

## Unlearn Your Pain: Chapter Five

# Do You Have Mind Body Syndrome?

It is more important to know what sort of person has the disease than what kind of disease the person has. — Hippocrates

This program is designed for those with MBS, those in whom there is no tissue breakdown process in the body, whose pain and other MBS symptoms are caused by stress and emotional reactions to stress. For such people, this program can offer the opportunity for a cure or a remission of symptoms. Those who can be certain of having MBS are those who have been diagnosed with tension headaches, migraine headaches, neck pain, back pain, whiplash, fibromyalgia, irritable bowel syndrome, chronic fatigue syndrome, interstitial cystitis, insomnia, tinnitus, chronic abdominal or pelvic pain, or any other of the common MBS syndromes listed in the table in chapter 2. However, since MBS is so common and because the ANS fibers send nerves to literally every part of the body, there are many people with MBS who have pain and other symptoms that may not be included on this list.

A careful medical review is necessary for everyone with chronic symptoms to rule out a serious medical condition. If you are suffering from chronic symptoms that your doctors have been unable to diagnose or treat, you may have MBS, even if your symptoms are not listed in the table. If the true diagnosis remains in doubt, you should seek consultation with me or one of the other doctors who are knowledgeable about MBS and who have experience in diagnosing this condition. A list of such doctors is included in the Appendix.

### Illustrative Stories

To prepare you for the kind of self-evaluation you will be doing, here are some cases I have encountered that illustrate some common patterns seen in the development of MBS.

A FORTY-FIVE-YEAR-OLD WOMAN developed stomach pains and anxiety attacks in the fall one year after her husband died. He was terminally ill and, in accord with his wishes, she had to decide to disconnect his life support, which she felt was in conflict with her religious beliefs. Each fall, her pains returned and increased. Several GI specialists saw her, but no one could help her resolve her pain. Through this program, she learned that her feelings about her husband's death (primarily guilt and loss) caused her pain. Her anxiety attacks were generally in the afternoon, occurring almost exactly at the time of day that he died.

A FIFTY-TWO-YEAR-OLD MAN developed back pain while on a plane from Michigan to California, where he was living. As a child, his father was his hero and well liked by everyone in his small Michigan town. His mother was critical and self-absorbed. She demeaned the young boy constantly, and one day he replied to her in a disrespectful manner at home. Later that day, the mother called the local police and had him taken out of school in handcuffs and put into the town jail for the rest of the day, simply for talking back to his mother. After growing up, he moved to California. When he was fifty, he returned home to visit his father, who was now elderly and in a nursing home. Upon arriving home, he found that his mother was mistreating his father and he felt that his father was “imprisoned” in the nursing home. On the flight back, he developed severe back pains that lasted for 2 years.

A THIRTY-FOUR-YEAR-OLD MAN was raised by a dominant father and a submissive mother in a small, very religious town. He was highly skilled in school and sports, and was admired by most people. When drunk, his father would often physically abuse his mother, but this was accepted as “normal” in his community and no action was ever taken. When asked how he felt about this, the patient replied that he often vowed that if he ever hit a woman, he would “cut off his hand.” When he was a Ph.D. student, he was under the stress of preparing for his oral exams and was working feverishly on a big project. At this time, he began to have pain in both of his hands. The pain progressed to the point where he could not turn a doorknob, could not work on a computer, and could not pick up his infant son. Despite extensive testing and seeking care from several hand specialists, no one could explain his pain. When asked to recall any other events that occurred at the time of the onset of his pain, he noted that there was a conflict between two of his mentors. One mentor was a woman, who began to tell people that he was not fit to be in the Ph.D. program. He felt that she threatened his ability to complete his program. He was unaware of the depth of anger he felt towards her and his even stronger feelings of guilt at the prospect of his anger towards a woman. This internal and subconscious conflict was the trigger for his severe hand pain.

