

Psychosomatics and Somatoform Anxiety-Depressive Disorders: Psychotherapeutic Regression by the Reavisia Method

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The high stress tension of the modern lifestyle, and especially the developing world events, provoke the development and exacerbation of various forms of panic, anxiety and depressive disorders with psychosomatic components. As well as masked psychosomatic states. This forces the appointment of high doses of combinations of psycho-pharmacological drugs, as well as long-term, often ineffective treatment of somatic disorders.

The problem of psychosomatic manifestations of psychological disorders has been and remains one of the most difficult to diagnose and treat, which doctors of completely different specialties face. In this regard, there have been and still are tasks of timely diagnosis and adequate care for such patients, who are often forced to walk "circles of hell" to specialists in search of relief from their suffering to no avail. Therefore, the development of modern methods of their psychotherapeutic correction is of particular relevance. One of these was the regressive trance method Reavisia.

A clinical case of confirmed prenatal psychotrauma in the etiogenesis of chronic anxiety and somatoform depression with cardiological symptoms.

Patient N., 56 years old, for a long time (more than 10 years) suffering from panic attacks, anxiety and depression developed against this background with somatic manifestations (F41.2 Mixed anxiety and depressive disorder). About which he regularly takes combinations of antidepressants and anxiolytics prescribed by a psychiatrist. She independently sought psychotherapeutic help, having somatic symptoms: a rise in blood pressure, tachycardia attacks, hyperventilation, tremor of the extremities. About which I am forced to take cardiological treatment.

It was decided to conduct a psychotherapeutic session with immersion in a trance state and regression into the history of anxiety symptoms using the Reavisia method.

In the session, trance state and step-by-step regression into symptoms, the patient saw a visual image of fire against the background of anxious experiences. With directional detailing, there is a distinct image of a burning house. The destructive emotional reaction was immediately reworked in the session.

At the end of the session, the patient noted that she did not know and still did not know what kind of fire she was talking about. There was nothing like this in her life.

However, on the same day, on her own initiative, she decided to interview her mother. It turned out that when she was pregnant, she got into a neighbor's house fire and experienced a strong fright.

Thus, the presence and source of prenatal psychotrauma were verified, which probably led to the development of anxiety-panic disorder and depression with somatic components.

When observing the dynamics of the patient, there was a marked significant decrease in the level of anxiety and relief of symptoms of panic attacks during the first days after the session.

Thus, the use of regressive psychotherapeutic techniques, in particular, the Reavisia method, is clinically shown in complex and long-term psychopathological conditions with somatic manifestations. These methods make it possible to establish with a high degree of probability the primary psychotraumatic cause of the development of a psychological disorder and successfully correct it with appropriate positive clinical dynamics. What should any clinician keep in mind when managing patients with somatic, in particular, cardiological symptoms against the background of panic, anxiety and depressive disorders, referring the patient to the appropriate specialist in a timely manner.

Case of removal of chronic laryngospasm of psychotraumatic etiology by the method of Reavisia

Patient K., 36 years old, for a long time (since the age of 16) suffers from laryngospasm of unclear etiology, about which she underwent numerous studies and unsuccessful treatment with ENT, neurologists, psychiatrists.

Objectively: Speech in a low whisper. According to the patient, the "spasm" is removed and speech is temporarily restored only against the background of taking tranquilizers or sometimes - in the absence of familiar people. No other pharmacological drugs and treatment methods have a significant effect.

No other neurological and psychiatric symptoms have been identified.

It was decided to conduct a psychotherapeutic session with immersion in a trance state and regression into the history of symptoms according to the author's Reavisia method.

In the session of step-by-step regression into symptoms, the patient restored the image of repeated episodes of psychological and physical violence in early childhood by parents, the motive and destructive suggestion of which was: "you're bothering us, shut your mouth".

Thus, it was revealed that a series of aggravating psychotraumatic situations led to laryngospasm as the only possible solution to the possibility of avoiding another punishment.

In the session, destructive emotional reactions are immediately processed.

Further observation showed that the patient's voice became clearly clearer and louder. Thus, it is concluded that the etiological cause has been found, a significant therapeutic effect has been achieved.

The described case confirms and justifies the need to manage patients with a non-classical course of somatic diseases with a priority referral to a psychotherapist who knows the appropriate methods for identifying and inactivating the causes of such conditions. One of these is the Reavisia method, which has the ability to quickly identify the traumatic history of the disease and its psychotherapeutic processing.

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