



Nursing Spectrum

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Treating the Whole Patient **Joan Wilder**

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New England School of Whole Health Education teaches nurses to look beyond the symptoms.

As Elaine Carter RN, BSN, takes another young woman's history at Brigham and Women's Partners Asthma Center, she asks a lot of questions. Not only does she want to know about her patient's breathing – she wants to know everything else too: what the woman eats, her situation at home, her love life, what her menstrual cycle is like, her work world, how she feels in her heart. Often, Carter's gentle probing highlights areas her patient has never before considered as health factors.

“Every single aspect of you affects your health – your home, work environment, your pets, family, city, religion, food,” said Carter. “My job is to see these things, enable a patient to become aware of them ...and then teach the person how to take care of their own disease, life, and well-being.”

Carter, who works mostly with pregnant teenagers at the center, is certified as a Whole Health Educator by the Wellesley-headquartered New England School of Whole Health Education (NESWHE). Founded in 1977, the school is dedicated to using evidence-based science to demonstrate how and why alternative therapies — such as acupuncture or healing touch — create physical changes just as scientifically measurable as the effects of conventional medicine. One of the school's goals is to

promote the integration and use of conventional medicine and alternative therapies. NESWHE offers its award-winning, two-year certificate both in person — at Tufts-New England Medical Center, Boston, — and as self-study, via video courses and annual in-person intensives.

Fundamental to the principle of the whole health model is the idea that all parts of the mind-body and environment are interrelated, affect each other, and interact to create health or disease. In contrast to this, the extreme version of the conventional, Western medical model typically treats symptoms in isolation from the rest of the body as though they were unaffected by the whole system.

“We’ve gathered a body of evidence-based science that explains, molecule by molecule, how therapies like healing touch work,” said NESWHE Founder and Program Director Georgianna Donadio. “We’re integrating medicine and ancient healing therapies and demonstrating that there’s no separation between the two.”

As Donadio talks, it becomes easy to see how invisible, non-physical influences such as emotions can create physical changes just as surely as bacteria or other substances.

A state of prolonged fear or chronic negative thinking, for instance, releases stress hormones from the adrenals that redirect normal physiological activities and initiate a series of damaging events that cascade through the body. Such states according to Donadio, can end up compromising bone strength and immune function, disrupting digestion and nutrient intake, increasing heart rate, contracting blood vessels, and much more. In NESWHE’s classes, teachers demonstrate how each system or body part is specifically affected by another to produce such a domino effect.

Donadio believes, too, that knowledge and awareness — of how the mind-body-environment works — can be enough, in some cases, for individuals to manage and/or heal many conditions.

Carter, too, believes that awareness is essential. “Awareness is first, then you give them tools for actions.” Carter’s toolkit includes everything from corticosteroids, to meditation, to recognizing the correlations between arguing with boyfriends and asthma attacks. While Carter works mostly with a pulmonologist, who specializes in women’s lung disease, and patients from obstetrics, she said she approaches patients holistically regardless of their

illness.

Interestingly, asthma offers a relatively clear way to see the connection between the mind and body. In fact, when she was a child, asthma was almost exclusively considered an emotional disease and excitement blamed for causing bronchial muscles to tighten, says Carter. As time went by, the pendulum swung the other way, and asthma was considered an inflammatory disease without an emotional component. Today, according to Carter, we know that asthma involves inflammation, mucus production, and muscular tightening — and that emotions are only one of many factors that trigger it.

Studying at NESWHE was a “life-changing event” for Carter that she recommends for “anyone interested in deepening his or her knowledge of the human condition.” She believes that most nurses have an innate talent for treating patients holistically and that, for her, NESWHE expanded an approach to nursing she knew in her bones.

“You always want to look at the whole person – that’s what a nurse does... doctors don’t have time,” said Carter.

Joan Wilder is a freelance writer in the Boston area.

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