The specific symptoms caused by MBS can be quite different, even though the stressor and the emotional reaction may be very similar to that which occurred in childhood, as shown by the following brief vignettes.

A TEENAGER DEVELOPED HEADACHES after being sexually abused by an older brother. She developed fibromyalgia later in life at a time when she was emotionally abused by her husband.

A WOMAN DEVELOPED MIGRAINE HEADACHES as a child after her parents divorced and then developed interstitial cystitis as an adult after her own divorce. Sometimes MBS symptoms can be triggered by a positive event. In my own life, I developed neck pain after my daughter was born. She was our first child, and I was extremely happy at the time. However, her arrival complicated our lives. I was busy with work and busy at home, and my daughter didn't sleep well at night. I was up several times a night with her, walking up and down the stairs with her to get her back to sleep. After several months of this, my wife and I disagreed on how to deal with her crying at night. Now, in retrospect, I realize I felt stressed, resentful, and trapped. Not being able

to express (or even recognize) these feelings, I developed neck pain, which persisted for several months.

In a minority of people with MBS, their early childhood experiences did not create the emotional events that typically lead to priming of the ANS. Those with loving, stable families and happy childhoods are less likely to develop MBS later in life. However, they are primed to expect that these relationships will continue, and when something happens that tears their world apart, MBS can develop.

A FORTY-TWO-YEAR-OLD WOMAN grew up in a nurturing, close family within an idyllic rural community. Her mother chose to give her a larger share of the family inheritance, and this set off a contested will and the loss of her close relationships with her siblings. The trauma of those changes was enough to trigger severe back pain.

## Mind Body Syndrome Self-Diagnosis

To figure out if you have MBS and what issues in your life may have contributed to this disorder, take the time to complete the work sheets below. They will help you understand yourself better, and this understanding is the key to ridding yourself of your pain. This section is based upon the detailed interview I use with my patients.

### STEP 1: SYMPTOMS

The following list of symptoms and diagnoses are likely to be caused by MBS (though some of them can also be caused by other medical conditions that can be easily ruled out by your physician). The more of these you have had during your lifetime, the more likely it is that you have MBS. People with several of these conditions have usually seen many doctors and been given multiple diagnoses, but their doctors have not considered MBS. This is because biotechnological medical practice tends to look at each body system in isolation. You may have seen a neurologist, orthopedic surgeon or neurosurgeon, gastroenterologist, rheumatologist, or others. But no one is looking at the whole person. MBS occurs in people, not in body parts, and we can only understand it by evaluating the whole person, the mind, and the body.

It is very common for MBS symptoms to start in childhood or adolescence. Many people develop headaches, stomach aches, dizziness, fatigue, anxiety, or other symptoms while they are young and then later in life develop back or neck pain, fibromyalgia, irritable bowel syndrome, or other conditions.

CHECK EACH ITEM ON THIS LIST and write down at what age you were when each set of symptoms first appeared in your life.

**Date of onset:**

1. Heartburn, acid reflux \_\_\_\_\_
2. Abdominal pains \_\_\_\_\_
3. Irritable bowel syndrome \_\_\_\_\_
4. Tension headaches \_\_\_\_\_
5. Migraine headaches \_\_\_\_\_
6. Unexplained rashes \_\_\_\_\_
7. Anxiety and/or panic attacks \_\_\_\_\_
8. Depression \_\_\_\_\_
9. Obsessive-compulsive thought patterns \_\_\_\_\_
10. Eating disorders \_\_\_\_\_
11. Insomnia or trouble sleeping \_\_\_\_\_
12. Fibromyalgia \_\_\_\_\_
13. Back pain \_\_\_\_\_
14. Neck pain \_\_\_\_\_
15. Shoulder pain \_\_\_\_\_
16. Repetitive stress injury \_\_\_\_\_
17. Carpal tunnel syndrome \_\_\_\_\_
18. Reflex sympathetic dystrophy (RSD) \_\_\_\_\_
19. Temporomandibular joint syndrome (TMJ) \_\_\_\_\_
20. Chronic tendonitis \_\_\_\_\_
21. Facial pain \_\_\_\_\_
22. Numbness, tingling sensations \_\_\_\_\_
23. Fatigue or chronic fatigue syndrome \_\_\_\_\_
24. Palpitations \_\_\_\_\_
25. Chest pain \_\_\_\_\_
26. Hyperventilation \_\_\_\_\_
27. Interstitial cystitis/spastic bladder (irritable bladder syndrome) \_\_\_\_\_
28. Pelvic pain \_\_\_\_\_
29. Muscle tenderness \_\_\_\_\_
30. Postural orthostatic tachycardia syndrome (POTS) \_\_\_\_\_
31. Tinnitus \_\_\_\_\_
32. Dizziness \_\_\_\_\_
33. PTSD \_\_\_\_\_

