

CONQUERING CHRONIC HEADACHES: SOMATIC SELF-CARE FOR TRANSFORMING PAIN

by
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**Chapter 20 in the anthology,
BEING HUMAN AT WORK:
Bringing Somatic Intelligence Into Your Professional Life**

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Charles used to visit my office in the throes of a three-day sick migraine. He began each visit nauseated and so weak that he could barely hold his head up; his face emitted a grey-green pallor. Forty years old, he had been dealing with his migraines, using one medication or another, since he was twelve. Following my one-hour headache treatment, his color would turn from green to white, and his posture would straighten. He would announce that his headache was gone and that he was hungry and ready to go home, eat, and sleep.

Charles is one of an estimated forty to fifty million people in the United States who experience chronic headaches. Fifteen to twenty-five million of them are debilitated by migraines, two-thirds of whom are women. Research studies show that employers and workers spend an astonishing \$1.3 billion each year on medical treatment for chronic headaches. Missed and inefficient work due to headaches and migraines takes an even greater toll on businesses with an additional \$13 billion in lost productivity annually.¹

These statistics provide ample evidence that the conventional approach to prevention and treatment of chronic headaches doesn't work. I invite you to explore a new approach, *somatic self-care*, which provides people with real solutions for ending the cycle of chronic pain.

The Conventional Approach

Marla had a fourteen-year history of daily "mixed" headaches, a combination featuring the worst symptoms of both tension and migraine headaches. The headaches were pulsing, pounding, and nauseating. She had been taking Excedrin, an over-the-counter pain preparation meant for short-term use, nearly every day for fourteen years. Marla enrolled in and completed one of my programs sponsored by the health education department of a health maintenance organization. Despite my assessment that she was habituated to her remedy and that it was causing rebound headaches, Marla insisted that her pills were the only thing keeping her from even more severe pain.

Many people who suffer from chronic headaches are like Marla. All they care about is staying still and doing whatever they can to stop their pain and related symptoms. They take one prescribed medication for relief, another for prevention, an antidepressant, plus an over-the-

counter pain or sinus preparation. If those don't work, they may even go to the emergency room for a shot of Demerol.

Unfortunately, the pharmacologic approach to headaches is not without serious side effects. These vary according to precise medication taken, but often include dizziness, loss of appetite, nausea, vomiting, diarrhea or constipation, gastric bleeding, and sedation, not to mention an increased risk of stroke. The most troubling consequence of regular intake (more than fifteen times per month) is medication overuse, which causes the patient to suffer rebound headaches, sometimes daily, as soon as the level of medication in the bloodstream is reduced. Thus, patients have a strong incentive—increased episodes of pain—to continue their chronic reliance on drug therapy. In a study presented at the 2001 International Headache Congress, the triptans, formerly an invincible family of headache drugs, were shown to be the most quickly habituating when compared to opioids and analgesics. Medication overuse can be caused by frequently combining analgesics, opioids, ergot alkaloids, and triptans.²

My Path to Headache Healing

My own lack of success with over-the-counter headache medications prompted me to find a new approach for my premenstrual migraines. In 1970, my lifestyle was changing: I was spending more time in nature, I became a vegetarian and a meditator, and accordingly sought more natural remedies. I learned about a claim that one could stop headaches simply by placing the hands on the head. I tried doing so and found that indeed I could stop a headache cold in minutes, both for myself and others. Strange as it sounds, I could feel the headache and move it out.

From then on I became a magnet for people who had headaches. Everywhere I went—a business, social, or family event, or even shopping—someone would exclaim, “Oh God! I’ve got such a headache.” Delighted to help, but without thinking much about what I was actually doing, I would offer to relieve their pain. After about five minutes of my specialized hands-on therapy, my surprised and delighted subjects would thank me and resume their normal activities, now pain-free.

If I was to be successful, I realized, I would need to do two things: become a conscious observer of my method, and learn more about headaches. I began by transcribing my experience from touch to written word and discovered that I had been working with the same cycle of sensations each time—that is, all headaches had a predictable course that could be felt, altered, and released, and at each stage there were subtle, identifiable cues that, when complete, signaled relief for the client. I translated this protocol into written instructions for self-application and tested them on people with a history of migraine to see if the instructions worked. I found that my informal test subjects were indeed able to relieve their headaches independently.

So now I knew that my method worked, but I still knew little about the symptomatology and known causes of headaches. I began researching the consumer and medical literature and was surprised and disappointed to find out that, despite billions of dollars spent on research, the exact mechanism of headaches is unknown. This was provocative: I wondered if understanding more about my hands-on therapy might provide a key to discovering a piece of the headache puzzle.

