



RECOGNIZING THE MIND BODY SYNDROME AND THE STRATEGY TO DEAL WITH TMS



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1. Introduction

This document is dedicated to bring awareness to Autism New Zealand, the Needs Assessment Service and Co-ordination groups, Family Violence groups, Domestic Violence groups, Mens and Women's advocacy groups, the medical profession, the mental health sector on the existence of TMS which goes by the name of Tension myositis syndrome/tension myoneural syndrome or mind body syndrome.

In chapter 2, the discussion will be focused on bringing awareness of TMS.

2. Bringing Awareness on TMS

TMS which goes by the name of Tension myositis syndrome/tension myoneural syndrome or mind body syndrome is seen by the medical profession in New Zealand and around the world as a pseudo medical diagnosis, the condition cannot be treated by medication such as anti anxiety or anti depression. The only way to treat TMS is to get the person to document their past and associated emotions, this includes their living environment, people that were part of their life such as parents.

History of TMS

TMS which is referred to as Tension myositis syndrome/tension myoneural syndrome or mind body syndrome is a term created by Dr John Sarno (1923 – 2017) which is given to a condition of psychogenic musculoskeletal and nerve symptoms, most notably back pain. TMS can also cause other symptoms such as IBS and even physical pain. TMS is also considered to be a distraction pain syndrome.

Causes of TMS

Tension myositis syndrome/tension myoneural syndrome or mind body syndrome can be caused by Adverse events which can cause emotional trauma such as:

1. Family or Domestic violence
2. Accidents causing bereavement
3. Parental separation
4. Natural disasters
5. Bullying at work

TMS has a high chance of occurring when the person has lived in a environment which involves Family violence, the reason for this is the author of this document lived in a environment which involved power and control, emotional abuse, financial control and isolation. Despite leaving a abusive environment, the after effects are very real, the after effects include:

1. Emotional Dysregulation which can result in crisis
2. Suicide attempts
3. Loss of Appetite
4. Physical pain
5. Gastro issues

The author of the document has also been admitted to Hutt Hospital when he went through emotional episodes which were treated as cannot be medically explained.

TMS is basically a result of the past catching up, this involves recollections of adverse events which involve repressed emotions which is a manifestation of repressed emotions, especially unconscious rage.

The TMS and Autism connection

TMS can also show up on Autistic people who have been through adverse events. In fact TMS can also have adverse effects on Autistic people such as once the Mind Body Syndrome starts happening, it has devastating consequences for Autistic people, TMS could very well be responsible for crisis episodes on Autistic people who have been through adverse events. It is important to note, once TMS starts happening on Autistic people, one of the most dangerous emotions that can happen for Autistic people is thoughts of suicide.

When a Autistic person experiences TMS, it is very important assure them that they are in a safe environment where they can speak and at the same time give them assurances that what they have been through such as a adverse event is real and at the same time give them an assurance that they can trust the person. TMS can also result on Autistic people to be stuck in the past hence they cannot move comprehend the situation they are in, effects can even include dissociation and out of body experiences.

Triggers of TMS

TMS can be caused by once the person leaves a environment which they no longer wish to live in, if their environment involved Family or Domestic violence. Eventually their past will catch up with them and this will cause a freeze or fight or flight response which can result in the person going through TMS.

TMS is basically the freeze side of fight or flight, this means the person who is going through TMS, their past has caught up with them.

The brain can also cause TMS

It is important to mention, the brain can hold so much recollections/memories relating to a environment involving Family or Domestic violence before the brain decides enough is enough and releases everything, once everything relating to the environment involving Family or Domestic violence, the freeze response starts happening and also can cause the person to change their functioning on everyday life and this means, the person experiencing TMS is stuck in the past, hence relationships with people and decision making will also be seriously affected.

The 3 types of people who experience TMS

The author of the document is going to state there are 3 types of people who go through TMS, these people will be categorized into 3 groups:

Group 3 – These people have been through an adverse event such as family or domestic violence, they have recognized that they are in need of help but at the same time, they are recognizing the past has caught up with them and these people are determined to find help because they know what they need to do to recover and move on from that adverse event, they will even go to researching on the internet, in other words, these people are determined to find help.

Group 2 – These people have been through an adverse event such as family or domestic violence, they have recognized that they are in need of help but at the same time, they are recognizing the past has caught up with them but they need encouragement or someone to point them in the right direction to find help.

