

Interstitial Cystitis Client, CC: Treated With STSH over Skype: From Irvine, CA to Pine Brook, New Jersey

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Case Report

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We report successful treatment of acute interstitial cystitis (IC) with Short-Term Sidman Hypnotherapy (STSH). We previously reported successful long-term treatment of IC using STSH with more than five years permanence based on follow-up interviews with the client. The previous case study was published in the peer-review Journal of Reproductive Medicine, Vol.54, No.8, in August 2009. In the present case, introductions and therapy were conducted entirely over Skype long distance between Irvine, CA and Pine Brook, New Jersey by Dr. Jacqueline Sidman. Dr. Sidman included Beck Anxiety psychometric testing at baseline and after 2, 3, and 5 therapy sessions.

The client was a 22-year old female student residing in New Jersey. The client and Dr. Sidman have never met in person. When first interviewed in May 2013, the client complained of her urination being "like a faucet" and she had experience severe frequency, pressure and discomfort for the past several years during and after seeking the help of many physicians to no avail, resulting in very few social outings and consequently losing all friends due to IC. She had lost the inability to enjoy alcoholic beverages, coffee and many foods. Self-administered BAI questionnaires indicated severe anxiety in eight of 21 test categories. At the second session about two weeks later (the standard periodic gap for STSH), the client admitted to intermittent bouts of anxiety which interrupted sleep, overall stress related to her graduate school course work, and jaw TMJ.

At the third session four weeks after beginning therapy, the client described herself as getting better. This was echoed by those around her as she shed five excess pounds and experienced considerably less school anxiety and TMJ syndrome as a result of the reduced stress. During the therapy session, the client revealed a memory that a second grade teacher had prevented her from using the bathroom on several occasions, which had been very difficult for her. After restructuring her emotional memory from this experience, self-administered BAI testing indicated no severe test score categories, with two moderate, and five mild categories. During the fourth session at the six-week mark, the client recalled a memory of almost drowning in the ocean and, after her session with Dr. Sidman where she released the anxiety associated with this event, she indicated her current nervousness and indigestion were gone. Dr. Sidman helped her to realize that her visualization of a "new safe and calm ocean" was the symbol of peace and relaxation. Subsequent BAI testing revealed previous "severe nervousness" and moderate "fear of-the-worst happening" categories, along with tense cardiorespiratory parameters had diminished.

At the fifth session, eight weeks after beginning with Dr. Sidman, a finger-biting habit briefly returned after being absent for two weeks, which was attributed to receiving a negative phone call.

Her nature was very sensitive to these emotional triggers, however school anxiety remained in abeyance. At a sixth and final session at the eleven week mark, the ceasing of urinary tract infections led to the client talking of forgetting having IC until two minor flare-ups occurred. The client indicated that she now sought comfortable situations. Final BAI testing resulted in no severe, one moderate, and only four mild scores out of 21 categories. Therefore, all eight categories having been originally tested as severe were reduced to this minimum amount. This showed great improvement from the onset of Dr. Sidman's treatment.

Two months after her final session the client reported that she was delighted with her present health. This

included her first cup of dessert coffee in a year and a half with no flare-ups. She mentioned some ups and downs including slight abdominal pressure, but nothing intense like she had experienced prior to STSH. A physician had previously told her that her IC was hereditary on her mother's side and could recommend no treatment to provide permanent relief. A different physician had prescribed Elmiron, which she had taken for one week but it had caused severe internal bleeding, so she stopped it. No previous attempts at medical treatments had been successful. STSH was successful. Six of 18 first cousins of the client suffer from IC.

