Rewrite "flip side" – i.e. – create affirmation to replace it/reprogram it. (eg- You are so stupid/ I'm so stupid...flip side: I'm really smart and capable.)

6/23/93 – Did "I am/I play at being..." eye contact exercise. (e.g. – I am a daughter, I am scared, I am ashamed... I play at being a daughter, I play at being a mother...) Then had her viz each one in a little mini-scene on stage..

Of particular note:

Mother (herself, solving family disputes), sister, daughter, angry (at mom and brother), student, worker, tired, scared (10 yr old, curled up in bedroom), self-reliant (on phone w/ insurance co.), self-conscious (dressing room, mom there), hungry, ashamed (bedroom, 12 yr. old), not knowing what to say, happy (getting in new car).

Then, in theater, met male, female guides –came from wings. Child guide ran up through house.

Assigned: write descriptions of characters and guides.

F: Tall, thin w/ long thick wavy blond hair, fair skin, long loose white gauze gown, 25 yrs old. "She says she's here to lead me."

M: Blurred face – almost as if particles were totally free and refused to stay in one position, army cut blond hair. Fair, 22 or 23 yrs. old. "He's here to back me up."

Ch: Herself at 7 or 8 – "She's happy, spunky, ready to play!"

7/1/93 – Feet had still been in some mild pain, but no numbness for last month or so, but w/ stress of school, painting work with mom, etc, pain increasing, more numbness, often purple by afternoon. Good open talk of all this, then led her into deep relaxation, then...

Viz – 12 step induction to theater – same guides appeared. Imagine movie screen of time when in pain. "On couch after work." Become as point of light...enter into ankle.... "chaotic...muscles spasmodic, toes more normal...Bolts of lightning in foot, ankle...throbbing...front of legs tender, red. Left ankle worst. Most chaotic muscles, seem like they're gonna rip themselves apart... small explosions everywhere around me..."

Allow L foot to speak: "You don't care about us – you do all these sports and things and never stop to rest. (Marissa - I don't see why an injury should stop me) "They – [inner guides] want me to have more respect for my body....they say to work in a good positive way...stop feeling sorry for myself....that I complain too much about the pain." Female guide becomes referee.....strikes a bargain: "We'll lower pain level as she's learning" – lessened pain for moment as an example of good faith. All celebrated end of Marissa's role of "uncaring dictator."

Assigned: Side B (Affirmations) of Relaxation/Affirmation tape and more healing viz, and to keep records of what she does.

7/21/93 – BREAKTHRU day!!

Led into relaxation, then "Viz the soonest time you can imagine being completely healed and pain free":

October 1, in school courtyard – full sensory detailed scene (students, damp grass, birds, khaki pants, etc....on way to class) How does it feel? “It feels great knowing I can do whatever I want. Can take PE classes, Tai Kwan Do II, not having any limitations.....really nice to be free of pain...to put all energy into classes and what I want to do in my life...I’m free to do whatever I want in my life. That’s the best feeling that anyone could ever ask for.”

See self four years down the road – “in med school, feeling gratefulness, looking back and seeing perfection of path.”

...Spontaneous images of brother/mother arise.....concern for their welfare as she moves on.....

(In early sessions, had imagined RSD as “several little bench-press type weights all over my back/shoulders, weighing me down”) Now...End of Summer: “not as many, but heaviest ones still there....” Imagine Oct 1: “Loosening, hanging by threads and/or falling off”.....Move ahead to where the weights are gone: “I just gradually realize as I’m taking classes that the weights (RSD, FAMILY) are gone - a lot of same family things still going on, but I’m so happy and full of energy I don’t care - I realize they have to change themselves. Family situation still tense, but feels much more comfortable. I realize the whole world’s open to me.” (YEA, Marissa!! Seeds are planted....and are being nurtured.)

7/27/93 – Focus on being present.....outdoors.....sensory awareness.....mindfulness eating of blueberries, grapes, etc. Mindfulness meditation, full sensory awareness. Ability to just BE. Not always be achieving. OK to just be happy in moment. Profound session.

8/9/93 – Spoke of her deep love for her exotic pets. Guilt re: sick iguana. Anger at incompetence of pet store owners. Talk of guilt, blame, anger, forgiveness. Love.