Group 1 – These people have been through an adverse event such as family or domestic violence, but there is a problem, they cannot find someone who they can trust, the only way to cope or ‘move on’ from what they experience is either through alcohol use or substance abuse which becomes a problem, as time goes by the likelihood of looking for help can increase or decrease also they will come to the realization that alcohol and substance use are not helping the situation, these people will require intervention from the community such as counsellors, family violence groups and etc in order to point them in the right direction but in order for the people in this group to agree to get help, it is important to earn their trust.

Probability of Group 3 to 1 getting help

Group 3 – 100% to 90%

Group 2 – 90% to 50%

Group 1 – 50% or less

It is important to know, people will eventually get help when they are ready.

Closing the chapter

Sarno called Tension Myositis Syndrome (TMS) pain. Once a person recognizes his pain for what it really is — an attempt by the subconscious mind to distract him from consciously feeling his anger or anxiety — the pain no longer serves a purpose and would go away.

The next chapter focuses on treating TMS and how it is in fact multidisciplinary and laying the strategy to help people who have been through adverse events.

3. TMS is multidisciplinary and providing a strategy

In this chapter, the discussion focuses on bringing awareness on how TMS or referred to as Tension myositis syndrome/tension myoneural syndrome or mind body syndrome is in fact multidisciplinary and providing a strategy.

When a person goes through a adverse event which results in their past catching, the first point of contact or port of call would be the person's General Practitioner. It is important that the General Practitioner has a knowledge on what TMS is and also it is important that the General Practitioner is made aware of that TMS cannot be managed by anti anxiety or depression medication.

The role of the General Practitioner is to encourage their patient to document their past and at the same time encourage their patient to recall their past and emotions associated with their past and also document relationships involving parents and also General Practitioners should have questionnaires for patients where they are encouraged to answer questions such as:

1. Do you identify with any of the following personalities? Perfectionist, people-pleaser, catastrophic/anxious personality, victim, sensitive to how others perceive you, stoic, critical of others, overwhelmed, controlling, hard on yourself.
2. Were you going through a particularly stressful time OR a significant change in your life when or in the year before the pain started? (e.g. family arguments, lawsuits, high-stress job, job loss or threat of job loss, breakups, serious illness, wedding, birth of child, career change, loss of loved one, traumatic incident, etc.)

If TMS is present on a patient then the General Practitioner should not proceed to writing a script for anti anxiety or anti depression medication, but the most important thing is to rule out any other medical condition. Even if the necessary tests have been performed such as blood tests and it comes back as perfect and the symptoms as unmedically explained then it makes it more critical to ask questions about the patients past and at the same time encourage them to document their past and emotions and relationships with people who they lived with, their character and etc.

TMS goes hand in hand with adverse events and if unresolved, it can result in negative consequences.

Once the General Practitioner is positive the issue is TMS related, the General Practitioner can refer the patient to community mental health, a psychologist who specializes with modalities such as:

1. EMDR (Eye Movement Desensitization and Reprocessing)
2. EFT (Emotional Freedom Technique)
3. Psychoanalysis
4. Somatic Therapy also goes by the name of Somatic Experiencing
5. Hypnotherapy

The General Practitioner can also recommend adjunct therapies such as:

1. Mirimiri
2. Zero Balancing and Craniosacral

The author of this document is currently doing Zero Balancing and Craniosacral, this massage allows the body to release recollections adverse events in a controlled manner which does not cause rage or any other emotion also it makes journaling the past much easier as well.

The patient or person who is experiencing TMS also has a role to contribute in this. The patient or person should be encouraged to journal their past, their emotions, their personality, their cultural values, people who are or were part of their life, they should also document their present situation as well.

The next chapter discusses modalities that can help address or resolve TMS or known as mindbody syndrome.

4. Modalities for addressing TMS

This chapter goes into modalities that can address TMS or known as the Mind Body Syndrome.

1. EMDR (Eye Movement Desensitization and Reprocessing)

Eye movement desensitization and reprocessing was developed by Francine Shapiro for the purpose of alleviating the distress associated with traumatic memories such as post-traumatic stress disorder. Eye movement desensitization and reprocessing has also been reported to be used on issues caused by the Mind Body Syndrome.

2. EFT (Emotional Freedom Technique)

Emotional Freedom Techniques (EFT) are a form of energy psychology. It is developed from acupuncture, neuro-linguistic programming and thought field therapy. EFT is commonly referred to as tapping, as it requires the participant to tap on specific acupuncture points on the body while repeating phrases or statements about a specific issue. In *The Hidden Psychology of Pain*, Dr. James Alexander writes, "EFT can be thought of as giving the brain a range of alternative pathways through which the electro-chemical activity can travel, dispersing the energy and diluting the negative power of the experience."

