

*Andrey Ermoshin*

Phobias,  
Disappointments  
and Grief:  
A Fast Remedy



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and Grief: A Fast Remedy**

«Издательские решения»

**Ermoshin A.**

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The book is written by a well-known Russian psychotherapist Andrei Ermoshin presents Psychocatalysis, his own method which has helped thousands of patients to recover from the consequences of psychological traumas. The work is illustrated with detailed examples of working through different kinds of phobias, disappointment, betrayal, infidelity or loss of a loved one. This step-by-step guide to self-regulation can be useful for everyone who needs help with his/her problems.

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# **Phobias, Disappointments and Grief: A Fast Remedy**

**Andrey Ermoshin**

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## Foreword

The book *Phobias, Disappointments and Grief: A Fast Remedy* written by the well-known Russian psychotherapist Andrey Ermoshin presents Psychocatalysis, his own method which has helped thousands of patients to recover from the consequences of psychological traumas. The work is illustrated with detailed examples of working through different kinds of phobias, from the fear of flight to the fear of sudden death. It also provides examples of how Psychocatalysis can efficiently relieve the pain caused by disappointment, betrayal, infidelity or loss of a loved one. Psychocatalysis is an original method based on bringing special attention to one's inner sensations. After 30 years of working with this method the author offers the readers this step-by-step guide to self-regulation which can be useful for everyone who needs help with his or her problems or is going to help others.

The method and the working algorithms, are described in a highly intelligible manner, including reference materials and artwork.

## Preface

This book, that you have in your hands, will help you to overcome phobias and other kinds of traumas in a fast and effective way. It will give you the necessary tools for a fresh start and will help you move towards health and success.

Everybody can face psychologically challenging and traumatizing life situations. We have to resolve these situations in order to remain healthy, happy and successful. And we have to learn a way to overcome these obstacles and to move on. This book is about how to use self-regulation to easily and naturally get through the effects of stressful events, including not only phobias but also betrayal, frustration, and grief. Here you will find many examples of how people managed to purify their body and mind of the destructive and paralyzing build-up of negative experiences using the resource of their own inner sensations. Thousands of patients have already used Psychocatalysis and have been able to acquire new strength and knowledge to become healthy and to bring their projects to life. These cases show that it's possible to overcome phobias and other psychological traumas if you follow a simple algorithm which only requires *tuning in to your own sensations*.

Psychocatalysis, a method which I have developed, has been in use for decades by myself, my colleagues and my patients in Russia and abroad, and is based on the body's fundamental resource of self-healing. It is actually an acceleration of the processes which should be happening in the body naturally, but which are delayed for various reasons and need now only to be activated.

In my first book, *Objects inside the Body* (Moscow, 1999, 2004, Riga, 2007, Kiev, 2013), based on years of practice as a psychotherapist, I described the positive effects of Psychocatalysis in the most complex cases. The book had a significant response, and my new friends, colleagues, patients and other interested people have kept on discovering the potential of the method. I am very grateful for their support.

The second book, *Geometry of Emotion* (Moscow, 2008, Kiev, 2013), shows how emotional charges accumulated in the body can be easily diagnosed through a simple drawing test, and how this approach can help us to work through problems, one by one.

The third book, *A Nice and Easy Way to Learn Foreign Languages: Self-Regulation as A Method of Quick Acquisition of Knowledge* (Moscow, 2014), describes a very comfortable and light manner of learning foreign languages, as well as a quick way to grasp new things. The book offers the reader a series of self-regulatory exercises based on the method of Psychocatalysis, which will not only make your learning process more efficient and help you find an easier way to learn but will also contribute to the overall health of the body.

The three books I have mentioned above can become a good supplement to this volume, but you don't have to read them before this book. I have tried to make it simple and clear so that you could get the maximum benefit from this book and save your time. My goal is to share my experience and to provide you with a convenient technique of healing traumas. Whether you are a professional psychotherapist or you want to work through your own problems, this book and method will help you.

The book consists of three parts relating to the three most frequent types of problems.

*The first part* is about overcoming phobias, these are obsessional fears which are formed in a situation when a person couldn't generate an adequate response to a stressful situation. I will explain what is going on in our mind when it goes through unexpected stress. However, it's not only about determining a diagnosis. The main goal is to heal the wound, to restore the integrity of the body and to learn how to react calmly and rationally to what used to cause fear.

A good example is always better than long and complex explanations; that is why the first part of the book contains a lot of actual cases from my work with patients. They provide details of how one can overcome the effects of traumas starting from slight intimidation to multiple phobias, and from fear of aggression to fear of enclosed spaces. In this part I will also offer some algorithms, designed

to help you adjust and maintain the results you have obtained. The “method of diagnostic phrases” and the method of “guiding the knowledge to the body” will help you to reinforce your success.

In the *second part* we will get a broader perspective. Here we will talk about overcoming the whole range of psychological traumas: disappointment, unjust accusations, and loss of loved ones. How can we live through grief, betrayal of a friend or infidelity of a partner? How can we get rid of recurring dreams which reveal a deep emotional strain? How can we react properly to abuse and insults? Using real life examples, I show how to master the impacts of such trying events.

I dedicate special attention to the most difficult cases when the psychological trauma results from the consequences of brain damage, such as when the brain doesn't get enough oxygen or other complications. Psychocatalysis also proves to be useful in these cases.

My method is all about making decisions and starting to act. The goal of this book is to help you to get rid of the dead weight of the old stressful feelings, to recover and to move on. If you focus on helping the inner wisdom of your body, a miraculous renovation of your life will happen. You will experience personal growth and develop such qualities as integrity, balance, and competence. This will bring your spirit to the next level and create a basis for your personal fulfilment in all areas of life.

Please, feel free to ask any questions via email at [битая ссылка] [erm@list.ru](mailto:erm@list.ru).

You are always welcome to visit my websites:

[битая ссылка] <http://www.psychocatalysis.ru/>

[битая ссылка] <http://www.psychoscanner.com>

I will be grateful to get feedback from you or to meet you during one of the self-regulation trainings which we organise!

Yours,

Andrey Ermoshin



## **Introduction**

### **Basic Training**

A human being is born already having a wealth of knowledge about the world, just like a wasp which doesn't need a university degree to build its nest. The information on how to live is written in our bodies and accessed as soon as we need it. Plato said that while studying we merely recall things rather than learning something new. However, even if we have the biggest of experiences, there will be things we won't be able to recall... Life is always changing, and there will be situations that we haven't experienced before.

I like the Italian word “aggiornamento”, which is connected to “giorno” (a day); it means updating knowledge and making it closer to the current situation. We can also refer to it as the refinement of knowledge. The goal of such basic training is to get to know how to interpret the contemporary world. The values transmitted by our families and schools provide us with behaviour strategies for modern situations, which we may face without having any information about them in our genetics. Culture makes an update to nature, and the level of our competence rises.

Even with a good upbringing, every person and every generation has to acquire some life experience on his or her own, without parents or teachers by their side. If the intellect accompanied by the cultural resource doesn't manage to deal with some situation, it can result in adaptive stress or even a trauma. A trauma is followed by an engagement of the primitive strategies of survival, written in our genes “just in case”.

### **It's cool to be at school**

Even the situations we don't consider extreme can potentially be stressful: the first time in a nursery, the first day of primary school, having a brother or a sister and other similar events which are quite natural.

Going to school is presented to children as something joyful but trying to get along with rough children and dealing with a strict teacher can cause dramatic emotions for a sensitive child. Having a newborn brings happiness to the family. Yet when the attention of the parents shifts from the older child to the baby, the older child may be in a situation that can bring about a mixture of positive feelings and those emotions that can be hard to bear.

The list of such potentially stressful situations also includes tension in the family, moving to a new place, going to a new class at school, etc.

In life a person faces many experiences: changes in the body during adolescence, passing entrance examinations for college, looking for a job, getting married, having children, climbing the career ladder at the office, overcoming the death of loved ones, resolving social tempests, learning how to take care of his or her health, losing a job, entering retirement. All these events are natural parts of our life, but every single one of them requires adaptation. In many cases this adaptation is obtained through strain and can even lead to a feeling of defeat.

The problem is that the consequences of what we have been through leave their print on our psychosomatic profile.

### **Time of change**

A constructive drawing of a person, a simple test, can prove this. Draw an image of a person using rectangles, round-shaped elements and triangles. There should be 10 elements in the drawing. Now specify the age of the character.

It is most likely that the age of the character will point back to some crucial moment in your life. Body proportions in the drawing that are unusually bigger and wider than the rest of the body can indicate areas of strain. Other parts of the body, which are often the limbs, are designated by triangles,

which means they are in state of “desolation”. We’ll turn back to this test further on in this book. It is also described in detail in my book *Geometry of Emotion* (A. Ermoshin, 2008).

The situations described are connected mostly with *adaptive stress*. Yet as we have mentioned before, some cases do not only cause strain but significantly alter the state of health of a person. They catch the person off-guard and are so hard to embrace that they end up causing trauma.

### **It’s hard to go through it without getting wounded**

It is hard to find a person who hasn’t experienced disloyalty of friends, disappointment in people who seemed to be ideal or aggression from other people for no reason at all...

Life isn’t all a bed of roses, says the proverb.

However, even the situations which are not so dramatic from the point of view of an adult could be traumatizing. For example, when entering an elevator, a person expects to go out at a certain floor in a minute or two. But all of a sudden, this device designed to save people’s energy, stops, and the light goes off. This is just a temporary stop. Somebody will certainly come to help, because people need the elevators and their functionality is monitored. It is enough just to press the emergency button if the person wants the help come sooner. Alternatively, the person could knock loudly on the doors to get somebody’s attention. Also usually it’s possible to use a mobile phone which almost everyone has in his or her pocket, or the person could just have a rest, think about things or even meditate. Is there any difference between a person at home and the same person inside an elevator? Usually there isn’t. All the power stays with this person, all the inner self-regulation mechanisms, which have been forming for thousands of years, work the same way!

This is how an adult, a self-assured person understands the situation. Yet a boy or a girl could imagine that he or she would never go out of this unfortunate elevator or see his or her parents ever again...