## STEP 2: INVESTIGATE YOUR CHILDHOOD

Now consider the following questions and write brief answers to as many of them as seem important.

**What words would you use to describe your father?**

(Substitute another caregiver if you didn't grow up with your father.)

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What kind of work did your father do? Was he successful in his career?

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Was your father loving? Did he hug you or tell you he loved you? Was he supportive?

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Were you particularly close to your father? Did he confide in you?

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Was his love conditional?

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Did your father have high expectations of you?

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Was he critical or judgmental?

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Was he a perfectionist?

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Did he yell at you?

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Did he hit or punish you?

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Were you afraid of him?

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Was your father aloof, neglectful, or self-centered?

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Were some children given preferential treatment or treated more harshly than others? If so, how did that make you feel? How did that affect the relationship between you and any of your siblings?

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Did your father drink or use drugs? If so, how did that affect him, the family, and you?

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Did your father have any mental health issues?

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Was he anxious, worried, or insecure?

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How did your father treat your mother?

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Did you identify with your father?

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Did you attempt to be like him or to be different from him?

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**What words would you use to describe your mother (or another caregiver)?**

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What kind of work did your mother do?

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Was she successful in her career?

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Was your mother loving? Did she hug you or tell you she loved you? Was she supportive?

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Were you particularly close to your mother? Did she confide in you?

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Was her love conditional?

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Did your mother have high expectations of you?

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Was she critical or judgmental?

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Was she a perfectionist?

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Did she yell at you?

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Did she hit or punish you?

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Were you afraid of her?

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Was your mother aloof, neglectful, or self-centered?

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Were some children given preferential treatment or treated more harshly than others? If so, how did that make you feel? How did that affect the relationship between you and any of your siblings?

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Did your mother drink or use drugs? If so, how did that affect her, the family, and you?

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Did your mother have any mental health issues?

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Was she anxious, worried, or insecure?

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Did you identify with your mother?

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Did you attempt to be like her or to be different from her?

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How did your mother treat your father?

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Who was in charge of the house?

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Who handled disciplinary issues?

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Did your parents argue?

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Did anyone other than your mother and father have responsibility for you or care for you as a child? If so, who?

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Repeat the above questions for these individuals if they had significant roles in your upbringing.  
Use separate paper for these questions.

**Think of the relationships you had with your siblings while you were growing up.**  
Were there resentments or jealousies?

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Was there any cruelty, meanness, or abuse?

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Did any of your siblings have any illnesses, psychological problems, or drug abuse problems?

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Did any of your siblings rebel, act out, or behave in ways that were upsetting to your parents or to you?

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How did you react to these situations?

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How was money handled in your family?

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Did you feel that money was a scarce resource?

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Did your parents use money as a controlling agent?

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Were they generous with money or not?

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Did you work as a child or teenager?

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**Finally, consider if there were any particularly stressful or traumatic events in your childhood.**

Describe any of the following: deaths, moves, bullying, taunting, teasing, emotional or physical abuse, changes in school situations, conflicts with teachers, or changes in family situations?

