

The Importance of an Existential Lens in Treating Patients with Chronic or Identity-Disrupting Pain

- The central existential givens – these each exist on a continuum. We are all wrestling with all of these all of the time. One might be weighted more or less, and we might find ourselves at one end of a continuum or another, but we don't remain fixed:
 - Death / life
 - Responsibility / Freedom
 - Isolation / connectedness
 - Meaninglessness / meaning
 - Identity*
 - Embodiment*
- Clinical Questions
 - “How are you presently living?”
 - This is paired with: “How are you willing to live?”
 - “Everyone finds their own meaning in things, even with the same injuries – what does this mean to you (or what meaning do you make of this)?”
 - “You’ve said, ‘this always happens’ or, ‘this happened years ago,’...how does this affect you now, in this moment (or – how might that be happening right now)?”
 - Tagging: “I noticed you _____ (movement, reaction, facial expression)...did you notice when you did that?”
 - Expanding on content: “Can you say more about that?”
 - Expanding on meaning: “I heard you say _____ (or ‘I saw you do _____’), can you take a moment to sit with that word (or movement) and see what comes up for you?”
 - Slowing down/tuning in: “I notice you’re going really fast right now, would you be willing to slow down and feel into what you’re saying (or how you’re moving)?”
 - Reflecting on ways of being/moving: “I notice that whenever we approach _____ (movement, topic, meaning), you often think of or do something that takes us elsewhere. Are you aware of that?”
 - If we can change our attitudes towards toward lived experiences (in this context, injuries, recovery, or healing) changes our lived experiences.
 - “Your body is designed to heal itself”
 - “Tissues heal”
 - “You are safe to continue to move”
- When to refer
 - Is the existential component specifically related to the physical concern/change? Or is it a separate mental health diagnosis (i.e. depression/anxiety/suicidality/grief)?

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- Is the existential concern persistent, consistent, limiting progress, and/or does it seem like the primary issue? Or is it secondary to the physical concern/change?
- True, untreated depression/anxiety/suicidality
- Resources
 - Articles
 - Existential Challenges and Responses.
<https://psycnet.apa.org/record/2015-54622-001>
 - Existential Therapy for Treating Chronic Pain: A Scoping Review
<https://pmc.ncbi.nlm.nih.gov/articles/PMC12637014/>
 - Doctor–patient communication about existential, spiritual and religious needs in chronic pain: A systematic review
<https://journals.sagepub.com/doi/abs/10.1177/0084672419883339>
 - Suffering a Healthy Life—On the Existential Dimension of Health
<https://pmc.ncbi.nlm.nih.gov/articles/PMC8830493/>
 - Use of Mental Health Interventions by Physiotherapists to Treat Individuals with Chronic Conditions: A Systematic Scoping Review
<https://pmc.ncbi.nlm.nih.gov/articles/PMC8816365/>
 - Books
 - *The Gift of Therapy* – Irvin D. Yalom, MD

*More modern additions to the central existential givens