That isn’t true, of course, and soon everything will be fine but because of this loss of self-confidence, even if it’s just for a moment, a child’s mind might “catch” this fright, and it “settles down” somewhere inside and begins to control the state of mind even after the child gets out of the elevator. (This is exactly what happened to my patient Julia; you will read her story later in this book). The fright generates the fear. Even the thought of the unpleasant experience.

### **Enthusiasm of a bouncy dog brings no joy**

Psychological traumas can be caused by the situations when a person encounters circumstances which are threatening for their life or for their honour and dignity, and which he or she is not ready to face. A large dog decided to play with a three-year-old girl, kicked her down and tore her dress. How will she react? Would she be able to sympathize with the dog’s enthusiasm and feel the joy of life? It is unlikely, as she definitely doesn’t have enough self-confidence. Instead, she feels afraid.

A person who has enough “resources” reacts differently. Serge has just got out of a suburban train and suddenly he gets gripped by the neck from behind by a large man from a crowd of drunken friends. It’s a do-or-die situation. These guys have been recently discharged from the army, there’s no way he can beat them. Serge tries to loosen the grip a bit and asks the aggressor: “Wanna become friends?” – “Yeah!” answers the bully suddenly. The bully then loosens the grip, they get acquainted and in a minute the jolly crowd decides to walk Serge home so that nobody could bother him. The shocking gesture of the bully masked a clumsy attempt to make friends. Serge helped him to understand this and was rewarded for it.

There is a bright feeling of assertion growing in Serge’s body from his capacity to answer life’s challenges. And in the girl’s mind there is a dark strain.

The goals of this book include presenting a solution for such tension resulting from a trauma. We will begin with fears, as this kind of problem is particularly frequent. All of my observations are based on a large medical practice and are verified by the work done with a number of patients.

## **Part 1. Work through Phobias and Panic Attacks**

### **1.1. Introduction**

#### **Ten minutes**

I'd like to point out that in many cases five or ten minutes can be enough to work through the fear and improve the life of the patient.

As an introduction, I'll tell you a story of a successful recovery from a fear of spiders. This is a story which I personally like to recall from time to time.

#### **One day in Paris**

There's a cafe called "L'Apostrophe" in Paris, on Colonel Fabien Street. Once a month it becomes a rendezvous point for local hypnologists and turns into a "Hypnocafé". Professionals from the psychotherapy world gather there to learn about foreign specialists' methods or just have a cup of coffee together.

This time on the second Tuesday of the month it was my turn to present at the meeting. My precursors were Jeffrey Zeig and Betty Erickson so I was in good company. I was invited by Jean Becchio, a brilliant specialist in "nouvelle hypnose".

I was surrounded by a dozen colleagues, and we stumbled into the cafe a little late, slightly wet from the November rain: it turned out that a taxi in Paris is rather unpredictable, and sometimes it doesn't arrive even if you call beforehand.

It also was a kind of a stressful test for mental equilibrium, but we managed to pass it. People were expecting us, and after a short presentation we could proceed to work.

#### **Regina**

A colleague from France volunteered to talk with me in front of the group. She was about 45 and quite skinny. Such people often describe themselves as being indifferent to life. "I don't care if I'm free or I'm in captivity," says the Russian proverb. But Regina turned out to be quite cheerful. The only problem she did have was her fear of spiders. One would wonder if there were any spiders in Paris at all. There are no tarantulas, no dreadful black widows or steppe spiders, no scorpions either.

"Yes, there are!" Regina objected. "They're everywhere!"

"But you know that you are big, and they are small. They can do you no harm."

"No, it's me who is tiny, and they are giant!" Regina said and told me that when spiders are mentioned she freezes, begins to tremble, and her hands become cold.

"Your hands become cold, so where does the heat go?" – I asked. The tension and the heat happened to be in her stomach.

I wondered if she was aware of any ways to counteract spiders. One could use shaving foam, or just throw a towel over the spider and then throw it out of a window. Regina shook her head and made it clear that was not her way. It doesn't work for her.

#### **The black spider flew away with his web**

That's when we begin the active part of our work.

The first working phase. We try to find out where in the body is the thing that frightens her. Regina closes her eyes: "In my stomach." What is there? "There is *a black spider*." Regina makes a decision to let it go away. Regina is observing the process. The "spider" goes out through the top of her head together with its web.

The second working phase. “Where is the knowledge of how to deal with spiders?” The patient finds it to be somewhere at a distance in shape of *a small sun*. The decision is to let the sun settle inside the body. The patient is watching it going inside through the top of her head and settling in the solar plexus area.

Regina experiences warmth and peace.

We make a test. The patient imagines that she has a run in with a spider. She keeps calm, she knows several effective ways of action and easily imagines what her behaviour will be like if she actually meets a spider.

Before the session the patient felt cold, and now she feels warm. A phobia which had been haunting her all her life finally disappeared as a bad dream. At the end of the meeting Regina came over to thank me and confirmed that she was still feeling the warmth in her body.

My French colleagues felt puzzled: “We usually need ten years to analyse phobias, and here it takes ten minutes... This seems weird.” “You can spend ten years, but if you wish to have the time to live without phobias, I’d recommend you my method,” I said. I also found the reaction of my German friend interesting; his wife Tatiana told me about it. Uwe Pertz is a wise man so his words are even more valuable: “Why hasn’t it occurred to anyone else to do it? It seems so simple!”

### **Fast facts about developing phobias**

When a person finds him or herself in some unexpected situation and is unsure how to act in order to save themselves or their family, he or she feels lost. This person feels like his or her body has absorbed some toxic substance which poisons everything around it. This substance has penetrated the body and reached the stomach, so there arises an unpleasant tension at every thought of the frightening situation. Let alone the discomfort which affects the head or triggers the feeling of anxiety in the chest. Those layers of disorder are more superficial.

At the moment of confusion, the body was open and defenceless, so the inner vacuum got filled with darkness. This moment has passed, and the body has closed but it is not the same any more: it’s “poisoned” by fear. That’s how a phobia develops.

### **It is not enough just to understand**

Most of the actual systems of phobia treatments are based on the fact that people can understand that their fears are illogical. Curing the neurotic fear using Psychocatalysis also begins with realizing that “you shouldn’t be afraid,” but it doesn’t end there.

It is essential to work with the deeper layers of irrational fear. We need to trigger a process which reverses the original process that took place at the moment when the phobia developed, that is: to find something that got inside the body without an invitation, and remove it. Then there comes the phase of getting experience out of the situation, elaborating a sensible attitude to the fact that life sometimes challenges us...

Phobias can be cured fast but it is essential to pass both the phase of “the darkness getting out” and that of “the light coming in”. If this happens then a fear that has lasted for years can be treated within one session.

### **The active role of a patient**

In many popular systems that work with fears, the patient is often just an extra player. But in Psychocatalysis the work is executed by the patient himself and the patient’s body in self-regulation mode. The task of the specialist is to make the patient do this work.

Within generally accepted therapeutic approaches certain manipulations are performed with the patient on the assumption that a recovery may occur. Psychocatalysis engages the patient in the whole process: that is why it is clear that you know you are actually cured, and not just hoping that you are.

The process is very calm and fast and doesn't aggravate the patient's state with any hysteria or mystification.

Psychocatalysis provides a fast and effective work-through of all the components of the background connected with phobias.

Before starting to give detailed practical suggestions, I'd like first to briefly describe the factors which can trigger the development of fears and explain what is going on in our brain at the moment when we are experiencing danger. I mention it in order to show how important it is to involve our inner sensations and not only the reason for the tension. I will also give a short description of other methods of phobia treatment and explain why they are less efficient than my method of Psychocatalysis. Those readers who are not that interested in these details can go straight to the part containing practical advice.

## 1.2. What is a phobia: general remarks

### Sad statistics

According to population studies, the majority of healthy individuals (60.7% of men and 51.2% of women) at some moment of their lives get serious psychological traumas accompanied by fear, desolation, or a feeling of helplessness.

On average, in a quarter of all cases the traumas take root and become chronic. (See.: B. H. Крaчoв с coавт., 2007).

I've tried to find out how many people feel uncomfortable in their everyday life because of their fears.

The situation according to a survey taken on my site *Psychocatalysis.ru*, in 2011—2012, is the following:

- 59.2% of the surveyed admitted “feeling uncomfortable about certain aspects of reality”,
- 33.8% of people declared “having a certain phobia”.

The option “I'm not afraid of anything” was chosen by just 7%.

The most frequent fears of the modern metropolitan population are connected with health, traffic, and means of transportation. In addition to this short list, there is a long list of more exotic and rare fears.

For example, one can develop the fear of feathers after hearing the news about the bird flu.

It's worth saying that mankind has experienced phobias since the dawn of time.

In the works by Areteus of Cappadocea (latter half 1st century B.C.) there's a description of a case in which you can easily recognize what today would be called agoraphobia.

“Some patients don't show anything unusual at home, but in less familiar atmosphere, you can notice at once the incapacity of their mind. One carpenter was like this. He measured the planks carefully, was a skilled woodworker, made reasonable arrangements with the customers, but all this was only when he was within his usual scope of activity. But every time he was going to the square, to the market or baths he put down his tools with a deep sigh, bent his back, started to shake and went into a state of sad agitation as he was losing sight of his workshop and his apprentices. After he turned back home, he calmed down and went about work again.”

(Каннабих Ю. 1994. p. 45).

Felix Platter (1537—1614) describes obsessive-compulsive disorders amongst other mental diseases:

“One woman, a correspondence clerk's wife, can't dismiss a fear of killing her husband, whom she loves very much by the way. Another woman, a cantiniere, feels the same kind of worry concerning her newborn baby; both of them would like to forget about these thoughts, but they can't”

(*Ibid.*, p. 93—94).

The number of phobias is almost immeasurable. There are people who try to classify fears and add new exotic names to the list... This list called the doctrine of fears, was named by one specialist as “the garden of Greek roots” (You can see it at Appendix I). In my opinion, such classification is more philological than bearing any practical value. The keys to working through these unpleasant states is the knowledge about the processes which go on in the mind when a person is afraid, rather than the terms used to name various conditions.