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Have you ever been subjected to any episodes of unwanted sexual activity or sexual abuse?

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Childhood experiences create very powerful reactions in our minds that remain for the rest of our lives. Emotions that are generated when we are young can very easily get triggered later in life, and, when they are triggered, can cause the start of Mind Body Syndrome. It is usually relatively easy to identify the childhood issues that people with MBS have grown up with. It is well known that a large percentage of the people with irritable bowel syndrome, fibromyalgia, TMJ syndrome, and other MBS illnesses have been neglected or abused—sexually, emotionally, or physically—as children or adolescents. People who have suffered from severe childhood abuse are most likely to have many forms of MBS.

I saw a woman whose mother was a prostitute and a cocaine addict and whose father was a heroin addict who sexually abused and even tortured her. She became a prostitute and a cocaine addict as an adolescent. She eventually went to jail, broke her addiction to drugs, and was able to raise a daughter and find a job. However, over all those years of traumatic experiences, she developed fibromyalgia, migraine headaches, irritable bowel syndrome, TMJ syndrome, chronic fatigue, back pain, insomnia, anxiety, depression, and several other MBS disorders.

Not everyone with MBS has had severe childhood traumas, however. For many people, the childhood issues that generate strong emotions are normal childhood experiences. How many of us have felt jealous of a sibling or ostracized by friends in middle school or picked on by a bully in elementary school? These common experiences can also generate enough emotions to cause MBS syndrome, either at the time of the events or, more commonly, later in life.

I treated a woman who grew up with loving parents but with a difficult younger sister. Her sister was constantly in trouble, and my patient was always covering up for her, even though she resented her sister lying and avoiding responsibilities. When my patient was thirty-three years old, she was leading a team at work in an important project. One woman on the team avoided her share of the work and tried to cover up her lack of effort. My patient was trapped in a situation eerily similar to that of dealing with her younger sister and had to double her work to get the project completed. During that time, she developed back pain because the situation at work triggered the stored emotional reactions from her youth. Several years later, she developed headaches every time she drove across town to visit her father, who was in a nursing home that her sister had selected for its proximity to her. After learning of her life story, it became clear that her resentment of her sister was the underlying trigger for the back pain and headaches.

### STEP 3: CORE ISSUES

Once you have carefully and honestly reviewed the stresses in your life, you will likely begin to see patterns. You will be able to identify your “core issues,” those issues that

have been stored in your subconscious mind and that are most likely to trigger the onset of physical and psychological symptoms. Indicate which of the following patterns apply to you, or describe any other patterns that apply to you.

1. Loss and abandonment (losing a parent or sibling, divorce, moving) \_\_\_\_\_
2. Childhood abuse or neglect (physical, sexual, emotional abuse; never feeling loved or cared for) \_\_\_\_\_
3. Not fitting in or feeling ostracized (being teased or picked on, being shy and reserved, not being athletic or popular) \_\_\_\_\_
4. Feeling pressure to succeed or be perfect (from parents, other family members, church or religious organizations, or self) \_\_\_\_\_
5. Feeling inferior to siblings or other relatives (not as beautiful, funny, athletic, interesting, accomplished) \_\_\_\_\_
6. Never feeling good enough, having to "earn" love from parents, feeling criticized much of the time \_\_\_\_\_
7. Resentment and/or anger towards family members, religious leaders, neighbors \_\_\_\_\_
8. Learning to be anxious, worried, or insecure \_\_\_\_\_
9. Identifying with one or several family members and trying to emulate them; trying to be different from one or several family members \_\_\_\_\_
10. Other patterns \_\_\_\_\_

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## STEP 4: PERSONALITY TRAITS

These factors are commonly seen in people with MBS. Check those that apply to you.