8/24/93 – Lent hardcover *Illusions*, by Richard Bach. Refresher talk: love vs fear, “TIE one on,”(Thought/Image/Emotion = Manifestation) “Bottom Liners.” Viz/aff: “I remember to breathe deeply and fully. I deserve to be absolutely healthy and happy, etc. She’s fully engaged in this learning. Excited. (And exciting!)

9/1/93 – Talk of what she’s learned from this illness: Original feeling “Fix me, Dr..” Self-pity..... “got that out of my system with the overdose.” Now, self-acceptance and embracing the situation, or any situation she finds herself in. Not so rebellious. Grateful, confident, more compassionate.

Deep relaxation/Viz: to theater – I suggested “I play at being” scenes from 6/23 for review: Now, revisit one of these, or perhaps a new scene that relates to your physical situation. “I don’t know what to say.....my brother and mother are here” (in auditorium) Ask brother why he’s there – “he’s not gonna talk cuz he says ‘you hate me’.” Do you? “Part of me does” Tell him why. “Because you stole my childhood.....you stole my trust.” How does that feel? “I feel angry.... and hurt.” Brother: “I never did anything you didn’t want me to do.” M: (w/ emotion) “*I didn’t want it and you know it!*” (encouraged her to experience feeling this truth..) What does mom have to say? “She’s worried and depressed that I don’t talk. She’s scared of losing me. I’m promising her that no matter what happened in the past, or what happens in the future, I’m not going to try to kill myself.” She really wants to believe me. Part of her does. I’m frustrated, cuz I want her to believe me. I’m assuring her she can’t lose me, cuz I’m healing with *her*, too.”

(HUGE step!). Imagine, feel all surrounded in Light. Affirmed OK-ness to feel full range of emotions as part of the healing process. OK to *feel*. Assignment: to write account of this experience.

9/10/93 – Had been jogging.....ankles hurting, compensating for feet. Did viz of pain:

Black silly-putty like blob in ankles...into feet. Burning. Poured water on to reduce temperature. Mixed w/ water to liquefy. Evaporated w/ hairdryer. All but a few spots dried – like fungus. Scraped off. Vacuumed up. Circulated white liquid light. Viz, *feel* self strong, healthy, happy, deserving.

Now float (she floated/jogged) back through time/space to a time when you didn't feel all these good feelings.....to a time when you *felt* like that image of the black blob: "First time on the couch with my crutches. I feel hopeless, like I wanna give up." Do you feel like you deserve to be happy? NO!

Back further now to a time where that feeling began...to the source of that feeling: "in the studio in the big house. I'm about 10 years old, arguing with brother. Just after he molested me." Suggested she project image of herself as this big black blob onto screen... now imagine yourself outside with animals, feel power and strength of connection of nature, purity....she projected this onto screen, dissolving image of black blob, and transforming image of herself. Affirming power, in full control, etc... then to future...seeing, feeling self strong, healthy, healing others – animals, people. Palpable shift in energy, as anger, fear, shame is released, self-empowerment regained.

After, talk of forgiveness as ultimate goal, but anger, etc release okay as part of process. Ankles felt better. Had felt panic around brother part. She skipped to another scene and imagined "decking him...it felt great!" Reassured her to trust her process... coming up to heal only when and how she's ready for it.

9/17/93 – Mom had brother arrested for stealing \$ from her. Spoke of more details of abuse: 4-6th grade. 12-18 months or so.....One night tried to rape me when parents in their bedroom – threatened to scream. Watched me in shower. Molested 2-3/wk when parents at class. 3 years later told parents: He was wrestling with her, saying, "I need to teach you to defend yourself against rape." "Like you?"

Parents overheard: "True?" Comments as noted in initial session. Torn between what your son is saying and what your daughter is saying. Same thing happened with Mom's brother. Mom wants details. "Does she? Oral sex with a 9 year old?" Afraid of not being believed. Good discussion re: all this, and 5th "Bottom Liner" re: Mom....compassion. Seeing how it's all passed on due to lack of Love.

9/21/93 – Did Life Graph viz - floating through past...long hallway NOTE: scenes she imagined were all from 6-14 years old, all pleasant (except horse dying) all with animals or personal empowerment times (dancing, playing Puck, standing up to a teacher, love of animals, and first one was on 6th birthday, an image of Jesus on her ceiling.) No family scenes at all. Rest of session spent filling in graph.