## Risk factors

There are several important factors which affect the chances of a person developing a phobia.

1. *Natural factor*: the nature of a person. There are people who are naturally resistant to changes in their surroundings and those who feel at a loss even if there's a slightest confusion in their life. Some people worry and are frightened even when the reason for it is insignificant. Their body type is in most cases elongated: a narrow face, a thin neck, comparatively long arms and legs. This constitution type ([битая ссылка] phenotype) is called asthenic or gracile.

People with fine skin and soft hair often worry too much about their family. These peculiarities are typical of so called "pyknic", or sumptuous body type.

There is another phenotype that falls within the danger area. These people are inclined to day-dreaming and exaggerating reality. They have deep-set eyes, a narrow nose and a chiselled face: their body type is "bony" and lean.

2. *The memory of generations*. According to the ideas of some researchers (B. Hellinger, V. Dokuchaev, L. Dokuchaeva), the information from the precedent generations can be transmitted to their succession through the family spiritual field, through the "big soul" which all of us belong to. Sometimes my patients notice that the positive experience and support comes from "the roots" or "from the back". But the memory of stressful situation which the ancestors had gone through can also be inherited. In this case a person experiences fears which cannot be explained by his or her own life or the contemporary situation.

3. *Early childhood impressions*. It often happens that the beginning of life creates a base for phobias and other traumas. Lack of experience and support, high levels of sensibility; there aren't many people who managed to avoid "childhood fears". In many cases they transform and become a part of the adult life. Some of the authors also pay special attention to pregnancy and childbearing periods (O. Rank, S. Grof).

4. *Type of education*. It's quite important what kind world view was received from the patient's family. It's great if the overall spirit was that every problem could be solved: "there's a chance in every crisis, I see the goal and I don't see any obstacles." But it's a different story if the mood of panic was predominant in the family and if every trouble is seen as apocalyptic. It's one thing when the child was taught to lead a healthy lifestyle and to wash hands before eating. However, it's a totally different thing if there was a constant "fight with germs" and if they suggested the idea of people being helpless as if the immune system didn't exist at all. Of course the risk of development of stable fears is much higher in the latter case.

4. *General level of education and life competence*. The more you know about life and ways of solving the problems, the calmer and more self-assured you are. The calmer you are, the more adequate your actions are. The more adequately you act, the more self-assurance you get. And vice versa, the less experienced you are, the more nervous you get and it's more likely that you won't accept the challenge.

5. *Situations when it's really difficult to adapt*. There are extreme cases which even a very reasonable person can find difficult to maintain his or her cool. Unexpected situations may arise at the time when one simply has no experience dealing with and feels completely helpless. Such situations can happen at any stage in our life: from infant to elderly.

6. *Whether one enjoys or lacks the support of other people or of society in general*. An active team member can find it easier to overcome challenges than a lonely person. Keeping one's cool is much easier when everything is calm rather than when the situation is critical. A state with a well-established social programme facilitates the resolution of various emergency situations unlike a society where every man is for himself.

## Other risk factors

There are other reasons that may cause fear. If one's immune system is weak, it is easier to get an infection. In exactly the same way when the overall energy level of a person is low (or even when one hasn't had enough sleep or has recently had the flu), then there is a chance that this person has lower self-esteem and might end up suffering from a phobia.

Our brain works consistently if it gets enough oxygen. In the case of painless ischaemia, that is in the case of insufficient blood supply, our brain's energy "goes down". In this situation a person is prone to "catching" a fear.

Lack of oxygen can also cause panic attacks. When the brain doesn't get enough oxygen, it tries to increase the blood flow and triggers an adrenalin rush. As a result, the blood flow increases, the heart rate increases, and blood pressure goes up, but this state is rather unpleasant. In this situation a person might think that he or she is losing their mind or dying.

Unfortunately, the majority of people who experience a sympathoadrenal episode don't know that this is a sign of life and not a preview of death. It's just a very awkward way our body regulates itself. Such episodes trigger our fears that something might be wrong with our health. If that is your case, you will find more information on it in part 1.15 where I will show several examples from practice and will offer you a step-by-step action plan.

## Special cases

Important information: some conditions can have different origins but are manifested through similar symptoms. It is very important to understand that not all these conditions have psychological grounds.

Anxiety and phobic disorders after chemical intoxication (delirium alcoholicum, for example) are to be treated with a complex approach. In such cases medication, and psychotherapy only wouldn't be enough. More than that, relying exclusively on psychotherapy may lead to the death of the patient.

Phobias caused by endogenous psychosis such as schizophrenia, manic-depressive psychosis, etc. which are usually accompanied by hallucinations and delusions are a separate case. In these situations, a patient would also need a combination of medication and psychotherapy.

Organic lesion of the central nervous system (CNS) caused by oxygen deficiency during pregnancy or labour (asphyxia) or head injuries and brain tissue injuries, can also lead to phobias: nervous processes are characterized by lower degree of stability, and that is why failures such as micro epilepsy occur.

A *vitamin D deficiency* during childhood, which influences calcium uptake can lead to the conditions when a child becomes easily scared.

## What doesn't have to be treated

We have to note that one has to distinguish between manifestations of phobias or neuroses and *a natural activation of energy sources* which takes place before crucial moments in our lives. For an actor who is about to go on stage or for an athlete getting ready for a competition feeling nervous is absolutely natural. There is a special term for it: stage fright. It is characterized by an increase of the heartbeat and hurried breathing. However, this is a healthy reaction if it doesn't reach any extreme manifestations. Many people would experience the same feeling before public speaking or before an important meeting. The reason why we have to go through these physiological changes is to get some additional strength. It is a way the body prepares itself for a challenge, thus it's a preparatory stage and not some traumatic consequences.



Lack of confidence, however uncomfortable it may be, cannot be considered as a traumatic consequence either. What one might find there is the lack of competence and a feeling of one's vulnerability but there is no psychological wound.

It is the reaction to psychotrauma that we would like to talk about in this book. According to the clinical scale “psychosis – psychopathy – neurosis,” we will focus our attention on the disorders of the neurotic level.

## **A phobia is an information trauma**

*A phobia is a result of an injury inflicted by frightening information at the moment of one's confusion. This process triggers old survival strategies characterised by stereotypic simulation of defence mechanisms caused by any sign of danger, however distant and associative it may be.*

In other words, a phobia is the state of a body when it experiences tension, feels traumatized by this encounter for the first time, and then tries to avoid this aspect of one's life in subsequent situations.

When a physical trauma takes place, it means that a foreign object enters the tissue of the body. Trauma impedes the normal functioning of the body. In this case there is *something* that disrupts the integrity of the body and gets stuck in it (like a splinter, for example), and then there's a *reaction* to this intrusion. The body cannot feel good unless this foreign object is removed. When our mind is traumatized, then it means that the “splinters” get into *the body of our mind*.

The signal of danger is like a splinter in this case. Our intellect fails to find an answer to an important question, and the body goes into emergency response based on the ancient strategies of survival. The trick is that this ancient reaction function in a single-shot mode. Having been activated once, it reappears every time when there's even the slightest reminder of possible danger. This happens even in the situations when a new encounter doesn't actually bear any harm but there's just a hint of danger.

## **A phobia is similar to an allergy**

Just like pollen might seem as a virus to a perturbed immune system, to a person suffering from a phobia some life circumstances are perceived as a threat which require an aggressive reaction, when in fact this problem can be resolved without panic.

Allergies are the state of heightened sensitivity, that is: excessive reaction of the immune system to the environment. A phobia has the same mechanism but at the psychological level. A phobia leads to the distortion of reality and to an inadequate energy-consuming response to a certain aspect of life.

## **What do our sensations reveal to us?**

Fortunately, we are able to observe the processes that cause tension with the help of our internal vision. Our *sensations* function as a detector.

I have thoroughly studied the sensations of my patients suffering from phobias and discovered that there are two components in this feeling that one should learn to distinguish:

**1. Fright as a trauma;**

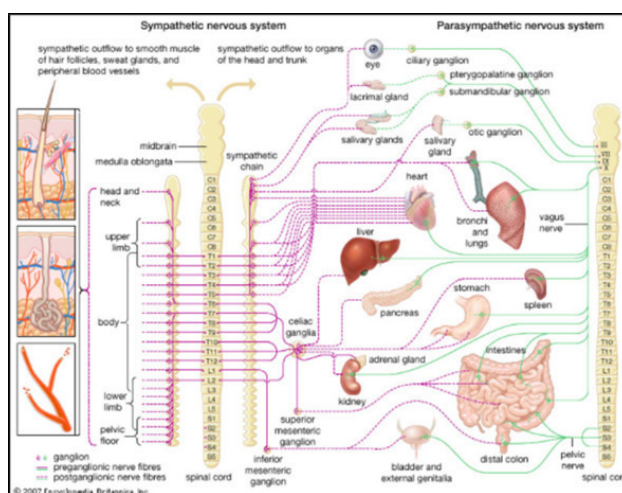
**2. Fear as a reaction.**

In the case of fright, we are talking about the information which our intellect failed to process and sent to the autonomic depths of our mind. If the intellectual response cannot be produced, then the body will provide an energetic one.

The signal that triggers autonomic reactions usually looks like *greyness, darkness or blackness*. When a person is frightened, it feels as if some *black powder is poured through the top of the head to the solar plexus* where it forms a *lump of fear*.

## Ways to react

Fear leads to an increased heart rate and hyperventilation; it increases blood pressure, a person feels hot, there's tension in the muscles, the pupils are dilated, and all the senses are heightened. When this happens, other functions, such as those responsible for digestion, rest and sexual interest are slowed down or upset. This is done in order to prepare the body for an attack or retreat. Mobilization effects are connected with the active work of the sympathetic division of the autonomic nervous system.



**Fig. 1.** *Physiology of the autonomic nervous system: as we see, the work of the sympathetic nervous system mobilizes the body, and parasympathetic brings it back to calmness and helps to store energy.*

The opposite reaction is a collapse: blood pressure falls, and a person feels cool and close to fainting.

