

The 'Inside-Out' Approach to Therapeutic Care

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Abstract: *Practice of modern medicine has transitioned from being mainly body medicine, to inclusion of mind-body medicine, to the recent recognition of mind-body-spirit medicine. Understanding the problem afflicting one's body, before trying to understand the mind-body or mind-body-spirit aspects of the problem, helps the physician to quickly connect with the patient while the disease process is being understood. It is increasingly known that the source of many diseases lies in failure of the individual to cope with the stress of day-to-day life at the mental and spiritual level. Either the patient lacks positivity of mind or feels a lack of inner joy. It makes therapeutic sense when the problem occurring in the thought and feeling of the patient is first understood and set right. The 'inner being' focused approach tackles the root of the disease, making rest of the therapy simpler and more effective.*

Keywords: body medicine, mind-body medicine, mind-body-spirit medicine, root of disease, 'inner being' focused approach

1. Introduction

Practice of modern medicine has transitioned from being mainly body medicine, to inclusion of mind-body medicine, to the recent recognition of mind-body-spirit medicine. Medicine is taught to students and is convenient to practice, when health and disease processes are considered as consequences of function or dysfunction of body parts. The more advanced concept of mind-body medicine is put to use when the influence of thoughts on the body's functioning is harnessed [1]. The practice of medicine becomes even more subtle, when the reality of mind-body-spirit medicine cognized by the physician, helps him to address the emotional and spiritual aspects of the disease process [2].

2. The 'outside-in' approach

Even though these three layers of cognition exist, in actual practice, the first or body medicine carries most weightage for the patient as well as the physician. The patient is first interested in getting relief from the problem afflicting one's body, before dealing with the mind-body or mind-body-spirit aspects of the problem, and would expect the physician to do the same. From the diagnostic viewpoint, this 'outside-in' approach helps the physician to quickly connect with the patient, while the disease process is being understood.

3. Focusing on the patients thought and feeling

While causation of disease at the physical level is known to be due to various factors, it is increasingly known that the source of many diseases lies in failure of the individual to cope with the stress of day-to-day life at the mental and spiritual level. Either the patient lacks positivity of mind or feels a lack of inner joy, often one leading to the other. The problem in the 'mindset' or 'inner being', that results in the patient falling ill, is understood by taking a psycho-spiritual history [3].

4. 'Dis-ease' of 'inner being'

Non communicable diseases like hypertension and diabetes have been shown to occur due to the patient adopting an

adverse life style that reflects a problem in the 'inner being' [4]. Infections are known to set in when the patient is stressed [5]. Likewise, there is plenty of evidence in recent times for the role of the mind in disease processes [6]. A caring environment that supports positive thought and preserves inner joy, thus keeps most of the diseases at bay.

5. The 'inside-out' approach:

Therefore, for many illnesses it makes therapeutic sense when the problem occurring in the thought and feeling of the patient is first understood and set right. This 'inner being' focused approach, tackles the root of the disease [7], making rest of the therapy related to the body, simpler and more effective. Understanding the 'inner being' of the patient would thus be a valuable clinical skill for the physician, while dealing with any type of case.

6. Conclusion

While most patients expect immediate relief related to the body, adopting the 'inside-out' approach to therapeutic care makes sense once there is promise of wholesome healing of body, mind and spirit. Health care systems can thus become more meaningful, with minimal use of diagnostic or therapeutic intervention. The following quote of Dr. Bernard Lown sums up the matter: 'Do as much as possible *for* the patient and as little as possible *to* the patient'.

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