Would you describe yourself as:

1. Having low self-esteem \_\_\_\_\_
2. Being a perfectionist \_\_\_\_\_
3. Having high expectations of yourself \_\_\_\_\_
4. Wanting to be good and/or be liked \_\_\_\_\_
5. Frequently feeling guilt \_\_\_\_\_
6. Feeling dependent on others \_\_\_\_\_
7. Being conscientious \_\_\_\_\_
8. Being hard on yourself \_\_\_\_\_
9. Being overly responsible \_\_\_\_\_
10. Taking on responsibility for others \_\_\_\_\_
11. Often worrying \_\_\_\_\_
12. Having difficulty making decisions \_\_\_\_\_
13. Following rules strictly \_\_\_\_\_
14. Having difficulty letting go \_\_\_\_\_
15. Feeling cautious, shy, or reserved \_\_\_\_\_
16. Tending to hold thoughts and feelings in \_\_\_\_\_
17. Tending to harbor rage or resentment \_\_\_\_\_

## 18. Not standing up for yourself \_\_\_\_\_

Conflict in one's mind is a very important part of the mechanism that creates and perpetuates MBS. The traits above are aspects of the conscience—they are things that we feel obligated to do or ways we feel obligated to be. Most people with MBS are people who try hard, who care what others think of them, who want to be good and want to be liked. They tend to be conscientious, responsible, and hard on themselves. These personality traits are generally found in good people, people you would like to know and be friends with. The problem is that people like this put extra pressure on themselves. They tend to get down on themselves and beat themselves up for their failings. When external events and stressors occur and we compound the stress by putting more pressure on ourselves, we are much more likely to develop MBS.

## STEP 5: FINDING CONNECTIONS BETWEEN LIFE STRESSES, CORE ISSUES, AND THE ONSET OF MBS SYMPTOMS

Once you have identified your core issues, review the list of potential MBS symptoms above. On the next page, list the times in your life when you developed any of the MBS manifestations in chronological order. Think carefully about what events occurred just prior to or during the onset of symptoms. You will typically find that the symptoms began at or shortly after you experienced something that was stressful and that reminded you of your core issues (triggering your emotional speed dial), and you felt trapped in that situation. List each symptom, then write down the triggering events or situations, and the emotions and/or core issues which caused the symptoms to occur.

When you place the symptoms and diagnoses that have occurred next to the life stressors, see what patterns emerge and what connections you can make. This is a critical step in figuring out why you have MBS. Do this for each of your MBS symptoms. For each symptom, think carefully about what was going on in your life at the time this symptom began. What events had occurred that bothered you? What emotions did you feel? How were these events or emotions similar to those you experienced in childhood? Which core issues might have been triggered? Did you feel trapped in some way, either physically or verbally?

Be as open and honest as you can in this process. Often it is very obvious that stressful life events in childhood have created the emotional memories of hurt, loss, fear, guilt, or anger, and it is equally obvious that certain stressors later in life triggered MBS symptoms. However, sometimes it takes a fair amount of introspection and searching to find the connections. It is common for mild stressors in adult life to trigger significant symptoms if the stressor is related to earlier stressors, particularly from childhood. Neglect or lack of love by a parent can create a childhood hurt that can get triggered later in life by seemingly mild interactions.



Can't Find Anything Wrong, and Nancy Selfridge's Freedom From Fibromyalgia. My book, Unlearn Your Pain, is also available and has been helpful to a number of people.

- See a doctor or psychologist who specializes in MBS. There is a list of such people in the Resource section of this website. If you would like to make an appointment with me, you can contact me at [hschubiner@gmail.com](mailto:hschubiner@gmail.com).

Once you have the correct diagnosis and you can say to yourself, "I have Mind Body Syndrome," you are ready to use the rest of this book to heal yourself. If you participate in this program, it is very likely that you will reduce or eliminate your MBS symptoms, increase your understanding of yourself, and learn how to gain control and mastery over your mind and body. In fact, the program has been so helpful to so many people that most people who have taken the program recommend it to everyone they know, including those who do not have symptoms of MBS.