This reaction can be compared to the one of a bug that got touched: it keeps still and doesn't make a single move.

There have been cases when people froze as if they were dead when meeting a bear, and the bear walked away.

We can see the similar reaction in the painting “The Nightmare” by Johann Heinrich Füssli (1741—1825). Fear is sitting on the stomach, while the mind is “switched off”.

Such reaction can be justified at the moment of danger but the problem is that the person remains in this state even after the danger has passed. The body seems to find it hard to return from the extreme mode to a normal state.



**Fig. 2.** J.H. Füssli. *The Nightmare*. 1790.

## **Psychocatalysis helps in the case of phobias**

The techniques which help set oneself free from phobias and other psychological traumas have been developed within the frames of my original methodology called Psychocatalysis. Psychocatalysis is a method of focusing the attention of a person on the processes that get stuck, with the intent of restoring these processes back to normal functionality. Our ability to trace the signals in our internal space is the foundation of our self-regulation. This ability can serve not only for diagnostics but also as a way to introduce changes. When the *conscious attention* of a person helps the *profound wisdom of a body*, even long-lasting fears can be cured within a short period of time. Now let's take a closer look at how phobias are formed and what one should do to get rid of them quickly and easily.

## 1.3. How phobias appear

### Rest state

A well-rested healthy person feels that his or her body is light and cool, there's the feeling of calm in the chest, and his or her head is clear. It is as if the person was filled with light. Energy of the body is flowing freely, and the mind is calm. In a state like that a person is absolutely aware of the fact where he or she is and what is happening. This person knows what to do next. The inner self at the level of the solar plexus is guiding this person through life. Reason at the level of the forehead helps the person. At the level of the chest there's a firm and calm sensation. These are the three states of the completeness which save the person: the completeness of the mind, soul and will. Clarity, calmness and strength. I think this state is what we can find in the painting by Zinaida Serebriakova (1884—1967). Every person tries to maintain this state, but it doesn't always happen.



*Fig. 3. Z. Serebriakova. A Girl with the Candle. Self-portrait, 1911.*

### The beginning of neurosis

The metro trains in Moscow never come to a halt in the tunnel, but this time the train has stopped in the tunnel and it is not moving. One can simply wait for this episode to end, especially taking into account that there are people in charge of restoring a regular train service. One can simply continue reading a book or watching a film, listening to music or simply looking at the surrounding people and thinking his or her thoughts. This is exactly what most people do: they exchange opinions and interpretations on what's going on and make some assumptions, all while remaining calm.

However, a person who is not used to the metro might think that the train will remain like that forever and there won't be enough oxygen for everyone underground. Even though oxygen is not a problem, as the systems for oxygen supply are well thought through. Anyway the mind of such a person quickly pictures something really pessimistic.

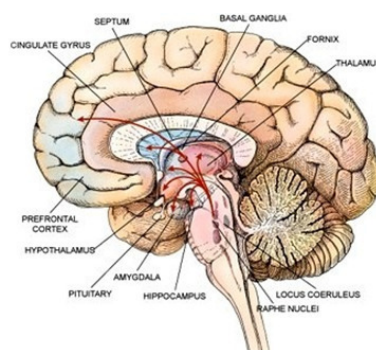
What is happening at the level of the brain at this moment? Following some misleading ideas and fantasies our mind makes false assumptions and assesses the situation as an emergency. The cerebral cortex "freezes", and the signal is sent deep down into the body where ancient evolutionary mechanisms spring to action. As a result, instead of sensibly doing something useful, a person suffers an autonomic storm. Moreover, once activated, this reaction will not turn off automatically.

This is what sets the beginning of neurosis. Most likely this person will not be able to enter a metro station again.

### Neurophysiology of fear

#### The Human being is a multilevel person

Our nervous system (NS) consists of mutually supporting elements which were developed at the different stages of the evolution. There are basic levels which unite us with much more ancient forms of life; there are also superstructural elements which are relatively newer from the evolutionary point of view: they are the unique patrimony of a human being.



**Fig. 4.** *Neocortex is a “human brain”; limbic system is our “animal brain”, and our “reptile, or lizard brain” is located in the brain stem. In this figure you can see several elements of the limbic system: thalamus, hypothalamus, amygdala, hippocampus, and a basal gland, all of which take part in the way our body reacts to any incoming message.*

“Reptile level” is our brainstem: this is what unites us with dinosaurs, turtles, and crocodiles. “Animal level” is our limbic system, which we share with cats and dogs. Finally, there is the human brain, per se; it is called the neocortex, and it is what makes us unique. All of these elements coexist within our nervous system. Of course, such a division is only relative since dinosaurs also had a cortex. However, the cortex plays a far more important role in the life of a human being. To a large extent evolution can be viewed as “embraination”, or cephalization, as it was noted by a famous philosopher Pierre Teilhard de Chardin (1881 – 1955).

Nevertheless, there is a more primeval nervous system; it is autonomous, and it is also referred to as “autonomic” which is represented throughout the body with ganglia, which look like “beads” along the spinal column (for instance, in the solar plexus) and even in some organs like our heart. One could observe the following principle: the lower we move down our body, the older the structures we encounter there.

There are several elements of our body which we share with annelid worms and even with hydras.

### **Our tender cortex**

*The cerebral cortex* requires very delicate conditions to do its work. It is a well-known fact that it has little resistance to various injurious effects such as oxygen deficiency or the poisoning influence of ethanol. If the brain remains without oxygen for 5—7 minutes, its cells begin to die. In case of alcohol intoxication, the cortex starts deteriorating. However, the *subcortex* is much more resistant to harmful influence. The spinal medulla can remain up to 24 minutes without oxygen, while ganglia of the autonomous nervous system continue functioning without nutrition for many hours.

Emergency situations disturb the fine-tuning of the mind and take it to the realm of ancient survival instincts. When our intellect finds itself in a critical situation and it cannot find any optimal way of reacting to it, it “forwards” this task to the older structures of our mind. It is the place where our mind stores survival experience gathered from millions of years of evolution and this is what may lead to the altered state of mind.

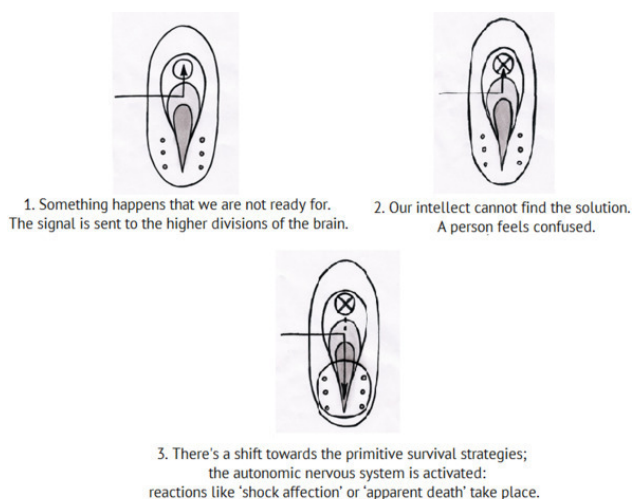
### **Fright and primitive instincts**

It also happens in the cases when the control of the situation is lost due to intoxication. A typical example in such case would be alcoholic intoxication: functioning of the cortex is temporarily slowed down, and a person is overwhelmed with primitive emotions, with aggressive, sexual or other desires which he or she can hardly control. There's a reason why people say "Wine is in, truth is out". There's a similar reaction when a person is under anaesthetic. As you can see, if our cortex analyser fails to complete the task, the amygdala (the brain's alarm dispatcher) redirects the task to the more stress-resistant structures. Our "subcortex" and autonomous nervous system step in. In these cases, the following behaviours are activated:

- a) Bursting with energy and fighting for life;
- b) Running away;
- c) Preserving energy, "going into the sleep mode", hiding.

There are not many options to choose from. Something happens that we are not ready for. The signal is sent to the higher divisions of the brain. Our intellect cannot find the solution. A person feels confused.

There's a shift towards the primitive survival strategies; the autonomic nervous system is activated: reactions like "shock affection" or "apparent death" take place.



**Fig. 5.** Signal routing when an emergency situation takes place.

### **Like a bee against the window**

It is a good moment to remind you about the observation of Ernst Kretschmer (1888—1964), an outstanding German clinical therapist. In his work "Hysteria, Reflex, and Instinct" first published in 1923 Kretschmer describes the way a bird or a bee behaves when it accidentally flies into a room. In its striving towards light it becomes hectic: "The creature is flapping and fluttering, moving chaotically from side to side; these movements repeat as convulsions until it finds its way through the window to freedom. Then normal flying movements are immediately restored" (Kretschmer, 1996, p.15)

Kretschmer saw the analogy between the above-mentioned behaviour and the way people behave in extreme situations. Thus, during an earthquake the crowd typically behaves irrationally and chaotically. But even these chaotic movements can be life-saving.

### **Two soldiers in the command unit**

Kretschmer also gives another very bright example: "Two soldiers are incapable of dealing with the horrors of war. The first would think about his neat handwriting, his technical skills, and connections at home; he would consider the pros and cons, make several clever steps and would finally

find himself working in a quiet office. The other is found in the trenches after heavy artillery shelling; his eyes are shifty. He is taken away, he begins to shiver, then he is taken to the psych ward and after that he is sent to work the garrison service where he meets the other soldier in the quiet office busy writing.

There are two ways: one is exclusively typical for human beings only, while the other is an exemplary biological reaction which the whole animal sequence goes through: from unicellular creatures to a human being. (Ibid., 14—15). Then Kretschmer draws the following conclusion:

“A movement storm is a typical reaction of living bodies to life-endangering situations. A movement storm is self-help of relative biological use”  
(Ibid.)

It is quite interesting when this reaction is compared to the behaviour of children; he notes that as a reaction to unpleasant situations there's screaming, pushing and lashing out instead of adults' balanced words and movements (Ibid., p.17). More than that, he also points out the fact that adult people manifest the tendency to approach a new situation with a calculated action, and only in some extreme situations an adult would react with a “movement storm” (Ibid., p.16).

