

"My Leg Is Attacking Me!"

MIND AND BODY INTEGRATION METHODS TO ALIGN PATIENT AND SYMPTOM INTO A COOPERATIVE WHOLE

Kamala Quayle, MSOM, LAc

Attending to emotional and psychological issues, as well as to the body, is an important skill for acupuncturists. These factors influence not only how we experience illness, but also our capacity for getting well. We hear our patients say things we know have deeper emotional implications, but we often do not know how to address these issues directly. For the most part, we incorporate the emotional aspect by choosing points on an appropriately related channel and hoping they will do the work.

However, exploring the immediate physical, mental and emotional experience of the patient often reveals hidden factors underlying an illness. The key is to help the patient turn their mind toward their present experience. When we discover the underlying process, the necessary steps toward healing become clear.

This article demonstrates a way of working directly with the patient's psyche as it manifests through body symptoms. It shows how to align patient and symptom into a cooperative whole to reduce pain and promote healing.

"Rose" (patient's name changed to protect confidentiality) came into my office to receive acupuncture for pain in her hip and leg. She told me she had hip replacement surgery last year, and had been in pain ever since. She had gone for physical therapy, received chiropractic adjustments and consulted with the surgeon who performed her surgery. None of the treatments or advice that she received had helped. In previous weeks, the pain had increased, making it difficult for her to do her office job, or even to feed the animals on her small farm. Rose winced at the slightest touch to her hip and thigh.

At our first session, I concentrated on the gallbladder meridian and placed acupuncture needles in her hip, thigh, lower leg and foot. When she returned for her second session, she said that she felt some relief after the first treatment, but it was not lasting.

As we spoke about the pain she was having in her leg, Rose said she experienced a sudden sharp pain. "I feel like my leg is attacking me," she said. Nevertheless, she would try to push through her day, coping with the pain and accomplishing as much as she could.

As I listened to Rose, I learned several things about her. She is an energetic person who works hard and does a lot during her day. She is in charge of many projects, and it is hard for her to let go of some of her responsibilities. She considers the leg pain an inconvenience and feels impatient with the slow progress of her recovery from surgery. Additionally, she feels vulnerable about slowing down. Another thing I heard was that Rose experiences her leg as separate from herself.

I wanted to acknowledge her concerns and build more rapport with her. "Rose, I know it's hard for you when you can't do all the things you usually do," I said. "You're right," she replied. "I feel like I have to do my part."

Building rapport with patients implies that I am listening closely to and reflecting back both the content (words) and process (feelings) of their presentation. Reflecting back what I had heard makes Rose feel like I understand her and gives her the opportunity to clarify what I may not have understood. It also enables me to align myself with her, in her desire to move toward healing.

When Rose said she has to do her part, she meant she takes a lot on herself alone. I knew that feeling supported by someone else would mean a lot to her. "Let's work together to pay a little closer attention to your leg today," I said. "I would like to help you focus on your leg muscles and see if we can get a sense of what they think they are doing. When you say that your leg is attacking you, it sounds like you and your leg are at odds with each other. If we can get the two of you to cooperate, it is better for healing." Rose agreed.

After Rose got situated on the table, my goal was to help her become more mindful of the kinesthetic experience she was having in her thigh muscle. "Feel the muscle tissue in your thigh and tell me any words that describe the tissue itself, such as *knotted* or *stretched*," I suggested. "The muscle seems *dense* and *grabbing*," she replied. "Stay with that feeling of dense and grabbing for a moment and see if there is anything else you notice about that experience, such as how strong it is or how much of your leg is involved." "It's mostly the middle of my thigh and it feels like it's holding tight to the bone," she said. "Is there a mood that goes with that holding to the bone?" "Well, it feels protective." "Keep feeling the protective mood of your thigh muscles. Your cells are intelligent. What do these cells seem to be doing? What do they think their job is?" "They feel that they are protecting me. When they get activated, they grab hard, all of a sudden, and then I feel a lot of pain." "So they are protecting you. That's different than attacking you. When you are going about your day and your muscles are at their limit, they start grabbing and protecting you." "Yes," she agreed.

With that interaction, Rose became aware of herself in a different way. The leg that was her enemy had now become her friend. The next step was to acknowledge this information and let it percolate within her as she rested with the needles.

I inserted needles in her hip, thigh and foot. The treatment was much like the first one I had done. I asked Rose to relax with the needles and acknowledge the information she had just discovered. I suggested that, as she exhaled, she could imagine that she was sending her breath down the outside of her hip, thigh and lower leg, and then out through her toes. This simple *qigong* exercise, which traces the route of the gall bladder meridian, gave her a way to have a different kind of relationship with her leg. When I returned, Rose was very relaxed and told me she was going to listen to herself in a different way.

At Rose's next visit, she reported that her leg was 60 percent better than last week. "I have been paying attention," she remarked. "I work until I feel my leg, then I say I have to stop for the day. I go home and relax. One day, it got pretty painful and I was afraid, but the next morning it was fine. I kept doing the breathing down my leg exercise, and it felt like it lengthened the muscles and soothed them."

Rose has continued to get better and has not had a relapse in two months. She is very excited about her recovery. At her last visit, she said the pain in her hip and leg was completely gone.

The powerful thing about our second session was Rose's awareness of her kinesthetic in-the-moment experience. As practitioners, we rarely take a person to this depth because we are focused on the assessment and treatment protocols of our practice. We may also feel we don't have the time or experience to go to this depth. However, once we develop our skill base, we can accomplish a lot in a short amount of time.

The skills needed to do a session like this start with an attitude of respectful attention and mindfulness on the part of the practitioner. We can learn to follow and attend to what has meaning and energy for our patients, as we perceive it through their body language and style of communication.

Next, we need to create an attitude of curiosity and a state of mindful self-awareness within the patient. Pain and other difficult physical symptoms often cause people to block or avoid their experience. This avoidance can also block understanding and awareness of the meaning of physical symptoms. With skillfulness, we can direct our patients into their physical and emotional experiences long enough for them to perceive the inner workings more clearly. As the thinking mind quiets, the light of awareness shines with increasing brightness.

Finally, we need to clearly perceive and stabilize the inner resource that arises for the person. It may manifest as something that is said, or as a subtle gesture or facial expression that lets us know something important has just occurred. In Rose's case, it was the "aha" that occurred when she realized her leg was protecting her. For her, the switch in perception of her leg as an enemy to her leg as her friend and protector was an important part of her recovery.

When we recognize the healing message, our role is to validate it and help our patients savor it for a while. We can then suggest an exercise that will help integrate a new way of being. In Rose's case, the visualization of her breath flowing down her leg was an exercise she found very useful. She also decided to pay closer attention to the pain signals from her leg and to stop work earlier.

The integration of mind and body skills with acupuncture work is more powerful than either of the two alone. These skills are precise and attainable. They can easily be incorporated with any style of acupuncture.

SEPTEMBER 2007