In reading, I learned that current medical treatment for headaches is often costly, lengthy, and frustrating for patients and practitioners alike. Despite the best modern therapies, chronic headache problems can persist for years, even decades, while their underlying causes remain unaddressed. Patients feel increasingly hopeless, helpless, and overwhelmed. In their attempts to

be free of pain and other symptoms, they try a bevy of medications from a variety of practitioners. They feel that no one is listening anymore, and although at first they fight their doctors' words, "You just have to live with it," eventually they learn to accept them.

My learning didn't stop with reading. I trained in a variety of modalities, including massage therapy, energy work, intuitive development, and body-centered therapies, including breathwork, chi gung and mindfulness meditation, Core Shamanism, Somatic Coaching™, and Somatic Bodywork™.

A Self-Care Program Produces Results

Combining my training and a review of the headache literature, including Dr. Rodolfo Low's research on diet and migraines,³ I designed a self-care relief and prevention program that teaches people how to naturally find and eliminate the underlying causes of their headaches and migraines, along with methods to alleviate their pain and related symptoms. I have taught the Mundo Program through health education courses at health maintenance organizations, medical centers, universities, and corporations for the last ten years.

A preliminary retrospective study conducted in October 2000 and later published in abstract form in the International Headache Journal, *Cephalalgia* (May 2001), demonstrated the Mundo Program's benefits to patients and its potential cost-effectiveness for healthcare organizations.⁴ The study describes seventy-eight migraine patients who completed my six-week program, which included identification and elimination of headache triggers, body-centered awareness, breathing, and therapeutic hands-on techniques. The participants had a median of nineteen headache years, which means that some people had them for a year, and some for forty years! Researchers found a forty-one percent reduction in the number of headaches, a fifty-two percent reduction in abortive medications, with ninety-seven percent reporting that they felt more in control and had greater understanding of their headache pattern.

This model, with its untapped ability to reduce lost labor costs due to migraine, has promising implications for the workplace. If workers could benefit from the Mundo Program, with the same forty-one percent reduction in headaches that the study participants had, then employers could save an estimated \$5.3 billion of the \$13 billion that they lose annually due to decreased productivity from migraine.

An Alternative to Conventional Therapies: The Somatic Approach

My approach is a somatic approach, and as such involves awareness of the whole self—body, mind, spirit, and emotions. Somatics, derived from the Greek for "living body," defines the body as a dynamic, functional expression of the self rather than a collection of mechanical parts. In Western societies, we seem to live mostly in our heads, with the attitude that the body is only a convenient vehicle on which to carry the head. Many people become aware of their body only during exercise or physical activity. Worse, people who suffer chronic pain ignore and withdraw their attention from their body for so long that they only begin to feel their body at the point of pain. In contrast, somatics teaches that the body is a reflection of who we are and the life we are living—it is our base of support. By recognizing it as such, people can discover effective ways to work with their chronic pain.

But how can somatic awareness heal headaches when the best of modern medicines cannot? A somatic self-care program addresses an entirely different realm from that addressed by standard medical treatment—and even some alternative therapies. In somatics, the treatment is the process. A pill doesn't address how you collect stress in your shoulders or clench your jaw. A pill can't identify when your breathing is shallow and held. Neither does it teach you how these factors can contribute to your headaches, nor how to change them to produce a better outcome. It seems simple, but by learning how to pay close attention to yourself and your daily actions, and then modifying or substituting other actions, you can actually solve your personal migraine mystery once and for all.

Somatics As a Means of Taking Control

Somatics works because it empowers individuals to take control of their healing. In a recent survey, migraine patients said they wanted to be more in control of their own care and learn ways to relieve and prevent their headaches.⁵ This is also exemplified in a classic workplace stress study, in which people who identified the cause of their problem as being outside of themselves felt that they had no control over it, with slim chance of changing their behavior.⁶

Whereas conventional headache treatment puts the situation in the hands of physicians and drugs, a somatic approach empowers the headache patient to take personal responsibility for their pain and their care. Allopathic medicine encourages patients to look for solutions outside themselves, to take drugs to stop their pain in the moment, and not to ask themselves how they may have gotten it in the first place. Over time, their pain becomes so mixed in with the fear of its imminence and the memories of past pain episodes that their reaction becomes part of the problem and they feel even more out of control. The somatic approach doesn't involve "blaming the victim" for their illness, but rather asks that they step outside the box to carefully examine themselves. Looking within produces awareness. This in turn gives people more options for responding and, in the long run, more control over their thoughts and actions.

Restated in the positive, people who identify with their ability to control their problem internally can produce change. I found it very interesting that in the Mundo Program study cited above, although researchers found a forty-one percent reduction in migraines, ninety-seven percent reported they felt better. In the survey comments, they described changes they made and the resultant improvements in their quality of work and personal lives. They knew more about their headaches and their options for responding, and thus felt more in control.