### **Freezing**

Kretschmer reminds us about another widespread response to danger which is typical for many living beings, which is: “apparent death”. Some kinds of fish are capable of “freezing” up to 15 minutes and sometimes even longer while lying on one side. This is a defence mechanism which helps the animal hide from and look unattractive to the predator.

According to Kretschmer, such responses are “something frozen, as a formula, squeezed into the fixed template without any flexibility in each particular case” (Ibid.)

### **Psychological emergency mechanisms**

A driver uses the steering wheel, brake and gas in order to adapt to the motion of his or her car to the situation on the road and get to the destination successfully. This is how our rational mind helps us adapt to new situations and overcomes challenges in the course of our lives. This is an adaptation of **repeated use**, which is activated in normal conditions.

However, there's also an airbag installed in the car. It is activated in case of an accident and does not require a driver's specific actions. This is how our bodily mind or our autonomic nervous system reacts to the situations which our body identifies as “an emergency”. When our latest “instrument” doesn't respond, the primitive one steps in, and in this case we are talking about a **single-use** escape plan with a limited number of strategies (attack, escape or hide), as we have already noted earlier.

Once having been put into use, an airbag will require a replacement because it just won't return back to where it was before. The psychological emergency mechanisms work similarly: once activated, they have a tendency to repeat non-stop. Time doesn't really heal anything in this case. Such conditions become chronic or, as psychiatrists say, “processual”. Thus one would need to take conscious action in order to turn these mechanisms off and bring the body back to normal functioning.

And now let's have a look at what a person feels when he or she is going through this. This is very important because the key to cure phobias and other psychotraumas is all about addressing one's feelings.

## **Phenomenology of fear**

### **Out of the blue: how one perceives a danger alert**

When describing an episode that led to a disorder, many describe it as “something that hit me mildly on the head”, “it's like hot water was poured on me” or “like something went through my body”. Shocking information is perceived as something appearing “out of the blue”.

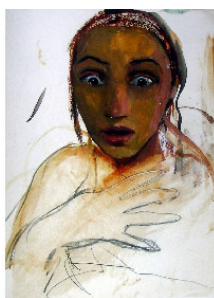


However unusual and even sometimes strange these descriptions may be, they all share the same features. Hundreds of people whom I have worked with in the course of my research claim that at the moment when they got scared, they felt like their bodies swallowed something which has been poisoning their lives ever since. There's a feeling that this substance moved down to their stomach where one starts feeling an unpleasant sensation whenever the terrible situation which caused this is merely mentioned. In some particularly difficult cases this substance is clearly associated with a poison that infects every cell of the body.

There's an expression "my heart leaps into my boots" where "heart" is actually your vital energy which moves down to your stomach when you feel frightened. As a result, the top of your head and the surface of your body feel cold. A rapid transfer of energy from the periphery to the centre is taking place.

### **Vacuum unit**

Imagine a vacuum tank that suddenly depressurises. Everything that is around is sucked into it. If this machine was close to the gold bearing river full of golden nuggets, it would suck in all that too, including the sand, and the pebbles. Something similar happens to a person at the moment of confusion: interior space of the body drags down information, including everything that seems to be terrifying.



**Fig. 6.** *When we are faced with something unknown, we often feel at a loss. Such reaction can be seen in the self-portrait titled "Frightened" by Zinaida Serebriakova (circa 1917). The Girl's eyes are open wide, and her mouth is open too. When there are no reasonable solutions to be found, there is a sensation of emptiness inside. When the "emergency" signal is "sucked into" the area of the solar plexus, the process of "sensibilization" takes place.*

When frightened, people open their mouths and eyes widely, make signs of dismay and then sharply inhale.

At the level of our sensations, this is exactly the moment when information is "sucked into" the head, chest and the solar plexus, which could later cause a phobia.

### **Rely on sensations**

I treat these descriptions of the sensations as useful clues which could prove very helpful in the course of healing. They should be taken into consideration within the constraints of their own logic, that is: as they exist. You can hear the following description: "It hit me like a ton of bricks, and the dust from them got under my skin," because this is *actual feedback* on the processes that are taking place in the body.

Evidence from spatial perception lays the foundation for further work.

**Your bodily energy and wisdom is where your attention goes!**



In order to restore the process, you need to establish a back-and-forth connection with it. As soon as this connection is established, you get the access to control the processes which earlier seemed uncontrollable. This includes the processes at the level of the autonomic nervous system.

An important discovery of Psychocatalysis is that *when attention is paid to the sensations in the interior space of the body, one is able to establish the necessary connection with the processes that take place at the autonomic energetic level, and thus one gets to control them successfully*. More than that, this is pretty much the only actual way to access these processes.

One of the principles of our method says: “Energy and reactivation of regulation is where your attention goes.” As soon as a person starts noticing something in his or her interior space, an influx of energy is directed to it, and the process reactivates. However, there is a second factor that also plays an important role, and it is comparing the actual state with the ideal condition. It is our attention that contains information about our ideal state and to what extent our current state differs from it. Any process in the body, once it finds its reflection in the mirror of our attention, begins to turn itself around. That is why we would like to add the second principle to the first one about attention and energy: “Your attention guides you to the wisdom of the body.”

### **The two components**

In the descriptions given by the people who suffer from phobias two components can be singled out:

- **Head (or “cognitive”) component:** images, thoughts, fantasies about the traumatic incident;
- **Bodily (or “sensory”) component:** sensations in the body connected with the danger signal and the reaction to it.

Healing from phobias through Psychocatalysis presupposes careful attention to both levels of our consciousness. Psychocatalysis as a cognitive-sensory therapy differs from other psychotherapeutic schools in the way that it appeals to the processes at the level of the atomistic nervous system and to the sensations and energy as it actively works at the levels of both the central nervous system and the intellect.

### **What one should strive for and what one should avoid**

In our body, the solar plexus has a priority for storing information. As a rule, this is where the information about what to strive for and what to avoid is kept.

Useful information usually makes its way to the solar plexus gradually: it is absorbed from the exterior, concentrates in the forehead, then it moves from the head to the chest, and then finally goes down to the stomach. This is how a person enriches him or herself and becomes more competent. At the moment when a person feels lost and confused, unchecked information makes a meteoric descent within the space of our mind. Such unbalanced “competence” turns into a curse for a person.

Imagine there is a man who is going on holiday in a week’s time. He watches the news about a plane crash on TV. This is a tragic event; however, it has a very remote connection to his trip. Anyone would feel sorry for those who lost their lives in this plane crash and for those who would bear the burden of the guilt for this happening; this is a moment to pray and to sympathize with the relatives of the victims. Nevertheless, life goes on, and one needs to move on, too. Every trip has its risk but an adult person usually feels ready to take it.

What happens to a person if he or she is made unstable by such of information? This person will feel confused and with that “vacuum” feeling inside. Fragments of the burning plane will get “sucked into” the solar plexus. The state of shock passes, but the person seems completely different: a “black substance” remains in the mind. The topic of air travelling becomes a sore spot, and reason, having lost its ground, cannot restore its power. Arguments like “planes are the safest kind of transportation, and millions of passengers land safely in their destination points” are no longer convincing. Moreover,

it's doubtful if this person with the plane "debris" stuck inside can really enjoy his or her holidays when there's a plane home to keep thinking about.

This is how information about danger, whether it is real or imagined, begins to play the main part in the life resources management centre at the moment of instability, and that completely changes the life of a person.

I would like to show an example of a practice which demonstrates how this can be cured.

### **Highwaymen**

Boris was on his way to the countryside when he was falsely accused. As he was changing lanes to the right, he heard a strange noise. It was unclear what exactly happened. A black car, which had been moving behind him, started signalling with its headlights. Boris stopped.

Two people got out of the car saying that Boris had scratched their vehicle and broken a mirror. Boris got out of his car. He saw a small scratch on their mirror, but it also looked rusty and old. While Boris was talking to one of the men, the other made a couple of steps along the car and made a mark with sandpaper on the side that Boris had allegedly scratched. Boris thought that they must have thrown a plastic bottle at his car earlier, and now they were falsifying the rest of the evidence.

One against two; both men were wearing black leather jackets and definitely looked like veterans of the Afghan war.

He tried to phone friends for help but they didn't pick up. Moreover, Boris was a thirty-minute drive away from the city. He couldn't even say where he was exactly. Even if anyone could have helped him, that would have taken time.

Intimidated, Boris made a decision to buy them off. After some negotiation, he paid them \$300. His troubles were over, and he was able to continue his trip, but what were the consequences?

During the psychotherapeutic session Boris feels that some "darkness" has entered through his spine, at the level of kidneys. Something that looked like a saucepan full of dark beetroot soup. It was then when Boris realized that he stopped enjoying going by car to the country.

In the process of self-regulation Boris let this "dark soup" spill out away from his body. His spine become "whole" again.

He also created a backup plan for possible similar situations. Should he carry a gun? That would be too much. Should he call the police? Sounds much better. Should he call the authorities or should he just deny all the demands of these racketeers? While Boris was considering his options, he went back to his feelings. In his inner vision toads and crocodiles begin to jump out of his back. These were his fears which he had been accumulating about meeting strangers on the road. Then there were numerous pictures of corpses coming from the back of his head. These were the words of eyewitnesses, coming mainly from TV programmes. During the "tough" nineties in Russia one heard endless stories about highwaymen. Their trick was to use falsified evidence as an excuse to intimidate their victims.

Closer to the end of the session Boris made a sensible decision:

"If I ever meet such people again, I will be firm, write down their number plate, call the police and tell them that my insurance will cover it."

These words are the evidence of the reverse process: that "dark soup" was pouring out of his kidneys, those "toads and crocodiles" were coming out of his spine, and the "pictures of corpses" were "flying out" from the back of his head.

After the session Boris felt like a new man.

