

Cultivating the Mind as Medication

by Pamela Quinn

I've been thinking about how to harness the placebo effect. Can one even consciously do that or does the belief and expectation required have to be totally real, not premeditated? I'm not sure. And then I think: does rational thought greatly diminish the possibility of placebo because placebo is about belief, not understanding. Does my intellectual curiosity deprive me of this possible benefit?

So where does that leave me? Then I ask myself, "What is the closest feeling I experience to placebo? When do I feel at my best and completely forget my disease?" (I have Parkinson's.) The answer is that it's while I'm exercising outside. I love to move, and I love nature. Most often these disease-free periods occur when I'm medicated. But on occasion, they have occurred when I'm not. And that's usually been an instance when I've been really eager to do something. My suspicion is that my adrenal gland is adding its own dopamine. But placebo is not chemical-specific; it creates health, no matter what the condition. So that takes us back to the power of the mind.

Do these two mental states to which I referred, a wholehearted belief in a positive outcome and a total immersion in something other than what ails you and that you enjoy, have anything in common?

I think they do; they both are different ways of being that help to promote better health. The first method benefits from expecting a certain reality that in turn boosts one's body chemistry in an underlying, unknown, complex, and positive way. The second involves the process of redirecting one's attention away from a problem or disease while pursuing a joyful endeavor, giving you the support of happiness and an emotional vacation. This allows for health to work quietly

on its own, unhampered by the daily struggle of coping and the underlying stress of anxiety, frustration and fear of what's to come. The experience is kind of like learning something new, having a good night's sleep, and understanding it fully the next morning. The body has a positive mind of its own. And in those moments of welcome diversion, are we just getting a vacation from disease, or is there any repairing or temporary halting of the degenerative process actually going on? And is this state something we can make into a habit?

Taking control of how we think or how we avoid negative thoughts and their impact on our health and love of life is an area where the arts and science intersect. The arts can allow for a total immersion into something else, as with painting a picture, throwing a pot, becoming a different character in a play or embodying the quality of a leaf falling in a dance class – all these things allow us to leave who we are for a moment and to exist in another reality. The power of being able to do that, to change ourselves, even if it's ever-so-briefly, or to lose ourselves in another activity, can have broader implications concerning the control we have over our lives and how we become who we want to be. We don't have to be the disease that lives inside us. There is much more to us than that represents, and we can simply make a conscious choice not to let it define us. The arts provide the possibility of enjoyable immersion and the power of transformation. And although those experiences are associated with the arts, they are by no means limited to them; creativity is an affirmation of the self, about producing something that expresses yourself.



The very act of making—whether it be a thought, an elegant solution to a problem, a way of dressing—counters depletion. It adds, not subtracts; it affirms, not negates. The doing, rather than the field in which it occurs, is of utmost importance. It reminds us who we are and that we are ALIVE!

I encourage planners of conferences to consider whom those functions are really for and to be sensitive to what psychological impact they are having on the participants. Patients need to leave motivated, inspired, encouraged, and even happy, even in the face of disease. In addition to helpful suggestions concerning practical difficulties, there need to be offerings that provide opportunity for change, for achieving something new, for adding to lives as distinct from dwelling on a disease that subtracts, for having hope. I'm not advocating denial...we have to be able to recognize what's going on with our bodies and to be able to plan for the future. But I also don't want to leave a conference with the predominant feeling being that what the future holds is only a downward trajectory. That promotes negative placebo—nocebo. I am in favor of making sure we find ways to nurture the spirit, because experiencing something transcendent, be it a poem, a painting, a baby, a concert, a sunset or a beautifully prepared meal is good medicine, even if its benefits are short-lived. (We then have to figure out how to integrate more of them into our lives to extend their positive impact.) The best moment I've ever experienced at a big conference (Southeastern PD conference in Atlanta organized by James Trussell) was a talk squeezed into lunch break by a couple—he had PD—who set out to walk the entire Appalachian Trail. Their enthusiasm, their desire to fulfill a life-long dream, their determination was very moving and motivating for me. That's what I brought home.

As health providers, as doctors and teachers, we want to understand how we can set patients up for optimum possibility of mental and physical function in life, and to be conscious of the steps we

take to achieve that. Do doctors explore with their patients, "What brings you the most satisfaction? When do you feel your best?" and conversely, "When are you at your worst?" These are simple questions but ones which need to be asked and addressed.

Sometimes I think the power of the placebo effect is small and big at the same time; it's the stone that starts the avalanche. If we can make a small improvement that we didn't previously think possible, that can lead to another and another and so on. In the book, "The Power of Habit," author Charles Duhigg explains that changing one important habit, known as a keystone habit, can alter the circuitry of your brain and function as a catalyst for life-long change.. How can we use this for health? How we think, how our bodies chemically respond to those thoughts, and how we escape in order to help heal are areas of practical medicine that we need to appreciate, understand and harness more effectively.

Pamela Quinn teaches movement therapy for people with Parkinson's disease for the Brooklyn Parkinson Group, The Edmund J. Safra Parkinson Wellness program in collaboration with the JCC and for individual clients. She also lectures, writes, dances and choreographs. Her most recent presentations were featured at the third World Parkinson Congress in Montreal.