9/29 – Feeling good, looking good. Feet/ankles – "doing pretty good." Pain scale: 1-10: 2!

She acknowledges power of viz and aff she's been doing, even though "not logical" (Victory!)☺!
Remainder of session brainstorming/filling in remainder of life graph goals.

10/7 – Feet ankles still a 2. Reviewed goals. Top 8: Well-respected psychiatrist, accepted in Harvard and Stanford med schools, graduate in top 5%, move out, influence people to think about issues, house and barn and acreage, writing published, scuba diver. Filled in what doing now, what *could* be doing to take steps toward goals...passion is returning as she creates her future.

10/14/93 – "Dr. Ochoa pronounced me 'cured'!" She's writing articles for local papers. We discussed best way to present this, brainstormed ways to convey without pushing people's buttons, creating "new age guilt," etc. Beg. of rough draft writing. Review of journey and celebration.

10/28/93 – Doing well in school – B+ on psych midterm. Did values part of Life Graph.

Main Values: “self-respect, position of influence, dedication, intelligence, caring.” Marissa now exhibits all of these traits. Discussed self-respect vs prestige, grades vs learning, talk of her awareness of her tendency to try to manipulate to control – she feels pride and self-condemnation re: same. I suggest compassion and gratitude for her growing awareness. Next phase of learning to explore! She is moving on, and is today so very open and excited.

11/18 – Follow up – “Every now and then I’ll get a slight pain if I’m stressed out – it’s a good monitor. I do a viz while I’m walking and it usually goes away...eg – imagine it as a color and breathing it out.”

12/2/93 – Feet and ankles fine. Discussed minor issues with school, and did healing viz for mild staphylococcal infection (Note: I didn’t follow up with her re: infection. Was not an issue at next session.)

1/4/94 – Review, recap – Most beneficial learnings? “Compassion for others, delving into family issues, choosing how I respond, etc.” Liked most: “viz and imag exercises.” (yea!)

Talked some of manipulation issue, and how she’s learning to feel safe putting out *all* feelings, not just ones to manipulate outcome to feel safe.

1/18/94 – Final Session: Legs, ankles, feet? “Fine....no problem!” I helped her with article describing her journey. She has completed a very profound chapter, one I’m honored to have shared. Onward and upward, Marissa. Thank you, God.

From Dr. Jose Ochoa’s patient records:

June 8, 1993

“She has had a very good rapport w/ Ms. Nancy Hopps, who wrote us a very welcomed and polite letter communicating her success and liaising intellectually w/ our group which we appreciate... Our RSD patients from Eugene will be sent to her. Ms Hopps is ‘non-traditionally educated’.

...We encouraged Marissa to work on the concept that... the whole syndrome, as proven by the progressive resolution through gentle counseling was psychologically mediated: the motor system and the sensory systems at cortical level went “out of groove” temporarily and the brain was unable to program movement and unable to decode sensations.

July 8, 1993

We agreed that in past interviews my statement had been that the pain is coming from the cortex of the brain but today I qualified that the pain is coming from “the soul,” and is expressed through the cortex.

Oct. 13, 1993

(Follow up exam:) “When asked to interpret the reasons why her RSD is cured without sympathectomy or without drugs, she states, “Because I am happy now.”

Excerpts of Marissa’s own words:

After many hours of tests, Dr. Ochoa diagnosed my RSD as being psychosomatic in origin. This was not an easy diagnosis for me to accept. What I have come to understand, however, through my own learning process, is that a psychosomatic diagnosis does not mean the pain I felt was not

real; it was 100% real! It also doesn't mean that I consciously wanted the pain, or that it was somehow "my fault."

In my case, however, the pain ultimately served a very useful purpose: my body was demanding that I learn to deal with the stress in my life. Up to that point, I had been "stuffing" a lot of my feelings, immersing myself in work, school and sports so I wouldn't have time to deal with my problems. This diagnosis literally forced me to stop, slow down my outer activity, and get in touch with some of my inner needs and unresolved emotional conflicts.