## 1.4. Other ways of working with phobias

### **Hypnosis and archaic practices**

Once a woman who was suffering from a fear of planes came to an appointment with the famous hypnosis specialist Milton H. Erickson. The doctor sensitized her for an imaginary flight and made her believe that if she landed safely, her fear would slide off the seat and be gone. When the patient realized that, she jumped up from the seat screaming “It’s contagious!” and wouldn’t let the doctor’s wife, Mrs. Erickson, sit on this seat, trying to protect her from the danger. This is another way of working with phobias. One more example is the practice of “ebbing the fear” which comes from traditional practitioners. They part from the idea that fear goes into the body. Then the healers create a special condition to remove fear from the body. The healer pronounces the spell and pours melted wax into a bowl filled with water that is held above the patient’s head. Both the healer and the patient expect the fear to move to the wax. When the wax solidifies in the water, the form it takes should reveal the real former fear of the patient. For example, if the patient was afraid of dogs, the wax might take the shape of a dog’s face. This also serves as proof for the patient that the fear is gone. When I went to Bashkiria, I learnt how fear was understood in the local shaman practice. During the seminar, there was one participant who was really interested in the customs and traditions of her people. According to her, the moment the person is frightened, he or she loses a part of their good soul, and a dark spirit settles inside. The task of the shaman is to find the lost part of the soul and send away what wrongfully entered the body. I would say it partly looks like what we witness during the psychotherapy sessions. What is the difference then?

### **Expecting a miracle**

In the above-mentioned examples a patient is looking forward to the fear moving away, be it sliding on the seat, pouring into the wax or going to the centre of the Earth (which is what shamans in Siberia do). Expectation should trigger some sort of work in the body which will eventually lead to the healing. However, neither hypnotist, nor healers nor shamans tell you *how exactly* this result is achieved. It is impossible to trace what is hidden in the core of the process. There’s only the expectation of the *miracle*.

Both parties, the healer and the patients, **hope** that liberation will take place. This is an option of “righteous expectation therapy”: if you hope for something positive, it will definitely happen. Nevertheless, the result is not at all guaranteed because the whole process is delegated to the subconscious, and it just cannot do all the work by itself. The patient cannot just play a passive role in this process.

### **Trance is not enough**

Neither auto-training (autosuggestion), nor meditation of the general character really work in case of phobias and other traumas. “Formulae of auto-training” set the idea of striving for an ideal condition but they do not offer any step-by-step instructions on how turn a halted psychological process around. In serious cases these methods are futile. Trance as such, without any active participation of consciousness, can be healing but it might be considered more like luck rather than an efficient method. The same applies to other methods which are aimed at non-directive activation of nervous and psychological processes (holotropic breathing, etc.)

### **To understand is not enough**

There are completely opposite approaches which presuppose addressing the intelligence of the patient: “Don’t you see that your fears are ridiculous, and that you can easily overcome them?” “Of course, such kind of understanding is important but it is not enough for healing oneself from fear. Increasing one’s level of competence doesn’t have that much influence at the autonomic

level. The head can understand that there is nothing to be afraid of, but once the object of fear is mentioned, a sinking feeling will appear in the stomach.

There's a curious story about a patient in therapy who imagined that he was a seed and was afraid of being pecked by a rooster. After various therapeutic sessions his doctor asked him: "Well, do you understand that you are not a seed?" – "Of course, I do! I am a person!" – "Will you go home without worries?" – "No, doctor." – "Why?" – "Because I know I'm not a seed, but does the rooster know?"

Understanding creates some background which can make further work with the autonomic nervous system more efficient but unfortunately it cannot automatically unblock the initial reactions of the body.

### **Synthetic practices**

One should pay special attention to the following synthetic practices based on Pavlov's neurophysiological research.

Ivan Petrovich Pavlov (1849—1936) and his supporters while studying the physiology of nervous processes came to the conclusion that in cases of impulsive obsessions, nervous processes lose their typical agility, there is certain inertia of nervous processes, and it manifests in congestive centres. (Pavlov, 1950).

Joseph Wolpe (1915 – 1997) was a South African psychiatrist who parted from Pavlov's research of conditioned reflexes and developed a concept of neurotic fears from the point of view of learning theory. At a certain moment "a body learnt" to treat some factor with fear. Now it has to learn how to stop doing this. "If your fears are automatic emotional habits, then you will have to use different emotions to destroy these habits. If some of your fears appeared due to disinformation then we will provide correct information (Wolpe, 1982, p.87). He introduced "systematic desensitization": a patient is brought to a very relaxed state and then he or she is subjected to a light stimulus that causes fear. Once the patient has acquired tolerance to such a level of anxiety, the dose of the stimulus is gradually increased until the patient gets accustomed to the bigger dosage and considers it low, which would then lead to a decrease of anxiety. (Wolpe, 1958, 1961). This approach was named, behavioural therapy.

It is essential that the process of adaptation is gradual, and it is based on the fact that the patient is relaxed and well informed. However, there is one issue that is left out when this approach is taken. The signal that has gone deep into the body and that has activated the autonomic system is ignored. Thus the new reaction is imposed "over" the old one. This slows down the treatment and doesn't actually set the patient completely free from his or her internal fear fighting.

There is another method based on Pavlov's neurophysiological approach. This is a method of working through traumas which relies on eye movement activation (Shapiro, Francine, 1996). The foundation of the method is a highly interesting observation. When a person stops looking for solutions, the frustration settles in, and his or her eyes seem to stop, and it looks as if this person is gazing into space. In contrast, when a person is trying to find a solution, his or her eyes are moving actively. In order to help a person overcome the inertia of nervous processes, he or she is motivated to move his or her eyes. The therapist moves his or her hands in front of the patient's face and thus sets the direction of the patient's vision. The directions can be the following: left-right, diagonally, in a circle or figure eight. The movements must be quite quick. Just as the eyes begin to move, "impulse movement" is triggered in the brain. When the stagnant focus begins to "blur", the chance comes to work through the traumatic experience.

This approach can provide quite useful results in some cases, though it is still artificial. I have never applied it in my practice. If I reconnect the attention of the patient with the aspects that are holding his or her mind and nervous processes, then the release happens automatically, with great

precision, a full-scale feedback, with the total participation of the patient and understanding of the significance of the process. Further on I will try to demonstrate it with examples.

Having paid my respects to my colleagues, who have been working on the idea of counteracting fears and other conscious fixations, I would like now to describe my own approach.

### **Conscious self-regulation: Psychocatalysis**

*Self-regulation based on the primary sensations* is a mild directed alternative to other kinds of therapy which appeals to the subconscious (meditative techniques); it may also serve as a supplement to the kinds of therapy that work with the conscious mind (analytical techniques).

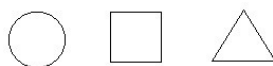
A patient can observe the processes that take place in his or her mind, and the result depends on the patient, on his or her decisions and not on favourable circumstances or the authority of the healer. This is a method of internal work: it's reliable, simple, natural, and fast.

Let's have a closer look at the details.

## 1.5. How one can overcome fear and enjoy living

### Start with a simple drawing

Before you continue reading, I'd like to recommend you do this quick test. You'll need a little piece of paper and a pencil.



**Fig. 7.** *Geometric shapes which are used in the test “Constructive drawing of a person”.*

Draw a person made of rectangles, circles and triangles. You can vary the size of the elements. There should be ten geometric shapes in your picture.

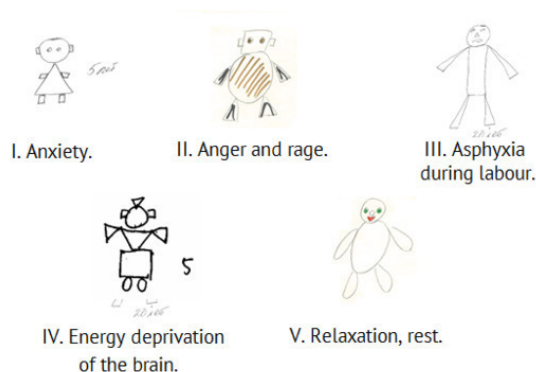
This test is called “constructive drawing of a person”. The authors of the test are Russian psychotherapists Victor and Helen Libin. This test is quite simple and the result can be quite useful. I introduced this test into psychotherapy and self-regulation. According to my research, such drawing is a projection of a person's self-awareness and is an imprint of a person's energetic profile.

How can one's fears be reflected in the drawing? In this case the following combination of figures is typical: a round head and an oval body. Wide-open eyes and a navel serve as additional characteristics. Arms and legs are usually made of triangles.

Triangles in the picture are a sign of a lack of fulfilment, especially when compared with the more “stable” rectangles and circles which our mind intuitively uses as figures with more volume in order to depict zones of the body filled with energy. As our body can feel energy stored unevenly, we can reflect it in the picture.

#### Typical combinations

As an example, I would like to demonstrate several typical configurations which often appear in these drawings. They are very common, and are often reproduced by patients suffering from similar problems.



**Fig. 8.** *Typical combinations in the test “Constructive drawing of a person”.*

Anxiety and helplessness are shown with a big head and small extremities (I). Feeling unappreciated, angry and rebellious is pictured with the “inflated” body and a square head (II). Asphyxia during labour and a central nervous system injury can be seen through the “unstable” graphics and a head filled with different elements (III). Brain energy deprivation syndrome and sympathoadrenal episodes can be revealed through a narrow space at the level of a neck or a body, a big head, “a hat” or other elements on the head (IV). Feeling relaxed and comfortable is shown with circles (V).

### **Reservoirs of our consciousness**

The drawings reflect the state of the two above-mentioned “reservoirs of our consciousness”; these are our *head* and *body*.

They can be filled in moderation, and in this case a person preserves energy and successfully overcomes the obstacles that come his or her way. However, if the reservoirs are overloaded, then life efficacy decreases.

The size of the head shows the degree to which the brain is activated, and the size of the body gives us information about the state of the autonomic nervous system.

Smaller arms and legs with an enlarged body is a combination which can be seen even in the drawings of quite successful people who in their childhood used to be vulnerable too and had to live through traumas and tensions while getting used to new circumstances. I have even witnessed figures with enlarged heads and shrunken extremities in the drawings of famous meditations masters in India. These disorders had appeared long before they started practising self-fulfilment. It's quite likely that their experience and practice has helped them to avoid any further stress, but the old stress still remain.

These are the major principles of the diagnostics. Now let's move on to the healing practice.