Sonya, a woman in her late thirties who was referred to my class by a neurologist, would consistently enter the classroom in a sullen mood, with her head down. Her skin had a grey tinge. She was thin, wan, drank lots of coffee, had a stressful job, was constantly worried, and never exercised. The intensity of her migraines was fed by her fear of having a brain tumor, though all tests were negative. Two weeks into the six-week course, she didn't show up for class, and when I phoned to follow up, Sonya told me that she was still getting a lot of headaches and felt doubtful that the program would work.

Her resignation was palpable, and I coached her for an hour on the phone, pointing out each time she would utter a "Yeah, but ..." or an "I don't know." After focusing on her resistance to change and her insistence on maintaining herself as a victim, something finally clicked. Sonya returned to class the following week and brightly reported that she had stopped getting migraines altogether. I saw her two years later at a cafe and hardly recognized her. She looked great, dressed in bright colors, her skin glowing. She told me that her life had changed from the

moment of our phone conversation. She still was without headaches, had gotten a job promotion, and was more fulfilled in her life than ever.

Sonya no longer saw herself as a victim of circumstance but as a designer of her life. That leap both required and created a shift in mood that was reflected in her body and her self-concept, which produced less stress and tension. She used to think that her problem was the pain in her head. When she shifted her focus to herself as a total living being, her life changed. She understood that she was not just her physical self. She was also her thoughts, feelings, and moods, which affected her life and the outlook she had about her health. She was in control.

Cultivating Beginner's Mind

In working with clients, I ask them to start over again, to become beginners. In *Zen Mind, Beginner's Mind*, Zen Master Shunryu Suzuki Roshi writes, "In the beginner's mind there are many possibilities, but in the expert's there are few." A beginner is like a new puppy: wide-eyed, all feet, no experience, but eager. It is necessary for sufferers of chronic pain to cultivate beginner's mind so that they can begin to wonder instead of worry about their problem. It is only then that they can interrupt their fears and old ways of thinking and make space for new questions and solutions to arise. They must be willing to suspend their preconceptions and see with fresh eyes.

Remember Marla, who resisted the suggestion that her over-the-counter pain preparations could be the cause of her chronic headaches? I received the following letter from her several months later, which highlights the pervasive problem of rebound headaches from medication overuse. At the same time, it illustrates beginner's mind.

As a coach, I see that Marla was able to solve the problem by suspending her old belief and taking the coaching. Of course, it helped her to finally have the information about rebound headaches. But it was only after she made the decision to investigate the possibilities that her situation completely reversed. She remains headache free five years later.

Dear Jan,

I was in your class which started in January 1997. At that time I had been taking over-the-counter (OTC) headache medication daily for about fourteen years. During your class I learned about rebound headaches. Wish someone had told me of them long ago. Since class, little by little, I've been getting off the OTC meds.

I'm happy to report that I am now in my third week of NO Excedrin — I feel like the cycle is broken. It's exciting! Not only is my head better, but I've also had NO irritable bowel syndrome, which has been a problem for many years.

Thank you for your help,

Marla

Curiosity and Perseverance

If beginner's mind is about being open, then curiosity and perseverance are what keep us going. Imagine having the curiosity of a detective, endlessly tracking down leads, following each trail until it runs cold, then on to the next, and on and on. This approach to headache management requires that clients get curious about the relationship between their headaches and what's going on in their lives. I break it up into areas like diet, environment, lifestyle, and physical, hormonal, and medication factors. I ask, for example, what is the connection between your migraines and what you ate or didn't eat today? How do your tension headaches and current stress and pain levels relate? Can you feel your shoulders?

Perseverance calls us to stay on the path, even when it's rough and rocky, and to keep coming back to it when we stray. When we start feeling better and begin to resume our regular schedule, we need to be consistent in maintaining the behavior that made us feel better in the first place. With curiosity and perseverance, patients can make the connection between the behavior and the outcome. At first, Marla could not see the connection between her migraines and her Excedrin, so she continued to use it. Once she made the connection, she could change to more supportive, healthy practices and gradually eliminate it.

Always Practicing Something

Author and aikido Master George Leonard observes, "We are always practicing something." Carol, a young adult with a budding sales career, maintained her busy schedule on a diet of five colas a day. Whether she acknowledged it or not, she was practicing a cola diet, which resulted in rebound headaches from caffeine, sugar, high stress, and lack of real food. She finally got off the cola, committed to eating a healthier diet, and began taking time for herself. By changing her practices, she conquered her headaches.

Cultivating regular somatic practices that support health and wellbeing can help people return to the lived experience of the body. For example, breathing, vipassana meditation, chi gung, and regular exercise can help build one's capacity to be conscious in the moment. By calming the mind and returning to the body over and over again, people can even change their biochemistry, lower their heart rate, respiration, and blood pressure, and reduce their pain. In addition to helping people gain a deeper awareness of their body's experiences and needs, somatic practices give people somewhere to keep returning, and allow them to begin relaxing in their own skin.