3. Psychoanalysis

Psychoanalysis is a treatment based on the theory that our present is shaped by our past. We are often unaware of how experiences can affect us. Painful feelings can remain in the unconscious mind and influence our current mood and behaviour and contribute to problems with self-esteem, personality, relationships and work.

Because we are unaware of these forces, common problem-solving techniques – such as seeking the advice of friends and family or reading self-help books– often fail to provide relief.

Psychoanalysis helps a person take control of these influences by tracing them back to their origins and understanding how they have developed over time. This awareness offers the person the opportunity to deal constructively with the way these influences affect their current life.

4. Somatic Therapy also goes by the name of Somatic Experiencing

Somatic counseling, also known as somatic experiencing therapy, or SE therapy, is a type of therapy that helps treat post-traumatic stress, past trauma, and effects from other mental health conditions. This type of therapy connects a person's mind and body to apply psychotherapy and physical therapies during treatment.

Therapists who practice somatic body psychotherapy, which applies basic principles of somatic psychology, believe a person's inner feelings impact their physical form – they use mind-body exercises to release pent-up trauma from the mind and the body. By releasing these bodily sensations, a somatic therapist works towards healing trauma from the inside out with this form of trauma therapy.

5. Hypnotherapy

Trauma is a universal human experience. A traumatic event may involve anything from interpersonal abuse to a natural disaster to the sudden death of a loved one. When people struggle to process traumatic events or experiences, it can lead to certain mental health conditions or symptoms, such as depression, anxiety, insomnia, flashbacks, and more.

Hypnosis, also called hypnotherapy, is a state of deep relaxation and focused concentration. It's a type of mind-body treatment for trauma. A trained and certified hypnotist or hypnotherapist guides you into this deep state of focus and relaxation with verbal cues, repetition, and imagery.

When you're under hypnosis, this intense level of concentration and focus may allow you to ignore ordinary distractions and be more open to guided suggestions

to make changes to improve your health.” Through the help of a hypnotherapist, you may be able to heal certain symptoms related to trauma you’ve experienced.

6. Emotional Awareness and Expression Therapy (EAET), not available in New Zealand

Emotional Awareness and Expression Therapy (EAET) is a form of psychological therapy that targets the trauma, stress, and relationship problems that are found in many people with chronic pain, especially "centralized" (central sensitization, central augmentation) pain. Although all chronic pain is influenced by psychosocial factors, centralized pain conditions appear to be strongly influenced by the functions of the central nervous system, especially the brain's thoughts, feelings, and relationships. Such pain conditions include most cases of fibromyalgia, irritable bowel syndrome, pelvic pain, temporomandibular pain, head pain, and many cases of back or other localized pain. Research shows that stress throughout people's lives and how they handle the emotions from that stress, can trigger, worsen, or maintain their pain. Most psychological treatments for these pain conditions, including traditional Cognitive Behavioral Therapy (CBT) and Acceptance and Commitment Therapy (ACT), do not focus on helping people resolve these earlier life stressors, but this is the focus of EAET. This form of therapy is rather new, and so only a handful of clinical trials have been published testing it. Many case reports suggest that EAET can be quite powerful, even leading to the remission of pain in some people.

EAET is developed by Dr Mark Lumley and Howard Schubiner who are former students of Dr John Sarno.

Adjunct Therapies, must be done in conjunction with the above

1. Mirimiri

Mirimiri is a traditional Māori healing technique that seeks to restore and rebalance the body.

This is achieved through applying pressure to trigger points and pressure points, using tools such as kōhatu (stones), spine and joint alignment techniques and the

use of hands, feet, elbows and bodyweight to work the muscles and tissue. It is similar to other traditional massage techniques, while also incorporating Māori wairua.

Mirimiri means “natural gift” and encompasses a person’s physical as well as spiritual wellbeing. Practitioners follow in the footsteps of their “Tupuna” ancestors, dating back hundreds of years. Skills and knowledge are passed down by kaumātua to successive generations. The inspiration for mirimiri comes from nature – particularly water or ocean, both of which symbolise our life force.

2. Zero Balancing and Craniosacral

Zero Balancing is a body-mind system of healing. Done with the clothes on, it is deeply enjoyable and relaxing for the body and mind. A treatment usually lasts 30 to 45 minutes.

ZB Practitioners use slow and gentle points of pressure and traction, held for only a few seconds each, to create fulcrums or 'points of balance' around which the body can relax and repair.

ZB also supports the release of physical and emotional trauma which may be stored in the body as patterns of chronic tension and imbalance.