## **Set yourself free from fear**

### **Objectives**

You can spend a lot of time trying to convince a person suffering from a phobia that there is nothing to be afraid of but it will have no result. Of course, it is important to understand that fear doesn't adequately assess the risks but that is not the end of the treatment.

It is necessary to work through the phobic disorders at the deeper levels. One should organize a process that is inverse to the event of fear-formation: we need to find out what entered the body and remove this alien object – and only then will it be possible for the person to calm down. That is why it is necessary to gain experiences that lead to reasonable and realistic attitudes towards risks, and usher this feeling to the place where the initial fear was born. New ways of behaviour are easier to build in these circumstances, and this is our plan.

### **Get rid of phobia in two steps**

I have come to the conclusion that a phobia is **tension after a traumatic injury**. *Fear* comes after the *fright*. Fright is what has disturbed the normal functioning of a body; it is information trauma (*dust, smoke, soot* or any other kind of *blackness, darkness, greyness* which has penetrated the body). Fear and tension are the consequences; they are the reaction.

That is why it's important to do the following when working through a phobia:

1. Move “fright” out of the body and restore energetic balance to the body.

After that:

2. Introduce new information about efficient strategies of behaviour in the situations which used to confuse and understand that these situations are possible to overcome.

In this process one needs to remember that:

a) The patient defines what entered the body at the moment of confusion and whether he or she should continue living with it or get rid of it.

b) The wisdom of the body actively and eagerly supports the decision of the individual: this will trigger the process of letting go of that blackness which has invaded the body. It will leave the body the same way it entered: *through the same spot, the same way*.

c) A person usually has enough knowledge and experience to make the right decisions when similar frightful and formerly confusing situations occur. In some cases, conversations can help by increasing awareness and building new behavioural strategies. It is particularly important for a person to understand their own knowledge: he or she needs *to locate the knowledge (whether it is in your forehead, in your head or somewhere else close to you) and move it to the place where it should be (which is in your solar plexus)*.

Now let's have a look at some cases from practice.

## **A case from practice. Fear of fainting**

### **A frail girl**

Lina is afraid of fainting and dying. She is 20 years old, with an oblong face shape and thin arms. There's another reason why she looks frail: she eats very little, she's very picky because food often makes her nauseous. Her mother is always by her side because Lina is afraid that she might feel unwell and there'll be no one to help her. They came to the session together.

Lina is an emotionally warm person; she has a boyfriend who doesn't seem to make a big deal of her hypochondria due to his cheerful character. On one hand, this relationship is a great help for Lina but on the other – she's too afraid to lose it. She has decided that if they break up, she'll become a nun.

### **Instinctive fear**

Seven years ago Lina fainted: for some time before it happened, she had been suffering from headaches, spinal problems, hormone fluctuations and meteosensitivity. She thought she was dying.

Fortunately, that episode didn't end tragically, but the whole experience was rather unpleasant and difficult to understand for Lina. The fear settled in. She began taking medication, which didn't help, and only caused complications. Lina started having thoughts about committing suicide and demanded that someone always be by her side. An admission to the psychiatric facility was being planned as the next step.

Lina lost faith in restoring her health. However, zest for life and the wish to finally get rid of the painful fear hadn't left her completely, and she agreed to follow my simple instructions.

The first drawing that Lina made sent her to the age when the symptoms appeared. There was a big head, a round, somewhat "inflated" body with "poor" triangular limbs. Some additional elements were drawn on the head, which pointed to the fact that Lina had vasospasms, organic problems, and that her brain had oxygen deficiency.

### **Working hypothesis**

When Lina was fainting, she couldn't understand what was going on with her, and as a result her body absorbed the fright that her life was about to end. Protective mechanisms, which had been guarding her life, received an emergency call, got activated and remained in this state for many years. Nevertheless, when you post a sentry, you can also relieve a sentry when they are no longer needed.

Under the influence of an erroneous danger signal, our body starts to do unnecessary extra work which is exhausting; and it's not just a matter of energy. More than that, this "guarding" system takes up so much effort and strength that there is no energy left to live a normal life. We all require



the ability to make sound decisions, and in order to make good decisions, you should first get rid of the erroneous assumption that was sent to the depths of the body.

### **Clear the body of the fright**

How can one find that alien element which has entered the body? In this case one can turn to the practice of “detecting” it as something material, as matter.

Lina and I are working together, relying on her immediate sensations.

Which zones of her body respond when she experiences discomfort, anxiety and fear? Where can she locate the sensations which are connected with these tensions?

It turned out that they were hidden at the level of her head and core. First of all, I tried to find out what caused the tension:

“What got into your forehead? What does your head feel like?”

“The air is grey, thick and dark,” says Lina.

“Do you need it there?”

“No,” she says without any hesitation.

“Why don’t you let it out through the same place it came in?”

*“It has started coming out as smoke through my ears,”* Lina is describing the process of self-regulation that has just begun.

“How much of it has already left your body?” I asked her some time later in order to support the internal work she was doing.

“About 70%.”

“Wonderful progress!”

“In my head I can feel some pleasant emptiness with white walls,” she says two or three minutes later.

“Observe the ‘emptiness’. It’s quite likely that your body will get rid of it too; this is how you will help your body to ‘spread its wings’.”

And this is exactly what happened:

“The box has shrunk and disappeared,” Lina added.

“Thus the space in your head has gone. Look if there’s anything happening at the level of your chest or lower.”

“The same ‘smoke’ has started coming out of my chest and through my mouth.”

“Soon it was out too.”

“Is there anything lower that has smoke in your body?”

“No, it’s all clear.”

I asked Lina what she felt in the lower part of her body because it often happens that the solar plexus is involved in the process. In our case, despite that long record of suffering, the “smoke” didn’t go lower than the level of the chest.

### **Body proportions**

Having cleared the body from the “smoke” Lina felt dizzy. I asked how big she thought her head was at that moment.

Lina showed something that significantly exceeded the actual size of her head. She also said that she felt something was dark and plate-shaped on her head.

The subjective feeling that the head is bigger than it actually is can be interpreted as a sign of over strain of the nervous system. That heavy plate on the head is a sign of oxygen deprivation. It is something very typical in these situations.

I suggested the following: “Don’t you think it’s time you let these sensations achieve some balance? If you think it’s time, then observe this process.”

### **Liberation**

Lina observed how her body was reaching balance based on peace and clarity. According to Lina's words, her body parts became more proportional. A nice warm feeling spread all over her body.

After the first stage of therapy Lina perceived her body as having a "reddish-yellow" colour. Now she said it was becoming evenly orange. The "plate" attached to her head moved backwards, became detached and then disappeared completely. Lina's head felt free on the inside and on the outside, it also restored its proportions and felt smaller than it had been.

Lina confessed that she was now experiencing a very strange and long forgotten feeling of freedom and peace. She wanted to keep this feeling.

### **Peace and strength**

"The sense of even fullness is the foundation of normal existence, and this is where you can start looking for a new way to look at what happens in your life," I said.

"I cannot believe my happiness," Lina said.

"I understand. You need to observe this state and make sure that it is stable. It is important to learn to trust yourself again. Your body lives freely now and controls the processes. You become an adult and feel calm about it," I said these words in a reassuring voice trying to check Lina's reaction. "Do you know what kind of behaviour you need to live your life? How to feel safe? What actions are reasonable in this case?"

You need to guide your competence to the body in order not to overload your head! In the case of something unpleasant getting into your head, you need to let it go using the same instructions and without wasting any time. Your neck, shoulders and back should be relaxed. Stretching exercises can be of great help in your case, and naturally, you need to establish a healthy work-life balance.

Lina observed how this practical knowledge moved down to her body with a bright flow. This knowledge included our conversation and what she had heard from various doctors and people she had met in her life. This patient's condition has improved.

"I would like to feel peaceful most of the time," she said.

"This feeling will be with you at home and on the road, when you're alone or when people surround you; anytime and anywhere."

Then I suggested that Lina did more tests, to "try them on," so to speak.

"Keep calm and walk yourself through various situations in life."

"This is exactly what I'm doing right now," Lina answered, keeping her eyes closed. When this process ended, she opened her eyes.

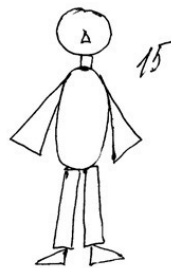
This was just one episode of our therapy.

However, I would recommend double-checking to what extent the body has restored peace of mind.

Each stage of working through the issues solves its own part of the problem until it's totally resolved.

### **Figure 2**

Then we had another go. Generally, there may be three or more takes within one session, and each one can begin with a drawing. It reveals if the old problem has been resolved, and a new one is often revealed instead.



**Fig. 9.** *Fear: a round head and an oval-shaped body.*

The second picture has only one inserted element. The other two elements which appeared in the first drawing (round eyes) (**fig. 8-V**) have become a part of much longer legs. This is a very good sign. However, I confirmed my opinion that the cause of the primary angiospasm that triggered dizziness was the problem with the spine, blocks in the neck, the back of the head and in the chest. This assumption was proven correct by the way the arms were drawn in the picture: they looked like arrows pointing at the block: more than that, they were asymmetrical which is always a sign of a physical problem. The neck is specifically depicted in the picture. The nose seems to have more connection with the back of the head rather than with the face, and that also points to respiratory difficulty related to compression in the chest.

We have checked how the arms, shoulders and spine could react to stretching. Stretching shoulder muscles, at the chest-level of the spinal cord and neck turned out to be very efficient. Lina's head felt "cleared up", and the headache was completely gone.

Some advice.

"Every day you become better and better at overcoming any difficulties, and you feel more confident in any situation," I was saying these words once again while Lina was sitting with her eyes closed and observing the liberation of her body after her spinal cord had been straightened.

"You feel that you have everything you need to sleep and eat well and to enjoy your life!"

"I want to keep this feeling," Lina said.

"It's a natural reaction," I replied. "You suffered a mishap when you were at an impressionable age, and back then you didn't have the knowledge to react to it adequately. Your body didn't know what to do and made a strain to save itself but now everything is different. Now you have grown up, you have more knowledge, and that is why you know how to maintain your balance. More than that, you know that self-regulation is a reality. If you are feeling better now, it means that you can feel like this all the time. If you have managed to restore your peace of mind right now, then it means you will be able to maintain it in the future."