If this cause and effect relationship sounds simple, that's because it is. Though the relationship is simple, the sorting out process is not always easy!

Because of its apparent simplicity, it's difficult, I think, for many members of the medical establishment to accept the significance of the mind-body connection. In fact, most medical doctors do not accept Dr. Ochoa's conclusions regarding the origin and therefore the treatment of psychosomatic RSD cases. Perhaps this is because Dr. Ochoa's findings concerning RSD are contrary to what most physicians were taught in medical school. The clinical evidence he has compiled during his many years of research and practice is certainly enough to challenge existing beliefs concerning RSD.

With the help of Dr. Ochoa and Nancy Hopps, a Eugene-area counselor with whom I did guided imagery and related healing work, I am now completely symptom-free. One of the most important things I learned through my experience with RSD is that I can't expect anyone else to 'fix me.' Even with the help of trained practitioners, my healing process is ultimately up to me.

Summary/Conclusion

Marissa was very fortunate to have been referred to an M.D. who was grounded in a more holistic understanding of her dis-ease. As stated, although over the course of our work together, we used many techniques and approaches, all of which were very important and effective pieces of the healing puzzle, I have no doubt that "the greatest of these was, and always *is*, Love."

Marissa had learned early on to "stuff" her emotions, to close off and protect herself, on various levels. She had learned that the world, and more importantly, her immediate environment, was an unsafe place. She came to believe she was shameful, unworthy and powerless. So she learned very pragmatic ways to manipulate her environment in an ongoing struggle to create a sense of safety.

Our initial work, then, was to establish a sense of true safety – with me, with herself, with her environment, with her God. We did this by first addressing her breathing, helping her relearn to relax and breathe more deeply and fully. This provided the basis for then learning to deepen her ability to relax her entire body, as well as her mind, to let go of being constantly "on alert." Gradually, as we built this foundation, we began to incorporate the power of guided imagery and cognitive reprogramming in more and varied ways, always trusting her Higher Wisdom to guide the rate and method of the healing process. The elegance of these methods cannot be overstated. Using neuro-linguistic programming techniques and hypnotherapy, we "rewired" and released energetic blockages due to past painful experiences and associations. Her willingness to do the work was paramount to her success: "you can lead a horse to water....."

But Marissa was ready to drink....in big gulps..... She worked with the affirmations, literally reprogramming her past limiting beliefs; she worked diligently on the goal-setting and life-visioning exercises. She was open to experimenting with methods she originally dismissed as "not logical." She came to learn that that is precisely *why* they are so powerful! She began to rekindle her sense of purpose, her belief in herself and in her potential.

As the foundation of trust, and her growing sense of empowerment were in place to a sufficient degree, then and only then did her innate knowing guide us to places of deep inner pain, where she was able to take huge steps toward healing her abuse memories, and to begin the process of forgiveness. As our sessions progressed, no longer did she need the physical pain as a catalyst to deal with her buried emotional pain. She gradually learned to open, in trust, to the world, and grew from broadcasting the message, "Don't touch me" to realizing that "the whole world's open to me." As she stated in her follow-up appointment with Dr. Ochoa, when asked why she thought her RSD was cured, she replied simply and succinctly, "Because I am happy now." That kinda sums it up.

Follow-up thoughts, March 2008 (15 years later!)

I have the blessing of being able to look back on Marissa's journey to wellness with 15 years' perspective. Naturally, I have grown and learned in many ways, personally and professionally, since working with Marissa in 1993. And yet, as I looked over these notes, I realized that my basic approach has not changed, but only deepened over time. My skills as a "healer" have matured. Along with emotional process work as detailed above, I now regularly include non-verbal Energy healing (primarily healing touch and sound healing.) I find the combination to be truly synergistic, normally yielding more rapid results, as energetic blocks are released more efficiently, and often with less emotional duress.

However, I hasten to add, that in our culture of "faster is better", I believe there are also situations, like Marissa's, where a certain period of time is *needed* for healing, and "rushing it" would not necessarily serve the client. I think it is noteworthy that, when asked to imagine the earliest time she could envision herself well, Marissa definitively stated a time still more than two months away. I believe she needed that time, on various levels of her being, for healing, learning and growing, before she was ready to fully let go of her symptomatic "reminders" and "permission-givers". I trust that "to everything, there is a season", including the cycles of healing and spiritual growth.

