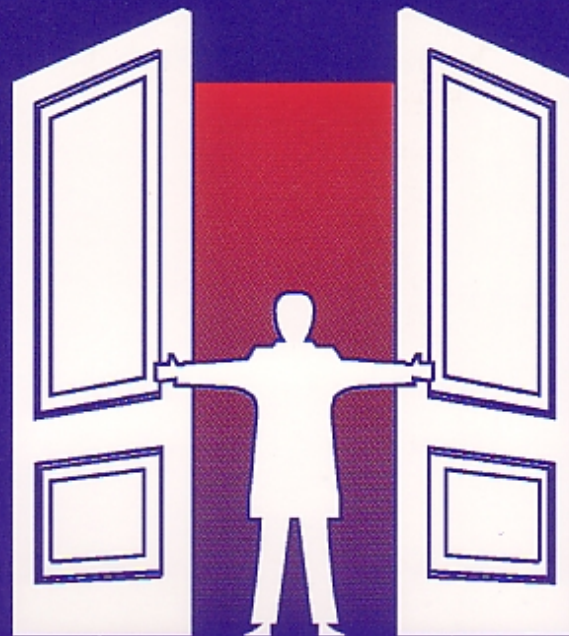


LIVING NIGHTMARES

Case Studies in Anxiety



based on the readings of
Edgar Cayce

David McMillin, M.A.



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based on the readings of Edgar Cayce:

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The Treatment of Schizophrenia

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LIVING NIGHTMARES

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Edgar Cayce

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Disclaimer: The reader should view the material contained herein as a report on research done by the author into the psychic readings of Edgar Cayce. This information should not be regarded as a guide for self-diagnosis or self-treatment. The cooperation of a qualified health care professional is essential if one wishes to apply the therapeutic principles discussed in this book.

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INTRODUCTION



Nightmares are frightening, oppressive dreams which terrorize the sleeping person with threats to survival, security, or self-esteem. Fear is a common emotion in these nocturnal dramas. We have all experienced nightmares and know the feeling of helplessness and vulnerability which they produce.

Anxiety disorders are like recurrent waking nightmares. Even though the afflicted individuals may be fully awake and conscious in a physiological sense, they find themselves just as helpless as if they were dreaming. However, the fear evoked during an anxiety attack is more real and threatening than any nightmare - and more debilitating. Anxiety disorders are daily nightmares from which many persons do not awake.

This book provides a glimpse into the causes and **cures** of anxiety disorders from the perspective of a **widely acclaimed** psychic diagnostician. For over forty **years**, Edgar Cayce routinely entered a self-induced **trance** and gave information on virtually every aspect of **the human condition**. At least 14,145 psychic readings **were transcribed** and preserved for posterity. Of this **voluminous output**, over 9,600 readings were given for **persons suffering** from physical and mental illnesses **including the various forms of anxiety**. The readings **contain explicit descriptions** of the physical, mental and

spiritual dimensions of anxiety. These psychic discourses address the major forms of anxiety such as phobias, panic attacks, obsessions, and compulsions.

We will take a look at several of the most pathological of these cases. In selecting the case studies, I have looked for instances where the correspondence from the sufferer or the reading itself clearly indicates clinical pathology. That is, if a person with a similar condition were to go to a modern doctor for help, there is a strong likelihood that at some point in time a diagnosis of anxiety disorder would be invoked and some form of antianxiety treatment provided.

Obviously, this group of cases is not necessarily representative of all cases of anxiety disorders. It is merely a collection of fascinating stories about a few individuals so desperately anxious that they would seek the help of a psychic diagnostician. In most cases these persons had exhausted the mainstream medical options of that era. That they had gone to medical doctors for help is not surprising; anxiety disorders are typically associated with numerous physical complaints, as we shall see.

As it turns out, most of the case studies in this volume have a heavy physical emphasis in both causation and treatment. This is consistent with the hundreds of readings given by Edgar Cayce on all forms of major mental illness. Regardless of the factors (whether mental, spiritual, interpersonal, environmental or whatever) which may have precipitated the illness, once it increased in severity to the level of clinical pathology it invariably disrupted the biological systems of the body. Consequently, physical treatments were usually deemed necessary.

Modern psychiatry has acknowledged the importance of biological therapies in the treatment of major mental illness by utilizing various drugs as the primary treatment. While research and clinical experience has

improved the effectiveness of these medications, some persons respond poorly or not at all. Furthermore, drug side-effects and relapse after medication is withdrawn have proven problematic for practitioners using the medical model of mental illness.

Likewise, psychotherapy has its limitations. In certain forms of depression (particularly reactive or situational depression) cognitive-behavioral therapies have proven quite effective. On the other hand, psychological therapies are usually quite inappropriate in treating psychoses. Certain forms of anxiety may respond to psychotherapy. For example, phobias which have been learned (conditioned) through traumatic experiences can often be treated effectively with behavioral techniques. Yet, obsessive/compulsive disorder and panic attacks do not yield as easily to psychotherapy.

Many clinicians have seen the benefit of combining biological and psychological therapies to increase therapeutic effectiveness. This encouraging trend toward integration is referred to by various names such as comprehensive, biopsychosocial, and even holistic.

In this respect, the Cayce readings anticipated contemporary attempts at integration. This psychic resource cogently discussed the inherent unity of body, mind and soul. Furthermore, it urged the use of natural therapeutic modalities which work with the body's innate proclivity for healing. Although the physical dimension was often emphasized, the whole person (body, mind and spirit) was considered in the treatment recommendations. The case studies which follow will clearly demonstrate the holistic approach of the readings.

