

**Functional
Neurological
Disorders (FND)**


COUNSELING AND TREATMENT

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**History and
Context**


"Hysteria"
"Conversion Disorder"
"Psychogenic"

Semantics Matter.
When someone is told "It's all in your head" they get the idea that they are choosing to be ill which is NOT the case in these disorders.





This is a valid neurological condition which we believe is almost as common as headache.

**The Benefits
of Treatment**




- o High Patient Satisfaction
- o Improved Patient Quality of Life
- o High social impact
- o A chance to tackle sexism, stigma, and stereotypes

<p>Highly Treatable! This is treatable in ways other disorders are not.</p> 	<p>Using CBT tools, homework, resetting thought patterns, breaking up habits, building a toolbox of relaxation techniques and thought challenging techniques we can support these clients to regain much of what has been lost in their lives.</p> <p>You may be able to say "ok, you are doing great, you don't need me anymore!"</p>
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<p>Is it all trauma? Fear vs. Anxiety</p>	<ul style="list-style-type: none">◦ We do have some patients where there is no clear cause...◦ Trauma and PTSD are still major players in this diagnosis.◦ Injury can be the "trauma"◦ Psychological stressor need not be present for this diagnosis. 
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<p>Establishing Care</p>	<ul style="list-style-type: none">90 minute intakeIntense Hx gatheringPsychoeducationTargeted ways to change
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In Depth Intake



Amygdala's role in this process

Maladaptive Patterns of thought and movement

Why breath is so important

Why challenging the thoughts is so important

Crucial Steps to Treatment

Gathering data:

- Often spouses or care partners are involved-listen to their perspective but always speak to the patient with the goal of empowerment.
- Listen to as much or as little about past traumas as they offer but the focus isn't trauma treatment.


Frequency and severity of symptoms:

- Each time we meet we review this so we can track improvements.

DATA GATHERING EXAMPLE:

SYMPTOM	WHEN IT STARTED?	HOW OFTEN?	WHAT HELPS?	WHAT HURTS?
TREMOR	JULY	DAILY	4-7-8	COLD, STRESS

The 5 Areas Assessment



Area 1: Symptoms

Area 2: Thinking

Area 3: Feelings

Area 4: Behaviors

Area 5: Situational Challenges

The 5 Areas Assessment

Examples from the field:
"Gladys"

The diagram shows five numbered areas in a central column, each with associated symptoms in circles:

- Area 1: Symptoms (Tremor, Seizures, Gait change, Brain fog)
- Area 2: Thinking (Not safe, Scary, Useless)
- Area 3: Feelings (Depressed, Anxious, Lonely)
- Area 4: Behaviors (Isolating, Not driving, Using walker)
- Area 5: Situational Challenges (Low income, Family strife)

"Strange, Bizarre" Symptoms

Remembers if they have been diagnosed by a Neurologist who understands FND, it's not just strange symptoms that brought them here....

- Subjective Disturbances
 - Pain
 - Vision Changes
 - Numbness
 - Tingling
- Objective Dysfunction
 - Weakness
 - Paralysis
 - Seizures
 - Fever
 - Skin discoloration

A black and white photograph of a dog lying down with a headband on its head.

The Brain and Emotion

- Neuroscience contradicts some parts of CBT
- Memory is a survival function
- The "reptilian brain:" Learning couldn't wait until the frontal cortex came online


A perspective view of a road with light trails, suggesting speed or a journey.

Triggers aren't always there



- Triggers or activating events are not always clearly present, the amygdala determines emotions and emotional reactions
- Beliefs and awareness is not necessary for consequences, the amygdala can short-circuit the frontal lobe skipping over conscious thought and reason
- Consequences can occur before a person is aware


Cascading events




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graph TD; A[Environmental Triggers/Activating Events] --> B[Genetic or Structural change in the brain?]; A --> C[Negative activation-hyperactivity of the amygdala, hippocampus]; B --> C; C --> D[Inhibited cognitive control]; C --> E[Ineffective coping and avoidance or maladaptive patterns of movement or behavior]; D --> F[Symptoms of FND]; E --> F;
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Interventions

- Attend to physiological reactions
 - o Mindfulness
 - o Biofeedback
 - o Healthy replacement sensory coping behaviors
- Lower brain upwards focus
 - o Systematic desensitization
- Connect the lower brain to the top brain
 - o Cognitive restructuring
 - o Giving names and thoughts to physiological states



Outcomes



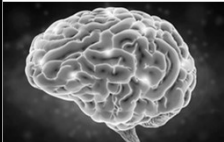
Early in our work, a patient came into clinic the first visit in a wheelchair, had been a personal trainer, had stopped working, was on disability and isolating, two sessions later was walking with a cane, had a personal training session with a friend and was mentoring a young personal training student.

Challenging patient with a very high stress job who presented with tongue tremor and speech problems who had been sidelined at work due to the changes spent weeks in tx with no change. We had been working on breath not letting the s/s hold him back and challenging his negative thoughts. After working on pacing, slowing down, visualizing his words, and pausing as soon as things got challenging to reset, he completely resolved.

"Gladys" Older woman with seizures from 5 areas example, after 6 weeks of PT for motor retraining and counseling around resetting her thoughts and challenging her emotional responses she has had no seizure like activity and gait is nearly 100% improved.

More to learn...

There is so much we still don't know....





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    graph TD
      A[Together, treating these patients we can] --> B[-relieve massive widespread suffering]
      C[-right a few long-standing social ills] --> D[-Maybe unlock very cool secrets of the brain]
      E[-get a chance to help people truly move on from their suffering which we don't often get to do!]
      A --- C
      B --- D
      C --- E
      D --- E
  
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The FND Bible:

Williams, C., Carson, A., Smith, S., Sharpe, M., Cavanagh, J., & Kent, C. (2017). *Overcoming functional neurological symptoms: a five areas approach*. CRC Press.



<p>Questions?</p>	 <p>Brain In Balance Counseling Suzanna L. Eller MA, LMHC, NBCC Integrative Psychotherapist www.BrainInBalanceCounseling.com Braininbalancecounseling@gmail.com 206-825-4412</p>
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