



Latest technology in the Psychology

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Introduction

The Tongue, a homologous structure to Diaphragm and the Pelvic Floor, can exert a pressure on the "palate spot" (De Cicco, Ferrante et al. 2007) that directly stimulates the Locus Coeruleus and the endogenous production of Dopamine. From a biomechanical point of view, proprioceptive alterations cause mentally disturbed patients to be weak and awkward in doing everyday tasks; for example, the Flexor Ulnaris Carpi usually glides on Fascia at its distal insertion and tends to be more tendinous at the proximal one, whereas in a mentally disturbed individual, due to impairments in using muscles, we can observe the opposite situation with the distal part of the muscle presenting a pathological myofascial contracture.

Laryngospasm is a phenomenon consisting in spasms of the Larynx Constrictor Muscle which may be triggered by the spatial position of the Hyoid Bone and the muscular fascicles keeping this special bone in place - the Hyoid Bone is, indeed, the only one in the human body that does not have contact with other ones. One of the distinctive features of laryngospasm is the feeling of being about to die, common in panic attacks as well. Since

one of the most common symptoms referred by patients after this acute episodes is the sensation to choke and the fear to die that follows, laryngospasm is very likely to be related to panic attacks.

Generalized Myofascial Syndrome

Generalized Myofascial Syndrome is a pathological condition that affects Fascia and the Musculoskeletal System; it is caused by structural imbalances and favored by a proinflammatory biochemical milieu. The pathology is characterized by an alteration of the Myofascial Units (MFUs), among which we can distinguish. Many psychiatrists have already analyzed the phenomenon of myofascial pathological contractures affecting their patients. Wilhelm Reich in particular, one of Sigmund Freud's pupils, postulated that the source of residual tensions in the Myofascial Continuum had to be found in emotional traumas, and so did Reich's pupil Alexander Lowen. Ron Kurtz and Hector Prester analyzed in their turn this matter in their book "Body Reveals". Other important authors to mention are Hubert Godard and Feldenkrais (cfr. The Potent Self). Hence, what I am going to talk about is not completely unexplored. My purpose is to explain how Myofascial Generalized Syndrome leads to direct and indirect biochemical alterations in the arrangement of neurotransmitters and,

as a consequence, to behavioral alteration in patients; both phenomena, as a matter of fact, characterize mental illness.

In Generalized Myofascial Syndrome, the proinflammatory status is favored by a condition of chronic interstitial inflammation involving districts of the Interstitium, a structure in the human body with a very large extension - and for this reason recently promoted to the state of organ. Here, an alteration in Nitric Oxide (NO) levels due to the conformational changes in the structure of collagen within ECM occurs. Nitric Oxide is one of the most important neurotransmitters: besides being strictly related with Serotonin and GABA, it also regulates processes like sexual arousal - promoting vasodilatation during the erection of the clitoris or the penis - and phlogosis.

Alterations caused by Myofascial Generalized Syndrome also involve blood and lymph vessels, causing modifications in the physiological functioning of post-ganglionic autonomous fibers innervating these structures and acting on the concentration of Serotonin - another very important neurotransmitter involved in mental illness. Such modifications also affect arousal, i.e. a neurophysiological reaction to emotions.

Control Gate Theory

Trigger Points are caused by somatized stress and may contain, in their accumulation of potential elastic energy, the qualitative information attributed by the Brain to some traumatic events. A proof of that has been recently reported by Kurtz and Prester: during Roling sessions, patients show emotional releases while undergoing the dissolution of Myofascial pathological contractures. Science at present is not so advanced to ascribe qualitative meaning to things or events, for example to the countless qualitative shades of some psychiatric diseases. This is only possible for a few of these, namely child-like

OCD that can also persist in adulthood - and whom we have just described - Bipolar Disorder, Generic Personality Disorder and Schizophrenia. Alterations in the body shape caused by Generalized Myofascial Syndrome are registered by C-Tactile fibers (CT); afterwards, this information is translated by the Limbic System - in the same way as sexual stimuli - and then unconsciously removed due to social habits inherited during millennia and through the activation of Mirror Neurons.

Also the occurrence of other instinctive sensations may be mediated by Mirror Neurons; neurophysiological vertigo for example, which may occur while leaning over a high floor, might have first been experienced by our ancestors that saw other people fall down. This may explain the mechanism through which children perceive unconscious anxiety from their parents. Since Diaphragm is a very important muscle in maintaining posture and in regulating respiration, homeostasis and lymph-system circulation, in 2016 Bordoni argued that functional alterations of this muscle caused by Generalized Myofascial Syndrome and, hence, its inadequate functioning could affect emotions. Since the movements of the Diaphragm also affect the Hypothalamic-Pituitary-Adrenal Axis, endocrine production in GMS is altered; eventually though, it is the brain that activates the Adrenal Glands to produce more corticosteroids' and catecholamines.