Generally speaking, Edgar Cayce preferred to address the unique condition of each individual who came to him rather than be concerned with broad diagnostic categories of disease. Not surprisingly, the readings endorsed a case study approach of research and presen-

tation. The brief excerpt which follows was taken from a reading which discussed means of making the information available to the general public and health care professionals:

Then with the articles published, and the Book that would arouse interest, there will be begun the seeking for the manners and ways in which each individual case ANY case - EVERY case - has been treated, and as to the conditions that surrounded same! Then each report may be presented to **WHAT-EVER** school or phase of healing it pertains! And there will be the phases presented not only in the osteopathic and medical fields but in the eclectic, the hydrotherapy, the physical culturist, the dietetic, and in all fields.

From these there may be articles gathered that would not only be helpful but would eventually become as the work of the organization.

Not that so much **NEW** data would be stressed, but how many hundreds and **HUNDREDS** of volumes may be written from that which has been proven for ten, twenty, thirty years!

The reading from which this excerpt was selected is designated by the number 254-88. Recognizing the need for confidentiality, each reading is assigned a number corresponding to the person or group requesting information. The identifying number is followed by another number designating the sequence of the reading. For example, a reading cited as 254-88 indicates that this reading is the 88th in a series of readings for an individual or group designated as 254. In this particular case, 254 refers to the group of individuals who eventually formed the Association for Research and Enlightenment (A.R.E.). Each chapter focuses on a primary case study. Background information and excerpts from the

readings are blended with insights gleaned from the contemporary mental health literature. When appropriate, I have also included selections from other similar cases to further illustrate key points of Cayce's perspective. Chapter 16 varies from this format by focusing on a theme (fear) rather than a case study. Fear can be thought of as the common emotional thread which runs through the anxiety disorders. Whereas many readers have never suffered the nightmare of an anxiety disorder, they can all identify with the feeling of fear.

This book is an introduction to the subject of anxiety in the Cayce material. It is not intended to be technical or definitive. It may be considered as a sampler - an invitation to look more closely at the hundreds of readings which discuss anxiety in all its manifestations. This volume may be particularly helpful to individuals suffering from anxiety and desiring an alternative perspective on the problem.

However, it should not be construed as a treatment manual. While this work briefly discusses the various therapies which were commonly recommended in the readings, readers wishing a deeper explanation may wish to explore two previous works which are more substantial in their presentation of this material. *The Treatment of Schizophrenia* and *The Treatment of Depression* are more extensive in their discussion of Cayce's holistic approach to mental illness and provide considerable documentation of the therapeutic techniques advocated in the readings. These books are available through the A.R.E. Bookstore in Virginia Beach, Virginia.

The Treatment of Depression may be particularly helpful since depression and anxiety have a high rate of comorbidity. That is, when a person is anxious they are also often depressed and vice versa. The readings describe the reasons for this linkage and suggest sensible treatments which address the underlying causes of

all symptoms. Thus the treatments for one disorder may be helpful for the other.

Times have changed since the readings were given in the first four decades of this century. In respect to the Cayce readings on health, one of the most significant changes has been the evolution of the osteopathic and chiropractic professions. Both of these professions utilize manipulative therapies such as spinal adjustments to treat a wide range of diseases. In the years since Edgar Cayce's death in 1945, chiropractic has progressed considerably in its therapeutic techniques and professional stature.

Osteopathy, on the other hand, has become more mainstream since its physicians can perform many of the services traditionally reserved for M.D.s (such as prescribing drugs). Many contemporary osteopaths do not perform manipulative therapy to the degree that was the standard in Cayce's era.

The importance of this point will become readily apparent in the chapters which follow. Various forms of spinal dysfunction (such as lesions, subluxations, etc.) were cited in the readings as a primary causative factor in many cases of anxiety. The readings usually preferred osteopathic treatments to remedy these abnormalities. Undoubtedly, were the readings given today, the relative importance of chiropractic would be greatly increased.

There are important themes which readers should keep in mind as they examine the cases in this volume:

(1) there is a strong physical dimension in causation and more importantly, in the treatment of anxiety disorders

(2) the readings advocate the integration of physical treatments into a holistic framework including mind and spirit

(3) anxiety disorders overlap with other diagnostic groups such as depression, psychosis, and "medical" conditions

(4) the body's peripheral systems, especially the autonomic nervous system, sensory nervous system, and endocrine systems play a major role in the cause and treatment of anxiety disorders.

This last point diverges from current models of mental illness which emphasize brain biochemistry. The readings acknowledge the importance of the brain and its involvement in mental illnesses such as anxiety disorders; however, brain dysfunction is usually viewed as an effect rather than a cause. Typically, spinal lesions and glandular dysfunctions play the central role in many cases with brain functioning being eventually compromised. This aspect of the readings' unique perspective will become abundantly clear in the chapters which follow.

The ideas in this book are not being presented as a therapeutic panacea. They are merely offered as an alternative perspective which may provide hope and help to those who have not found relief in existing resources.

The recommendations given by Edgar Cayce required personal involvement in the therapeutic process. Consequently, many of the persons receiving readings did not choose to follow through with the information. The good news is that in the 9600 readings on physical disorders, many persons did apply the information and benefited greatly. In these cases where the information was consistently applied as given, successful results were usually forthcoming. Unfortunately, in many of the cases included in this volume, the recommendations were ignored and the information was not given a fair trial.

Perhaps it is time to look more closely at the Cayce readings on mental health. With this in mind, this book is offered simply as an introduction to open-minded individuals seeking a comprehensive understanding of anxiety.