My trust in the Higher Power has been strengthened by another decade and a half of work with clients, as well as by having gone through my own personal healing challenges: I was diagnosed with uterine cancer in 1998, and subsequently went through another cancer healing journey with my incredible daughter, Mieka, who was 19 at the time of her diagnosis with Hodgkins Lymphoma in 2003. I am thrilled to report that both of us are healthy and thriving, and grateful for the many blessings that came as a result of each of our journeys, my *Relax Into Healing* series of CDs being one of them.(Needless to say, these experiences provided a wealth of insight and learning, which will be written about in its proper "season"!)

My repertoire of technique has expanded, and yet it has also simplified. My work with clients has grown to include an ever-widening variety of presenting problems, including many life-threatening illnesses. Yet, as stated in the introduction, the basic approach remains the same: I simply help people remember Who they really are. Before each session, I ask for Guidance, to be used as a Vehicle of healing. I have absolute confidence that this intentional prayer is recognized, as I regularly experience the miraculous transformations that occur as we surrender to the Love that We Are.

Post-script

I'd not seen Marissa since our work together, having totally lost track of her whereabouts. About six months ago, I happened to run into her in a local grocery store. She has matured into a beautiful,

confident, successful young woman, with no sign or symptom of her previous dis-ease. When I asked her how she was doing, she smiled radiantly, and replied, “Great....I’m in Love.”

Indeed you are, Marissa. Aren’t we all?

Editorial notes on Reflex Sympathetic Dystrophy - Eric Leskowitz, MD

RSD is a notoriously difficult-to-treat syndrome in pain management circles, and yet we have here a case report describing a dramatic response to unconventional treatment that mainstream doctors would do well to heed. The informal first person tone of this case report has one great advantage – it captures the excitement of the treatment process as it describes the emotional nuances of therapy. But it also has one disadvantage – there’s no conceptual perspective that allows the reader to step back and understand what happened. I’d like to use my vantage point as an integrative psychiatrist working in a chronic pain clinic to provide that piece.

For years, I’ve been struck by the psychological aspects of RSD. There was a common clinical pattern without an obvious explanation: patients who were so angry at their boss that they could just punch them in the mouth (but wouldn’t because their hand froze up with RSD), or were so angry at their doctor for unexpectedly injecting them that they could just kick him (but couldn’t because their foot froze up with RSD). But it was always hard for me to understand how emotional symbolism could translate so directly into physical disease. What mediated such a precise mind/body link?

In my early years with our hospital’s pain unit in the mid-90’s, our journal club actually discussed several articles by Dr. Jose Ochoa, the neurologist who also treated Marissa. He took the then unpopular view that the name RSD should be taken literally, by reminding us that the “S” stands for “sympathetic”: the sympathetic branch of the autonomic nervous system that deals with fight-or-flight emergencies. The name was chosen because so many RSD symptoms – flushing, pallor, sweating – are signs of autonomic instability. But Dr. Ochoa went one step further, to claim that a psychophysiological cause underlay the disorder itself. Physicians enamored of guanethidine blocks and radical sympathectomies reacted harshly to Dr. Ochoa’s work.

I agreed with Dr. Ochoa’s maverick stance, though this put me at odds with our team’s medical director, an eminent Harvard neurologist who looked for a medical/structural cause to pain complaints: stress could exacerbate, but not cause. However, I didn’t have any therapeutic armamentarium at that time to put into practice these emerging insights about mind/body interactions. In subsequent years, as I’ve become more familiar with the world of energy medicine, I have come to understand the importance of the energy dimension in healing, especially in pain syndromes like RSD. And Marissa’s case helps to highlight that level. In fact, reading this article now, I wonder if one of Ochoa’s case reports that we studied might have been Marissa’s story!

