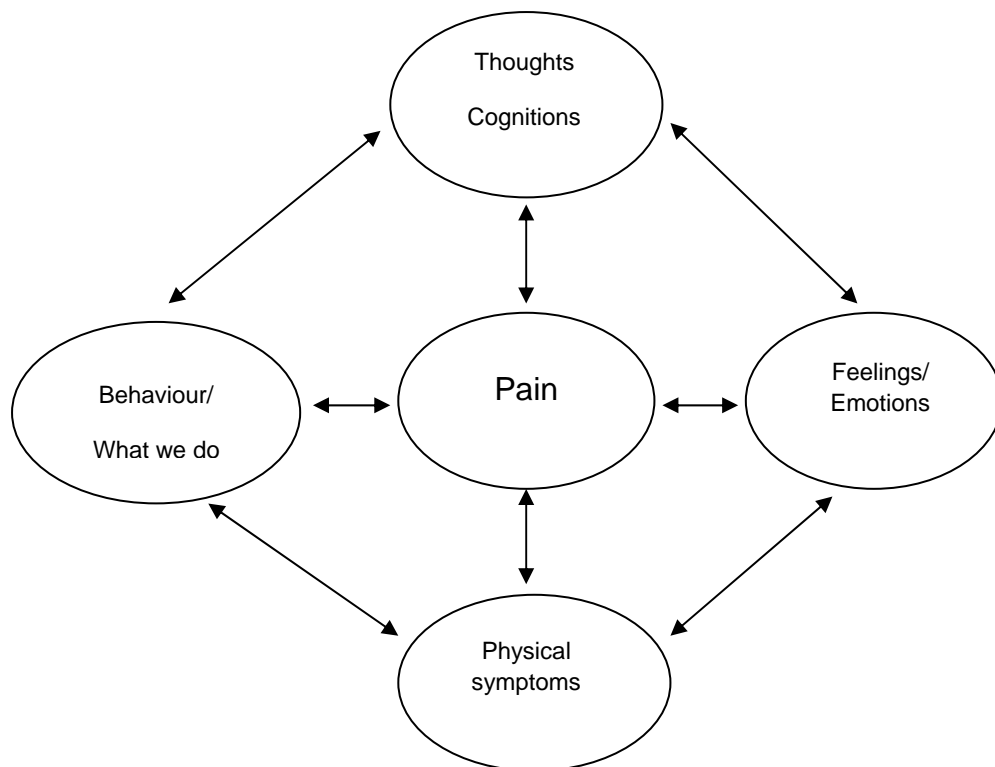


### THE MIND-BODY LINK AND COGNITIVE BEHAVIOURAL MODEL 1

This may be difficult to grasp, but our minds and our bodies are linked with a continuous feedback loop of information passing between them. It is therefore impossible to take any physical symptom or illness by itself without considering the various psychological, social or behavioural components that contribute to our experience of it. The diagram below illustrates this with regard to pain.



This model is known as the CBT model or the **Cognitive Behavioural Therapy Model** which was formulated by a psychologist called Aaron T. Beck in the 1960's. The model provides us with a framework for most of what we do in pain management. Basically, what it tells us is that there is a two way relationship between our bodies and our minds. Every physical symptom, or illness we have affects how we **think**, what we **feel emotionally** and what we **do in response**. Also what we **think**, how

we **feel emotionally** and what we **do** has an impact upon our **physical symptoms** of illness as well.

The first bit is easy to understand, but the second bit about how our mind can influence our bodies is more difficult and can often be misunderstood for suggesting that pain is 'all in the mind'. This is not what we are saying. Think about how your mouth can water when thinking about biting into a lemon, or your stomach can churn when you are about to go to the dentist, or take an exam. These are all examples of how just by thinking about something we can make a physical reaction happen in the body. It is the same with pain. Whenever we become stressed or angry and frustrated about something, this can influence the pain we experience because of the chemical changes that happen in the body when we have these feelings.

There is more. As human beings we also like to place a meaning, or an interpretation upon the things that happen to us. So if we experience physical symptoms of illness in the body we like to attach a label to them. The interpretation, or meaning we attach to any set of symptoms, or challenging situations we experience will affect the emotions we feel, the physical reactions we have and behaviourally what we do about it.

Let's think about this for a minute by considering the following example:-

### Example

<b>Situation</b>	You experience an increase in your pain after a walk with a friend
<b>If you interpret what is happening by thinking</b>	"I must have hurt myself, what if I never get better?"
<b>You are likely to feel</b>	Angry, depressed, tense, anxious
<b>And what you are likely to do is</b>	Avoid going for walks
<b>What is likely to happen to your pain is</b>	It gets even worse because the chemicals released when we are anxious and tense speed up the pain messaging system in the body.

**However what if you have the:-**

<b>Same Situation</b>	You experience an increase in your pain after a walk with a friend
<b>If you interpret what is happening by thinking</b>	I have just slightly over done it today and need to adjust when I take breaks on walks in future"

**You are likely to feel**

Calmer and less anxious

**And what you are likely to do is**

Continue to enjoy walks with your friend

**What is likely to happen to your pain is**

It subsides back to its original level

The important point is that the **same** situation can lead to **different** thoughts, feelings and responses or behaviours. Basically, what we understand is happening to us when we experience pain is crucial to how we feel about it emotionally and what we will do in response to it. All of this can also help to influence the experience of pain too.

**What is important is that your beliefs and your interpretation of what is going on in your body when you have pain will affect what you do about it. Your beliefs or your understanding of your pain can therefore either help or keep you feeling stuck.**

It is easy to understand why you feel down, even depressed, anxious and fearful, angry, resentful and many other uncomfortable feelings because of your pain. They are quite normal reactions to ongoing pain, but the problem is as you have seen above, that they may in themselves be adding to the pain problem.

Specific skills in being able to manage your thinking patterns will be discussed in another information sheet.