That was what we achieved in this episode of our work.

Of course, that is not all. In order to fix the result, Lina had to learn to understand her genetic habit and build, and the basics of self-regulation in case of emergency. Lina has to respect herself: she is an individual endowed with a unique life! All this work required additional time and effort. Nevertheless, the action of setting herself free from the "smoke of erroneous knowledge" and levelling out her psycho-energetic profile played an important role in restoring Lina's health. Now she has come to a new level of maturity.

...And here's another case from my practice. It shows that even an everyday situation can trigger a phobia.

## **A case from practice. Mother-in-law in my chest**

**I love my wife and kids but I am not happy**

Dima is 28 years old. For more than three years he has been suffering from vegetovascular dystonia, with sympathoadrenal episodes and panic attacks. In this case panic attacks manifested in the heartbeat, as shortness of breath, sweaty palms, cold sweat, and excessive urination.

He came to our appointment with his wife. She must have decided to come to support Dima.

Dima told me that he had undergone treatment at the clinic of neuroses; he was prescribed “Relanium”, which seems to help him but only for a short period of time.

He also visited a psychic who was trying to remove the jinx. This “treatment” seemed to have distracted Dima from his anxiety for some time. Apart from that, he visited another doctor who determined that it was “nervous system disturbance on the left side”. This visit also seemed to give some temporary improvement, but soon everything went back to its usual state.

Dima doesn’t go out much as he is afraid he might feel unwell. “My job is OK but sometimes I can’t stand it because of my condition. I love my child, but I cannot pay as much attention to him as I would like,” he said with a sad voice.

Dima’s wife treats him well. You can see it from the expression on her face, the way she looks at him no matter what he says, also she has a sense of comfort that one could notice in her posture.

### **I didn’t notice anything**

“Do you have any idea what is going on?” – I asked the couple.

“We do,” they answer together but then Dima takes the initiative. “There was an incident several years ago, and this is when it all started. I was on my way to pick up my wife and son at my sister-in-law’s. I was feeling happy, looking forward to meeting them. Before I went into the flat, my sister-in-law said: ‘Something has happened to your parents’. It felt as if hot water was being poured on me. There was a sinking feeling that then left my body through my feet. I started asking what had happened. It turned out my mother-in-law had a bad dream about my parents and she always claims her dreams come true!”

“I felt really worried,” Dima continues. “I tried calling my parents (they used to live in Uzbekistan back then) but I couldn’t get through. Only 24 hours later I finally reached them, and I asked them cautiously how they were doing. They said everything was OK. I kept asking and found out that indeed there had been a small accident: my dad’s car got hit from behind but the damage was minimal and with no injuries. I calmed down but then one week later I had the first anxiety attack that scared me so much...”

### **A woman in my chest**

We begin exploring the sensations. Dima points to the pressure in his chest.

“What is that feeling?” I ask.

“A woman is sitting there...” – Dima replies.

“Who is it?”

“My mother-in-law,” he sounds absolutely sure about it. “It was her who started it when the breakdown happened,” he sounds annoyed.

Then it turned out that the mother-in-law wasn’t the only reason. Dima seems to have the same reaction to any situation when the circumstances are pressuring him: he suffers, says nothing, and it makes him angry. He would really like to tell some of them to get lost, but he has to stop himself. “When I was a child, I could openly say what I didn’t like and have it my own way, but now I cannot do it anymore.” Dima removed his mother-in-law and others from his chest and resolved to expressing his discontent in a civilized way. The knowledge of how he could react differently moved down to his body. It was as if his soul suddenly matured. For some time Dima became busy with his work and family, and we lost touch.

### **Bargain till the end and pay in full**

Several years later I was standing in the street hailing a cab when suddenly a car stopped and from inside a smiling face was looking back at me. This man offered to give me a lift and called me by my name. As soon as I got into the car I realized it was Dima. I feel great, – he said happily, – I haven't needed a doctor's help since then. We talked about this and that. When we got to my destination I got my wallet out.

“No, no, there's no need to!” Dima protested.

“Do you remember how you were telling me about your grandfather” words: “Bargain till the end and pay in full”? Please take the money; you've earned it.”

Dima didn't protest any more. He had paid me for my work and hadn't tried to bargain. Dima's story has a lot of typical details like “It felt as if hot water was being poured on me,” “the sensation went through my body and left it through my feet,” “my chest feels tight”. The logic of affect gives you information on how it can be treated. If there's a tight feeling in the chest, you should release this tension. If there were sensations passing through your body, then they will leave through your body as well. In any case there must be a reverse process. The images one experiences can be very different. As we have just seen, you can even experience “your mother-in-law sitting on your chest”.

### **A case from practice. A sniper**

Finally, in this section I would like to cite the most illustrative example. This is a story of a sniper, Yuri. He was summoned for a compulsory military service and spent 10 months in combat in a war zone. He was 24 when he sought medical attention. His condition could be defined as a post-traumatic stress disorder.



**Fig. 10.** *Fear and anger: a square head with big round eyes; a rounded body.*

#### **Booze doesn't help**

After the discharge Yuri started having nightmares; he could barely sleep at night and then during the day he was irritated up to the point of starting a fight. In an attempt to get rid of this curse, he was drinking heavily. When he found out about the renewal of hostilities, his nightmares came back, and this time they had a mix of war and everyday life in them. Then there was another round of insomnia, and then it was alcohol's turn again. His final binge lasted for four days after that, he began psychotherapy.

#### **The soul is alive**

When we started talking I understood that drinking had already done some damage to Yuri. His facial expression seemed distorted. However, one could see that his soul was alive. Yuri really wanted to get better. He is an emotional person, short and plump. His speech is fast and rambling as if he is in a hurry.

At first Yuri performed our standard test and drew a person. In the drawing you can find a typical manifestation: there is a mixture of rage (a round body and a square head) and fear (round eyes) in a person who is longing for comfort (short arms and legs of triangular forms with vertex points attached to the body).

According to the drawing, one can conclude that the body is the zone of energetic overflow and some tension.

### **You will need your strength**

The age of a person in the picture is 24, which corresponds to the age of the patient. I asked my usual questions:

“What feelings are connected with this age?”

“Nightmares,” Yuri responded immediately.

“Where are these sensations located?” I continued. “Are they in your head, in your chest, in your stomach or anywhere else? You can close your eyes.”

“I feel worried in my soul,” the patient said pointing to his chest. “Just like when you’re on a swing, you catch your breath, and your hands start shaking.”

“What do you feel in your chest? Is it something heavy or light?”

“It’s heaviness.”

“How heavy is it?”

“It weighs a lot.”

“Is it gas, liquid or solid?” – I asked.

“It’s liquid. It’s crushing me.”

“How much liquid is there?”

“About three gallons.”

It must have taken a lot of time to gather that much liquid. Yuri agreed with me.

“Are you planning on gathering more of this liquid or is it time to stop?”

“No, that’s enough,” the patient responded.

Then I asked my final question:

“How much of your energy does it take away from you?”

“50%.”

“Would you need this energy?”

“Of course!” – Yuri replied. His eyes were still closed. His internal work was still in progress.

*“Observe where your sensations are going.”*

“To my arms,” Yuri said. “They are getting hot...”

And then we start observing how drawing attention to these sensations reveals what happened and how this can lead to the needed corrective changes.

Once the evaluation was formed, we can renew the state.

### **Stepping into a hot bath on a cold winter day**

I continued work at this therapeutic stage:

“Try to guide the feeling of calmness deeper into your body.”

“It feels like stepping into a hot bath on a cold winter day.”

“Where are your sensations right now?”

I was trying to focus the attention of the patient to his internal processes.

“My legs are filling in,” Yuri said after a long pause, which was the evidence that he had been observing. “There’s a light feeling, as if everything is coming out.”

“How much of it has already left your body?”

“A lot.”

“What is left in your chest instead of that previous sensation?”

“A pebble, an egg.”

I asked him to show where exactly that pebble was. He pointed to the chest between the nipples, a little bit lower.

The fact that it is the sensation in the chest points to anxiety that has been there for a long time.

Worry usually takes up the forehead, anxiety goes straight to the chest, and fear is in the stomach.

### **The cold is going away**

“Observe what is happening next,” I continued.

“The pebble is melting, and the sensations are moving down. They are filling half of my stomach.”

“What is left instead of that pebble?”

“Jelly,” Yuri said. “Again it feels like stepping into a bath. It’s all going away in a very pleasant way.”

“How is it leaving you?”

“It feels like cold coming out of me,” the patient said.

Some time passes.

“That’s it!” – he said with a sigh. “It feels like there’s nothing left.”

“Let yourself see how you can live your days and nights when you are calm and free.”



**Fig. 11.** *Psychological deterioration and the consequences of alcohol involvement.*

Visible signs of the former psychological deterioration (limbs drawn as triangles) and the consequences of alcohol involvement (a head with some elements drawn into it). However, a round head and a rectangular body signal the improvement of the psychological state of the patient with subsequent relaxation.

### **A normal head**

Having completed this part of work, Yuri made another drawing. This time it had a rectangular body and a round head, which is more consistent with a better psychological state.

I scheduled follow-up sessions within the next four weeks. However, the patient didn’t need any additional work with his war-time emotions. After the first session Yuri noted that everything fell back into place. His sleep had improved, and during the day Yuri had become calmer. I started introducing the idea that there was no need in spoiling Yuri’s current calmer state with alcohol:

“There’s no need for that. Every cell is filled with sobriety and tranquillity.”

I was saying these words and saw Yuri’s positive response.

Our follow-up sessions confirmed both normal sleeping patterns and good mood. In a month Yuri said he had some alcohol at his friend’s funeral but not much.

Our work consisted of three stages. Long-term anxiety and anger were concentrated in the chest of the patient. This tension was spreading with warmth and leaving the body as coldness. This

coldness must have been absorbed by the skin, and that is why it was leaving the body in the same way, then the tension successfully “evaporated”.



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