



Try Hypnosis and Counseling for IBS and Crohn's

Mind-body techniques show real promise when it comes to easing the pain of some digestive disorders.



By Michelle Andrews

Nov. 19, 2008

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Gas. Bloating. Diarrhea. Cramps. The digestive system has many varied and unpleasant ways of asserting itself when the process isn't going smoothly—all well worth pondering as the holidays approach. But while everyone suffers the occasional Imodium moment, a surprisingly large number of people wrestle every day with more disabling disorders, from Crohn's disease to gastroesophageal reflux disease to irritable bowel syndrome, which by itself afflicts as many as 1 in 5 people. For many, severe pain and the unpredictable need for a bathroom can mean living life as prisoners in their own homes.

Medications offer relief for a number of gastrointestinal conditions. But some drugs have been withdrawn from the market or restricted—Zelnorm for IBS, for example, was pulled because it increased cardiac risks—and side effects can be a problem. So, researchers have recently taken an entirely new approach, focusing more on the head than on the plumbing. Studies have shown that mind-body techniques such as cognitive-behavioral therapy and hypnosis are effective at reducing the symptoms of irritable bowel syndrome, which causes pain and altered bowel movements; people being treated for Crohn's disease and ulcerative colitis, which feature inflammation of the intestinal tract, respond to the same techniques. Although there have been no head-to-head comparisons, "the results of these studies do look a little more impressive than pharmacological studies," says Nicholas Talley, a gastroenterologist who's chair of the Department of Internal Medicine at the Mayo Clinic in Jacksonville, Fla.

Stabbing pain. By helping people learn to change their thoughts about their conditions and relax the knot of anxiety tying up their gut, mind-body therapies have brought relief in mere weeks to people tormented for years by disabling bowel problems. "It's made a world of difference," says Teague Avey, 29, who was diagnosed with Crohn's five years ago after landing in a Chicago emergency room with

pain so bad he felt like he was being stabbed in the gut. Following an eight-day hospital stay, Avey was put on an immunosuppressive drug to try to forestall a recurrence of the autoimmune disease, in which the tissues lining the digestive tract become painfully inflamed. But he had flare-ups every few months and missed work and canceled social plans when he felt an attack coming on. Then, he learned that researchers at Northwestern University were using hypnosis to treat symptoms in patients with various forms of inflammatory bowel disease. Over seven weeks last summer, Avey learned how to use visual images while under hypnosis to help him relax and ease the pain. He imagined his intestines as the walkways of a formal English garden, for example, and his easy stroll along them as how he'd like his system to work. At other times, he entered an imaginary cabin in the woods, where he felt safe and comfortable. Avey's symptoms have improved markedly since he completed the study.

No one knows precisely how hypnosis works on the body, says Laurie Keefer, the director of psychosocial research in gastroenterology at Northwestern's Feinberg School of Medicine. But it has been shown to alter pain perception and suppress the secretion of stress hormones. When people are in the extremely relaxed, focused state induced by hypnosis, they are open to therapeutic suggestions: in this case, that their digestive system will work smoothly, for example, or that their abdominal pain will grow weaker with time.

There's no question that stress and anxiety play a huge role in GI problems, and these gut reactions make perfect sense given humans' sensory architecture. Sandwiched between the layers of tissue lining the digestive system are hundreds of millions of interconnected nerve cells—more even than exist in the spinal cord. This gut-based nervous system has been dubbed the "second brain" because it regulates most digestive functions, like muscle contractions, peristalsis, and fluid secretion, without ever involving the "first" brain, though generally the two are in close communication. If the actual brain experiences a stressful situation, for example, it sends messages to the second brain, which releases chemical substances responsible for all that intestinal grief. Likewise, the digestive system, with a surface area as long as a football field, shoots out distress signals to the real brain when things are not working properly. "If I had to take a guess, I'd say GI input [to the brain] is responsible for about 80 percent of our sense of well-being," says Emeran Mayer, director of the Center for the Neurobiology of Stress at UCLA.



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