Working with Pain

Somatic self-care asks people to work with their pain. This means that they bring their attention and touch right into the site of their pain, tension, or tightness. They feel and work with their bodily sensations instead of trying to flee them. How does that tension in your shoulder feel? When and how did it begin? What shape and size is it? Does it burn? Feel numb? Does the pain move or stay in one place? We can use our pain as a signpost to direct us to the place that needs work.

Once the awareness is present, people can use touch to effectively diffuse and relieve their pain. Remember when you were a child and bumped your knee and your mother told you,

“Rub it, and it will feel better”? This highly effective pain-relief measure—touch—is a sadly forgotten part of traditional pain management, but when used skillfully it can halt pain in its tracks. For example, if your left shoulder is painful, you can apply touch to explore the qualities of that pain: Is it hot, cold, hard, like a knot, or like a metal plate? How deep and wide is that knot? Then you can begin to match that “outer” touch to your “inner” pain sensations. Similar to people in certain Arctic regions who have many words that describe varieties of snow, you can learn to feel subtle distinctions of tissue. You can read its quality, then use the appropriate touch to soften it, melt it, and dissolve your pain. With practice, clients employing a somatic approach learn to master the subtleties of touch.

Headaches As a Key to Other Doors

When we explore our headaches with beginner’s mind, we discover ever deeper and subtler layers of our conditioned responses that affect other aspects of our lives as well. We originally learned how to deal with pain in our families and our environment; this learning also influences our experience of pain. Awareness of embodied, conditioned responses can provide a key to unwinding our patterns of non-self-care. A whole new vista opens for people when they begin to experience how their thoughts, worries, fears, and anxieties directly affect the tension and holding in their body, breath and mood, and how the combination contributes to their headaches. They learn to observe and shift their mind, musculature, breath, posture, and expression and thus stop the cycle. It is the consciousness of how they are affected that empowers people to make and sustain change.

After seven private sessions, Stephanie, a successful yet modest professional, had the basic Mundo Program under her belt. She had reduced her black tea consumption from six to two cups a day. She was eating a balanced, healthy diet, doing her daily centered breathing practice, and even exercising. Remarkably, her daily intake of Imitrex, Midrin and butalbital was now down to an occasional Tylenol. As a result of everything she was doing, Stephanie was having seventy-five percent fewer migraines, or one a week, and they lasted for less than a day instead of days at a time.

Despite her progress, she came into her session distressed and at a loss as to what caused her latest bout. I coached Stephanie to keep returning her attention to her activities before the headache's onset. She said that she was trying to “get her list of things done,” so she ignored her body’s signals to pee during her entire exercise walk. As we talked, she saw that she routinely holds her body tight when she is “just trying to get everything done.” She recognized the “tape loops” in her head as variations of feeling guilty and denying her most basic needs. Consciously, she wanted to create better health and well-being for herself.

As Stephanie explored how and where she learned to deny and feel guilty about her needs, she recounted childhood experiences. Her mother disapprovingly characterized people who pay attention to themselves as self-indulgent. Exploring this perspective was instrumental in helping Stephanie make the connection between her childhood conditioning and how she lived her present life. She saw the pressures she put on herself, and the resulting tension held in her body that contributed to her migraines. When people reach this understanding, real change begins to take place in many domains of their lives.

To the Future: After the Pain is Gone

In committing one's daily activities to the whole-person approach, the headache student arrives in new territory. After a life that has revolved around pain, what does pain-free feel like? People typically respond in one of two ways: "This is great. I can finally enjoy my life!" or "How do I design my life now?" No matter what the response, the key to continued success is in maintaining basic practices. As years of tension, fear, and worry melt away, people have more time and energy available for enjoyable and productive pursuits. Life doesn't have to be carved out around headaches anymore.

In somatic self-care, people are asserting their power to heal themselves, rather than just suffering. They are reducing the intensity and frequency of their headaches, and feeling more in control of them, their health, and their life. As a result, they can spend more time with family and friends, miss fewer workdays, and experience an increase in their overall sense of well-being. With their symptoms as teacher, they are learning how their body works, and how to work with it. In doing so, they are able to move beyond their headaches to claim and redirect their destiny.

NOTES

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⁴ T. Wilson, K. Keller, F. McCloud, J. Mundo, and C. A. Lee, "The cost effectiveness of a prophylactic migraine programme as contrasted to pharmacological migraine treatment," Abstract, *Cephalalgia* 21, no. 4 (May 2001): 368-69. Conference abstracts of the 10th Congress of the International Headache Society: IHC 2001.

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⁶ Peter L. Schnall, "Locus of control and cardiovascular health," Job Stress Network website, <http://www.workhealth.org/risk/rfblocus.html>, 2000.