This report describes the skillful use of stage-appropriate treatments for PTSD (for that is Marissa’s true psychiatric diagnosis). The therapist was literally able to bring life energy back into a part of the body that had been walled off from energetic nourishment by the patient’s own emotional defenses. This successful treatment prevented Marisa from reaching the chronic phase of RSD, in which dystrophic (the “D”) changes come to the affected body part – the skin become hairless, finger nails become thick and brittle, bones lose calcium, and muscles atrophy. In short, the affected limb becomes more and more lifeless. For these reasons, I have proposed (in JF Audette and A Bailey’s edited text, *Integrative Pain Medicine*, Totowa, NJ: Humana Press, 2008) a model of RSD as a disorder of “qi withdrawal,” where emotionally symbolic events are translated into physical symptoms by way of unconscious blockages to the flow of the invisible life energy that Traditional Chinese Medicine refers to as qi. When a body part is deprived of this vital force, it develops symptoms according to the depth and nature of this blockage, with pain being the first sign of an energy block.

I have never had a case of RSD that illustrates the energy model as clearly as this one, or a symptomatic reversal so dramatic. I would only add to this descriptive case report the conceptual notion that energy itself is the mediator of the many mind/body techniques so skillfully used here (especially the guided imagery, hypnosis and breathwork). While Dr. Ochoa is to be applauded for recognizing the role of the sympathetic nervous system in RSD, his model becomes more complete by including the energy dimension. Energy concepts give a fuller context to the patient's subjective experiences – hot flashes become surges of energy, extending love and forgiveness to the body is reconceptualized as releasing fear-based blocks to energy flow, decreased pain is seen as a sign that energy blockages are dissolving.

Hopefully, by adding the dimension of energy physiology to the descriptive and clinical work so vividly presented by Nancy Hopps, we can gain a fuller understanding of some of clinical medicine's most puzzling problems. Human beings are multidimensional, and so too should their treatments be multidimensional.

Suggested reading/listening (A handful of my favorites among *many* excellent resources on the subject):

Borysenko, Joan. *The Power of the Mind to Heal*, CA: Hay House 1995.

Hirschberg, Caryle/ Barasch, Marc Ian. *Remarkable Recovery: What Extraordinary Healings Tell Us About Getting Well and Staying Well*, NY: Riverhead 1995.

Hopps, Nancy. *Relaxation/Affirmation Techniques* (Audio CD/booklet), and other titles in *Relax Into Healing* series: *Pain, Surgery, Cancer, Healing Affirmations & Hypnosis, Deep Healing Sleep*, et al, OR: Synergistic Systems 1989 -2008.

Ladinsky, Daniel (translator). *Love Poems from God: Twelve Sacred Voices from the East and West*, NY: Penguin 2002. A favorite edition that includes Rumi, Hafiz and others

Lipton, Bruce. *The Biology of Belief*, CA: Elite 2005.

Ochoa, Jose L. "Truth, errors, lies around 'reflex sympathetic dystrophy' and 'complex regional pain syndrome'": *J Neurol*, 246:875-879, 1999. (Also published in *AnalgesiaFile*. 2000)

Siegel, Bernie. *Love, Medicine and Miracles: Lessons Learned about Self-Healing from a Surgeon's Experience with Exceptional Patients*, NY: Harper & Row 1986.

NANCY HOPPS is a nationally recognized author, speaker, and mind-body healing consultant. Her highly esteemed *RELAX INTO HEALING* CDs are in widespread use in personal and clinical healing settings. A 10-year cancer survivor herself, Nancy brings her personal and professional experience to her heartfelt recordings, private counseling and public speaking engagements.

Her *Relax into Healing* titles, endorsed by Bernie Siegel, MD, Joan Borysenko, PhD, and other leaders in the field of mindbody medicine, are: *Cancer: Embracing the Healing Journey*; *Chemotherapy: A Healing Solution*; *Radiation: Removing the Dross*; *Surgery: Mindful Mending*; *Pain: Softening the Sensations*; and *Healing Affirmations & Harp, Finding the Peaceful Place Within*, and *Deep Healing Sleep*, and her “classics among stress-management materials” – *Relaxation/Affirmation Techniques*, and *Relax-Quick!*,

Contact: 541-683-9088, PO Box 5224, Eugene, Oregon 97405

www.RelaxIntoHealing.com



See review of *Surgery: Mindful Mending*, by Nancy Hopps, in this issue of IJHC.

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P.O. Box 502, Medford, NJ 08055

Phone (866) 823-4214 (519) 265-0746

Email: center@ijhc.org Website: <http://www.ijhc.org>

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