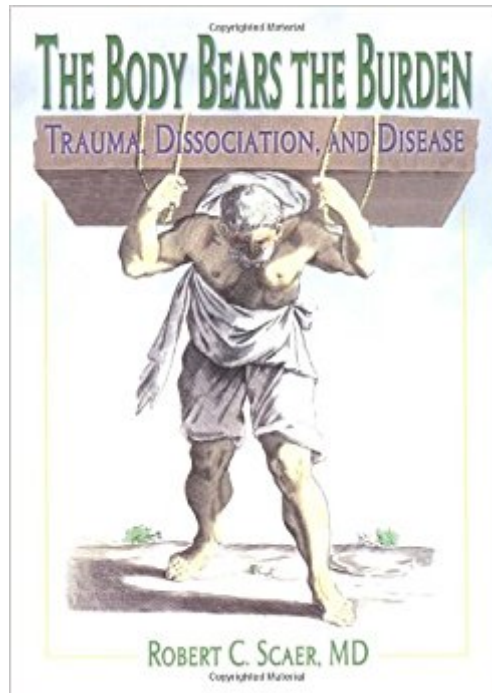


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The Body Bears The Burden: Trauma, Dissociation, And Disease



Synopsis

Measure the neurophysiological changes associated with PTSD and whiplash! Using the clinical model of the whiplash syndrome, this groundbreaking book describes the alterations in brain chemistry and function induced in individuals by what is known as traumatic stress or traumatization--experiencing a life-threatening event while in a state of helplessness. *The Body Bears the Burden: Trauma, Dissociation, and Disease* presents evidence of the resulting and relatively permanent alteration in neurophysiology, neurochemistry, and neuronal organization. This book convincingly demonstrates that these changes create lasting effects on the emotional and physical well-being of the victim--changes correlated with many of the most common, yet poorly understood, physical complaints and diseases, including whiplash, migraines, fibromyalgia, irritable bowel syndrome, and other painful, difficult-to-treat conditions. Further, the causes and effects of retraumatization are explored, clarifying the reasons some patients suffer fresh trauma over relatively minor incidents while others handle major traumas more easily. This groundbreaking volume backs up its new theory of PTSD neurophysiology with cogent theory and persuasive evidence, including: case studies correlating clinical features of trauma and dissociation with compelling physiological rationales for the symptoms solid documentation drawing from the medical and psychiatric literature of PTSD, whiplash, brain injury, epidemiology of trauma, and a variety of disease processes linked to trauma in-depth discussions of medical traumatization of patients, including the results of pediatric procedures and ineffective anesthesia demonstrations that somatization and conversion are not imagined symptoms but result from measurable autonomic physiological alteration of the affected organ a well-documented exploration of the effect of prenatal and neonatal trauma on later emotional development, response to traumatic life events, and disease and mortality This impressive empirical evidence that body, brain, and mind are a continuum offers a powerful new paradigm to medical and mental health professionals, as well as new hope to sufferers from trauma. With a foreword by Bessel van der Kolk and helpful figures, *The Body Bears the Burden: Trauma, Dissociation, and Disease* is an essential resource for the in-the-trenches professionals who confront the effects of trauma and resulting somatic consequences. It will be of compelling interest and usefulness to family practice physicians, nurses and nurse practitioners, speech and physical therapists, counselors and psychotherapists, and any medical or mental health professional who treats physical or emotional trauma.

Book Information

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Customer Reviews

By way of full disclosure, I am a plastic surgeon with an interest in patients troubled by disturbed body image and an addiction to cosmetic surgery. When I first wrote about that topic in my 2009 surgery textbook, I made the case from a few of my own patient studies that childhood trauma was one of the causes of an obsession for plastic surgery and postoperative dissatisfaction, but it was Dr. Scaer's work and that of others in the trauma field (Peter Levine, Bessel van der Kolk, Pia Mellody, Pat Ogden, Bernice Andrews, and others) that has subsequently helped me piece together a stronger theory and then provide evidence for it, some of which will be published in the journal *Plastic and Reconstructive Surgery* in October. Dr. Scaer and I have subsequently traded a few emails and he has encouraged my further research. Dr. Scaer is a physician but not a psychiatrist, which gives him the distinct advantage of being able to review the relevant mental health literature from the standpoint of another specialty. A neurologist with an obvious command of neuroanatomy and physiology and all of the abnormalities that developmental and accidental trauma produce, he can write compellingly to make the case, which I believe most physicians do not appreciate, that trauma is not universally perceived. The response to trauma depends upon its meaning to the victim and his or her sense of helplessness in a perceived life-threatening situation. It's like the lion chasing the antelope--the same physiological reactions are occurring--the pupils are dilated, the muscles are pumping, the adrenaline and cortisol are high--but the meaning to the lion is lunch and to the antelope it is survival. Dr.

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