Life Mission Theory VIII: A Theory for Pain

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Abstract

Holistic theory, strongly inspired by integrative, transcultural medicine and psychodynamic theory (Sigmund Freud (1856-1939) and the tradition of psychoanalysis), perceive a person as a whole (a true self) composed of body (with an Id), a mind (with an Ego) and a spirit (with a “Higher Self”). Therefore the will to exist is manifested though body, mind, spirit and heart, and holistic pain theory claim that pain basically arises, when the will to exist is compromised. Pain is thus existential and related to our wholeness as human beings, but this existential pain can be repressed to one of the three partial existential domains, either the spiritual, mental or the physical part (the spirit, mind or body). The reason for repressed pain to body and mind is mostly repression of unbearable pain. Most pains are according to the theory caused by non-organic, informational disturbances, which are caused by internalized and repressed early existential and emotional conflicts. When these old existential issues are solved, and the patient re-discover herself and her purpose of life, and starts living her mission of life and using her great talents for the benefit of the world, most pain evaporates like “small pearls of water in the hot summer sun”. In this paper we show how a simple holistic theory of pain leads to effective holistic pain management in the clinic, and sometimes even existential and physical healing of the patient.

Keywords: Holistic health, life mission theory, pain theory, pain management, sense of coherence, Denmark.

Introduction

Pain is one of the most troublesome and mysterious phenomena and a frequent reason that brings the patient to consult their physician. Relief of pain is one of the most important functions of the physician. In this paper we suggest that pain is the experience of something going against our will to exist. As this will is originally manifested at a global, existential level, pain is fundamentally an existential experience. If existential pain cannot be overcome, it

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A Holistic Theory for Pain

Pain is often thought of as a subjective experience, unique to each individual. However, within the realm of psychology, pain is understood as an interwoven experience involving both physical and emotional components.

Theories of Pain:

1. Psychological Approaches: Pain is seen as a product of the mind, influenced by thoughts, emotions, and memories. This approach emphasizes the role of psychological factors in the experience of pain.

2. Neurobiological Approaches: Pain is seen as a bodily response to injury or damage. This approach focuses on the biological mechanisms that underlie pain perception and intensity.

3. Behavioral Approaches: Pain is seen as learned through conditioning and experience. This approach suggests that pain can be controlled through behavior modification and conditioning techniques.

4. Social-Cultural Approaches: Pain is seen as a social construct, shaped by cultural, social, and environmental factors. This approach emphasizes the role of societal expectations and cultural norms in the experience of pain.

5. Integrative Approaches: Pain is seen as a multidimensional experience that incorporates elements from all of the above theories. This approach recognizes the complexity of pain and seeks to address it from multiple perspectives.

The Interdisciplinary Approach:

Pain is not just a physical sensation, but a complex phenomenon that involves psychological, social, and biological factors. By taking a holistic approach, we can better understand and manage pain, providing a more comprehensive treatment strategy.

References:


Conclusion:

By understanding pain from a multifaceted perspective, we can develop more effective strategies for managing and relieving pain, improving the quality of life for those affected.
Researchers much less agree upon what happened with the repressed material; to answer this most important question seems to be one of the major research challenges of the present century.

The most simple answer seems to be that the internalized conflict material is kept by the informational system of the organism; it seems that it can be repressed to still deeper levels of existence; and in this "fall" from spirit to body though mind, there seems to be a fall in consciousness, from the clearly seen and aware, to the hardly known and dark.

Responsibility seems to be lost in the process of repression; and the closer the repressed material comes to the body; the more modest is the existential responsibility and spiritual ownership of the repressed material.

The internalized and repressed existential conflicts are thus haunting the human being like an internal ghost (21-27). The pain can move around in the body (28), suddenly appear in dreams, be activated by difficult life events and losses. It can according to holistic medical theory fixate in bodily tissues giving raise to even the most severe diseases like cancer and heart disease, immunological disturbances like autoimmune diseases etc.

It is most disturbing that pain thus can shift from body to mind and from mind to spirit and existence, and vice versa back again (29,30). And often all logic seems to be gone; a huge tumor burden from cancer can be connected with no pain at all; and a most severe pain can have no physiological reason at all.

**Holistic Pain Management**

A 65 year old woman with breast cancer and metastasis to the skin of her back. This patient was hospitalized at the University Hospital and she received solely palliative care with all hope of her fighting her cancer long gone. She received high doses of morphine, but her pain continued in full strength in spite of the drugs. In the search of a way to help the patient massage on the most painful area of her high back was offered. To the surprise of both patient and physician the pain of the skin disappeared almost completely after only five minutes of kind attention to the skin area.

This is a typical – but almost absurdly powerful reaction - to the human kindness offered patients in holistic therapy. "Holding", the combination of acknowledgment, awareness, respect, physical care and acceptance, is giving patients what they need in order to turn inwards toward their existence and re-find their sense of coherence, and the connection to self and existence that was lost, causing the existential pain, which was then somatised.

The first thing to do to help patients getting rid of chronic pain, anatomical or non-anatomical, is therefore giving holding to the patient (31-34). The next thing is to take the patient back in time into the moment of repression of the existential conflicts most often with father and mother. Interestingly, the processing step is often happening spontaneously, as in the example above, when the patient has the necessary confidence to relax and turn all attention inwards, as in the example above.

A well-spoken and intellectual patient can benefit tremendously from wording his purpose of life and working dedicatedly to putting it – and all the talents hidden in it - into a fruitful and valuable life-practice. Formulating a life-philosophy, writing a whole-life-biography, reading books on existential philosophy and holistic healing can also be of surprising help in managing chronic pain. Most interesting, what alleviates the pain, is also what cures the diseases: taking the informational disturbances out of the organisms informational system (35-37).

In clinical holistic medicine the strategy for managing pain is therefore not coping with the pain, but curing the patient. Cancer, heart disease or how hopeless it looks, is no excuse for not trying to cure the patient; even if this most often is doomed to fail, but much pain can be relieved this way (38-45).

**Discussion**

In principle, drugs and holistic care can be perfectly combined. As there is only very limited side effects (except from adaptation and dependency) of heroin and morphine, these classical drugs are the drugs of choice when NSAID and similar painkillers are not helpful.

But as pain is most often psychosomatic and caused by internalized existential conflicts, morphine
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Conclusion

References

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