

Dr. Srimi Pillay, Best-Selling Author, Examines Healing Your Body With Your Mind for the New Year in "Psychology Today"

By Dr. Srimi Pillay.

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EINPresswire.com/ -- New Year's
resolution: Stop ignoring how your
mind and body are connected.

"Psychological problems" are generally
managed by experts of the mind, brain,
and behavior (e.g. psychiatrists). Other
medical problems are managed by
experts of the body in general (e.g.
primary care physicians) or people with
specific expertise in one particular
organ (e.g. cardiologists when there is
a heart problem).



Srimi Pillay, Best-Selling Author and Neuroscientist

On the surface, this may make sense.
Yet, historical and emerging research
indicates that this makes no sense at all. More and more, we are seeing that your body's
wellbeing is inextricably linked with your psychological wellbeing. And by addressing your
psychological wellbeing, you can change your body too.

Psychosomatic problems: asthma, gastrointestinal upset, cancer, and other conditions: Prior to
the dominance of "evidence-based" approaches to medicine, Sigmund Freud noted four
situations in which the psyche and the body appear to be connected: conversion syndromes, in
which people may, for example, develop fake paralyses that they are unaware of; neuroses like
panic attacks, where patients may develop dizziness or palpitations; hypochondriasis, where
patients are almost paranoid that they have physical symptoms; and actual organic illnesses like
cancer, where the psyche plays a role (e.g., via health-relevant behaviors that increase risk). In all
of these conditions, deep psychological factors likely play a significant role. For example, at "The
Paris Psychosomatic School," preliminary studies have indicated that there is a correlation
between basic personality structure and the risk of developing cancer.

Action to take: If you have a physical illness, see a therapist to explore whether it may be helpful
to investigate the psychological underpinnings of your physical condition. Don't delay
psychological examinations. They are not necessarily as disconnected as they may seem.

Depression and your heart: People who have suffered from a cardiac event are more likely to
develop depression. While lifetime prevalence rates of major depression are in the order of 17
percent, in those who have suffered a major cardiac event, up to 40 percent of patients meet the
criteria for major depressive disorder (MDD). Also, MDD itself places you at a greater risk of
heart disease. In fact, the more severe your depression, the greater the risk of coronary artery
disease (CAD).

Action to take: Do not assume your depression is "all mental" or that your heart disease is "all physical." Ask your primary care physician (PCP) to check your baseline heart function, and then follow-up as regularly as you both see fit.

If you have heart disease, explore whether you have depression and whether it should be treated. Also, explore the factors common to both. This may help your depression and your heart too.

Anxiety and your heart: It is well-known that symptoms such as palpitations may arise from heart conditions such as arrhythmias, or psychological conditions like panic disorder (PD). However, people often act less on the data that demonstrates that 32 percent of patients with heart failure experience elevated levels of anxiety, or that in a study of nearly 80,000 individuals without pre-established CAD (and half with PD), PD was associated with a nearly two-fold increased risk of incident CAD.

Action to take: If you have heart disease, you must decrease your anxiety. The idea is not to panic even more about this association but to be proactive about protecting your heart. Do regular checks with your PCP, and do not ignore cardiac symptoms by assuming they are always due to panic disorder. Also, ask your mental health provider to connect you with a PCP so that they can help you to discern when to be concerned about your heart. Worsening symptoms or new additional symptoms may, for example, help you decide when to go to an emergency room.

If you have heart disease, explore whether you have conscious or unconscious anxiety and whether this should be treated. This may help your anxiety and heart too.

The gut-brain connection: While the precise bacteria implicated in depression are not certain, there is increasing evidence that abnormal gut bacteria are linked to depression. Bacterial composition may also affect how your body manages stress, and abnormal gut bacteria are associated with greater anxiety.

Action to take: Certain probiotics may reduce anxiety or depression. While conclusive studies are lacking, work with your PCP to see how dietary changes may help your anxiety and depression. A higher quality diet is associated with a lower risk for the onset of depressive symptoms and eating too many refined foods puts you at risk for depression and anxiety too.

If you have an upset GI system, address your diet, anxiety, and mood. They are all connected.

Your immune system and depression: There are many studies that connect poor immunity with depression. Some studies indicate that depression itself may be the result of dysfunction of the immune system. And many studies show that the immune system is impacted in anxiety disorders as well.

Action to take: Discuss the connection between anxiety and immunity with your PCP. Ask, "could my autoimmune disease be linked to anxiety?" or "Should I also be treated for anxiety?" Also, simply getting a better night's sleep can improve your immunity and anxiety as well.

If you have an autoimmune disorder, address your sleep and mood too. This could not only help your mood but also your immune system.

Summary: The argument about whether your mind and body are connected is mostly unnecessary. They are most certainly connected. As to what causes what, the jury is out. Still, from the above associations, we know that your brain, heart, gut and immune system are all implicated in depression and anxiety. You can't ignore your body while attending to your mind, or vice versa.

The functional medicine model of care is based on reversing illness, promoting health, and optimizing function by addressing the nuances in functional imbalances in interconnected biological networks. This model of care that integrates nutritional and lifestyle recommendations also takes into account the fact that your entire body is connected. Recent research suggests that this approach to health is superior.

Mental health probably influences your physical health and vice versa. In the new year, strive to integrate the two. Remember, just because your illness is physical does not mean that a mental or lifestyle intervention is irrelevant. A happy body relies on having a mind that is settled, kind, and compassionate to yourself.

<https://www.psychologytoday.com/us/blog/debunking-myths-the-mind/201912/how-heal-your-body-your-mind-in-the-new-year>

<https://drsrinipillay.com/>

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Pillay is the founder and CEO of NeuroBusiness Group, voted one of the Top 20 movers and shakers in leadership development in the world by Training Industry. He has worked with leaders internationally in many Fortune 500 companies, and is currently an invited member of The Consortium for Advanced Adult Learning and Development (CAALD) at McKinsey & Co. and The Transformational Leadership Council (TLC). Recently, Pillay created a series of videos on "Managing Depression in the Workplace" for LinkedIn Learning.

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