Craniosacral therapy is a hands-on technique for healing trauma using a light touch in the right area of the body to facilitate a negatively energetic release from the system. There are also membranes and movement of the fluids in and around the central nervous system that take on healing properties. Healing trauma is essential in restoring people who have been affected by trauma, so they can return to normality and better their quality of life.

Resources on the modalities mentioned above for addressing TMS

EMDR

<https://www.theportabletherapist.com/single-post/2018/05/30/the-mindbody-connection>

Report of EMDR being used on the Mind Body Syndrome:

<https://www.bowlermedical.org/dr-davids-blog/pain-and-the-brain-part-1-the-mind-body-syndrome-tms-previously-known-as-tension-myositis-syndrome>

<https://www.tmswiki.org/forum/threads/emdr-therapy.11341/>

EFT (Emotional Freedom Technique)

<https://www.everydayhealth.com/wellness/eft-tapping/guide/>

Reports of EFT being used by people going through TMS episodes

<https://www.tmswiki.org/forum/tags/emotional-freedom-technique-and-tapping-eft/>

Psychoanalysis

<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/psychoanalysis>

Reports of Psychoanalysis being used by people going through TMS episodes

<https://www.tmswiki.org/forum/tags/psychoanalysis/>

Somatic Therapy also goes by the name of Somatic Experiencing

<https://www.health.harvard.edu/blog/what-is-somatic-therapy-202307072951>

Reports of Somatic Therapy/Somatic Experiencing on TMS

<https://www.tmswiki.org/forum/threads/somatic-experiencing-hey-it-works.2301/>

<https://www.tmswiki.org/forum/threads/somatic-experiencing.6784/>

Hypnotherapy

<https://my.clevelandclinic.org/health/treatments/22676-hypnosis>

Reports of people using Hypnotherapy on TMS issues

<https://www.tmswiki.org/forum/tags/hypnotherapy/>

Emotional Awareness and Expression Therapy

<https://painguide.com/pain-care/professional-care/therapies/eaet/>

Next chapter brings this document to a conclusion or close.

5. Conclusions

5.1 TMS which goes by the name of Tension myositis syndrome/tension myoneural syndrome or mind body syndrome is seen by the medical profession in New Zealand and around the world as a pseudo medical diagnosis, the condition cannot be treated by medication such as anti anxiety or anti depression. The only way to treat TMS is to get the person to document their past and associated emotions, this includes their living environment, people that were part of their life such as parents. People with autism spectrum can also experience TMS.

5.2 TMS is basically multidisciplinary, General Practitioners must come to the reality that anti anxiety or anti depression medication cannot work on the Mind Body Syndrome, if a patient is showing obvious signs of TMS then the General Practitioner should encourage the patient to start journaling about their past and refer the patient to Community Mental Health or if they do not feel safe in the public because they have been through adverse events such as Family Violence or Domestic violence recently then referring them to acute mental health ward should be considered.

5.3 Modalities that can address TMS include EMDR (Eye Movement Desensitization and Reprocessing), EFT (Emotional Freedom Technique), Psychoanalysis, Somatic Therapy also goes by the name of Somatic Experiencing, Hypnotherapy and Emotional Awareness and Expression Therapy. Adjunct therapies that can be done jointly with the modalities include Mirimiri and Zero Balancing which is done in conjunction with Craniosacral.

Next chapter is on recommended books and multimedia on the Mind Body Syndrome.

6. Recommended books and multimedia on the Mind Body Syndrome

6.1 Books written by John Sarno (1923 – 2017)

The Mind Body Prescription

The Divided Mind

Mind Over Back Pain

Documentaries

All the rage

On Youtube, type in Dr John Sarno in the search box

6.2 Books written by Howard Schubiner

Unlearn your pain

Hidden from view

Website

<https://unlearnyourpain.com/>

<https://www.thismighthurtfilm.com/>

Youtube

<https://www.youtube.com/@hschubiner>

Type Howard Schubiner into the search box on Youtube

6.3 Peter Levine

Healing Trauma - A Pioneering Program for Restoring the Wisdom of Your Body

Waking the Tiger: Healing Trauma

Trauma and memory

In an Unspoken Voice - How the Body Releases Trauma and Restores Goodness

On Youtube, type in Peter Levine into the search box

6.4 Bessel Van Der Kolk

The Body Keeps the Score

On Youtube, type in Bessel Van Der Kolk into the search box

6.5 Gabor Mate

The myth of normal

On Youtube, type in Gabor Mate into the search box