

## **Emotions and Pain**

By Ben Benjamin, PhD and Conny Huthsteiner, MD

It is common folk-wisdom that emotional suffering can be experienced as physical pain, but many times it is difficult for a person to sort out how emotional distress plays a role in the experience of physical pain, and if it does, what to do about it.

The words "to feel" are used to describe both physical and emotional phenomena. Our nervous system feels physical sensations of temperature, pain and pressure, as well as the emotional sensations of pleasure, fear and grief. In Western culture, we often strive to separate the physical from the emotional, often embarrassed that our emotions play a part in our perception of things, assuming somehow that they could lead us astray or distort our understanding. This stigmatization of the emotional experiences of life creates a barrier that can prevent us from feeling and experiencing life to the fullest, in all aspects.

One revolutionary physician of our century saw the fallacy of such an attitude, and rigorously included his sensory and emotional responses to all his scientific observations in his research. Wilhelm Reich, a psychiatrist famous for formulating fundamental concepts of character analysis in psychoanalysis, created the concept of "psychosomatic unity." The term describes his observation that psychological and physiological processes form one unit. He came to this conclusion after observing that electrical conductivity of the skin varied in direct reflection of a person's subjectively perceived feeling of pleasure or displeasure. The objective experience of sensation could not be accurately assessed without integrating information about the subjective experience.

Dr. Reich wrote about the fact that a person's whole "way of being" contributes to his or her capacity to feel pleasure, know his or her self and perceived surroundings in a realistic and reasonable way. Examples include the athlete who can run 500 yards on a broken ankle and not notice that it hurts, thereby injuring it further; the depressed person who hurts all over and is unable to get out of bed; a diabetic who injects insulin daily and is affected emotionally by the daily burden of coping with a dangerous illness; and the

teenager who has broken his back and may have to live the rest of his life with pain and disability making it difficult to be happy. Our personalities and feelings affect our physical health, and vice-versa. Our emotions and physical health are inextricably intertwined. Trying to meticulously separate the objective or subjective aspects of injury or pain brings limited benefits, since both aspects of a person often must be treated in order for that person to feel well.

In addition, Dr. Reich developed a somatic psychotherapy to release barriers to the flow of emotional energy in the body. He called this therapy "psychiatric orgone therapy." Reich theorized, on the basis of his clinical observations, there was an energy that governed involuntary biological functions in the body that, when blocked, led to disease states of different kinds. He called this biological energy "orgone energy." Orgone energy is similar to chi or prana energies, and derives from Freud's early psychoanalytic concept of the energy of drives. The barriers to the energy flow he called "armoring," which were emotional or physiological blocks to the process of feeling sensation and expressing emotion. Many schools of somatic psychotherapy have grown out of his discoveries, including bioenergetics, core energetics, and radix therapy - to name but a few.

How does this relate to the experience of pain? It informs our need as health care professionals to address the "total person" when trying to treat someone for any pain condition. When a person has physical pain due to injury of some tissue in the body, like a muscle, tendon, ligament or joint, there is often both a physical and emotional component to the pain and its treatment. Both of us, a muscular therapist and a psychiatric orgone therapist, would often work with the same client - one dealing with the physical damage, like scar tissue and inflammation; while the other would work to free the energy blocked by the experience of the injury or by the dramatic and depressing curtailment of mobility and activity that followed the onset of the pain. It doesn't matter if the pain was brought on by an accident or if it appeared for no apparent reason from normal wear and tear on the body.

### **Examples from our practices**

A 35-year-old woman sought muscular therapy treatment because of low back pain. She suffered a severe horseback riding accident at 19 while attending college. Her low back area was sensitive and jumpy, making it difficult to work on her injured muscles and ligaments; she would become tearful during the treatment sessions when the low back was worked on, even gently. It was suggested by the muscular therapy practitioner that she simultaneously undergo orgone therapy to work on the emotional issues and blocked

energy surrounding the accident.

Her orgone therapy attempted to connect the tension in her low back with her memories of the circumstances at the time of the accident. When her low back was probed to unblock (move) the energy, she relived the experience, which revealed that she actually broke her back and nearly died after the accident. An additionally traumatic and emotional part of the incident was that her parents, who lived just 800 miles away, never came to see her while she was recovering in the hospital. Each week, when the orgone therapist worked on her back, she relived these painful memories. This continued for almost two months, until they suddenly stopped. She had worked through the emotions connected with the injury, and could then focus on the physical healing of her body, which had never been fully addressed. Thereafter, when her low back muscle and ligament injuries were worked on, her body could accept the treatment and her condition improved significantly.

A man sought body-oriented orgone therapy complaining of severe migraine and tension headaches. The migraines were so severe that he had to go to bed for several days in a darkened room until they passed. He also suffered a headache whenever he rode in the car as a passenger and turned his head to speak to his wife, who was driving. After several therapy sessions it became clear that he would get the migraines when he was upset with someone and could not speak his mind. He had great difficulty accepting that he was angry with someone, and confessed to fantasies of physically hitting and hurting the person he was angry with, which frightened him. His head was frequently hot when touched, and his hands and feet were very cold. His energy was blocked in his head, and was withdrawn from the periphery of his body; he had great difficulty expressing himself emotionally. The psychotherapist also noticed that he had difficulty rotating his head, and recommended that he seek a musculoskeletal assessment and possible treatment from a massage therapist for the headache problem, while undergoing orgone therapy.

The assessment revealed the man had suffered migraines for 10 years. He had been in a car accident two years prior, in which he sustained a whiplash injury. It was after this accident that the tension headaches began. Whenever he rotated his neck to the left to talk to his wife while she drove, he would get the occipital headaches. It was clear that he had severely injured ligaments in the neck and microtears in the occipital muscles at the base of the skull. His energy and circulation were blocked in the head, arms and legs.

Working together, the doctor and the muscular therapist treated the man weekly for several months. The body-oriented psychotherapy helped the man express his feelings of anger and sadness at how immobilized and powerless he felt, while the muscular therapist freed up the scar tissue in the neck and at the occiput. The headache, which was caused by injuries to the neck and occipital muscles, and referred pain to the entire back of the head, abated after the muscular therapist broke up the scar tissue. The migraines - the result of a great deal of suppressed rage and sadness in this particular case - improved as the man grew more able to express his feelings more fully and appropriately.

Our psyche and soma are like the front and back of the hand - one does not exist without the other. Seeing the whole person in the context of his or her life, and treating the emotions and psychological blocks along with physical pain or injury is often the most intelligent and effective way to approach the healing process.

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