

PROFESSIONAL ISSUES

A Therapist's Story

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The author, a biofeedback therapist, suffered a cerebral vascular accident, producing extensive right-sided paralysis. He credits the role of biofeedback in his rehabilitation. He also describes the personal transformation that illness brought to his life and encourages therapists to gain professional and personal wisdom from the patient's experiences.

My Life

From little wooden boxes with meters and knobs, through liquid crystal wizardry and microprocessors, to self-realization.

I look back over more than 30 years of combining biofeedback, a variety of psychotherapy techniques, and down-to-earth counseling from the heart, and now winding up gray haired. There were so many patients, each one more challenging than the last. I remember well my first day of work, full of confidence and uncertainty, as well as my last day in practice, abrupt and final. We used to listen to the galvanic skin response (electrodermal biofeedback) tones going up and down while counseling individuals about denial and anxiety. The most humble to the most arrogant could see and feel their bodies responding. I saw patients improve better and faster than was often reported for other therapies. Little boxes and wires created a wonderful trampoline for self-initiated change. In the early days, each of us in the biofeedback field was pretty much on our own, with journals, workshops, behavioral techniques, and electronic bells, whistles, and hums.

In a southern town, the practice grew from a small office to an integral part of a medical clinic. "Thank you" often was mixed with limited payment. Motorcycles and long hair were gradually replaced by conservatism, open shirts, sports cars, and gadget magic. We therapists thrive on ego-enhancing self-satisfaction. At the pinnacle of success, I am told, treating an extensive list of divergent illnesses, and using a vast array of quantitative electroencephalograms, electromyograms, and computers, this therapist often saw lives change in a matter of weeks.

Out of the blue, having never been ill in my life, I opened my eyes one morning; my mind was alert, my body was paralyzed, and I was alone. I felt my body, mus-

cle by muscle, nerve by nerve, shutting down. In the intensive care unit, the neurologist told me that "the event" had definitely not finished. A massive stroke, caused by a blood clot, continued to rob me of all function on the right dominant side. I was told that the procedure that might save my life also carried a risk of death. I felt true fear for the first time in my life. I argued face to face, to convince a deity my life was not yet over. The room was flooded with intense light. I marveled at the many wires attached to my body and a myriad of medical machines surrounding my bed. I was in awe of the body's complex construction. My own body had turned against itself, ending my identity and changing every aspect of my life in an instant. Hospitals, IVs, days running together, profound exhaustion, complete loss of balance, and hemiparalysis. I was unable to walk or write. I had to accept that life would be different now. Intensive rehabilitative therapy became my new world for the next several months. The professional community's support was quite overwhelming.

I watched my office being emptied while I sat speechless in a wheelchair. Strangers stripped and shipped home my array of biofeedback devices in cardboard boxes. They were then set up in a makeshift fashion for treatment. I became the patient. I had to get back to work. I tried. I couldn't. I used all the best psychological principles to deal with half a body. I put my "thoughts" into parts of my body, making them move, where only weak surface electromyographic signals were present. This became the motivating biofeedback goal. Body responses are shaped, like a child learning to walk or to pick up a spoon, but can be accomplished in a very short period of time utilizing biofeedback. Imagine what this is like for the adult patient.

Lessons From Illness

The stroke and the long road back have been a learning process for me, and I welcome this opportunity to share the lessons I have garnered from my recovery process. I now know personally how very much counseling combined with biofeedback tools can help emotional reconstruction and how much biofeedback can empower the ability to walk on a leg that has no feeling and to use fingers that do not feel. The body has an amazing ability to

regenerate, and biofeedback may well make the difference between a person's sitting in a wheelchair with vacant eyes watching the world go by or resuming the kind of compromised life I now have: once again driving, swimming, traveling, and even climbing ladders. The office is closed. I am retired. Yet other very fortunate stroke patients often recover to the degree that they can resume their work, with an increased appreciation for the human body's remarkable capacity to heal and compensate.

If I could do it over again, I would not be so discouraged by the insurance industry's endless limitations on the provision of such a wonderful form of treatment. Insurance approvals provide food for the table, but a simple "thank you" from the patient who cannot pay, or pays little, can also feed the intellect, soul, and heart. It is only the integration of mind, body, soul, and spirit that can make for a healthy balance in the life of a therapist, both professionally and personally. We aid in healing, but it is the body's own ability that heals. Biofeedback, as we all know, provides wonderful tools with which we can learn to return the body to normalcy. My conviction now is that health care needs to place more emphasis on the bodily and emotional factors that need to be changed, rather than relying exclusively on the latest version of "cover the symptoms" medication and treatments.

My hope is that those who read this article will see their role not just from the therapist's point of view but also through the eyes of the patient. Don't be so hung up on managed care that you see only headaches and anxiety, with an occasional "tasty" phobia. See your patients as the persons they are, many of whom do not fit neatly into the medical model. They need heart, compassion, and understanding, along with the numbers on computers.

Take heed for your own well-being as well! We take very good care of our patients but too often ignore our own health needs. Look beyond the computers at the human interaction, and be careful not to become a sponge only to internalize the heavy sorrow of others. Take good care of yourself and follow your own advice. Look good. Present a real example of health. Smile. Be happy. Be the professional that you are. Keep your wit tuned. Interject personal humor along with graphs and numbers. Take the difficult cases. Relax! We are supposed to know how. Perhaps in this way, some very simple but valuable lessons learned can stay with each of us. This senior fellow believes the age of enlightenment is still in our near future.

My recovery has brought unexpected joys. As I lay in bed in stroke rehab, I looked up into the eyes of an angel, a friend. She too was given a second chance following a

life-threatening illness. She has remained by my side ever since. We were married this summer on my best friend's yacht in San Francisco Bay—my first trip out of the house in 1 year 8 months. Could I really travel across the country? I found people to be cordial, as did my new bride. Both of us look at the many blessings we have, instead of what we have lost. When someone asks me, "Have you lived your whole life in Florida?" I say, "Not yet!"

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