

An Attack of Asthma

Dr. Ademar Monteiro, psychosomatic doctor:

A few months ago, I treated a man who came to the hospital suffering from an asthma attack. He was having great difficulties breathing. He arrived about 6:30 in the morning, and managed to tell me that this problem had started about 20 hours before. I asked him what was happening in his life that might have triggered the attack. He told me he didn't know but he'd had attacks like this since he was very young. He believed that this was genetic because his father and grandfather had also had it.

But I asked him a few more questions, like was he sure that there was nothing in his life that was causing him to be a little irritated or anxious. He said, "No." But I asked him again. And then he said, "Well actually, there is one thing happening that has made me a little worried."

It turns out that his boss had just recently asked him to become a supervisor in the place where he worked – a car painting company. I asked him how long he had worked there, and he told me that it was about 12 years or so. He had a lot of experience and had reached a high level of skill in his work, and his boss had decided that maybe he would be a good person to take over the supervision of the other workers.

I said, "Well, this seems like something really good for you, don't you think?"

"I don't think so," he replied.

"Why?" I asked.

"It's a lot more responsibility. I will have to work a lot more, arrive early and leave later."

"And what does your family think?" I asked.

"My wife has been a little bit worried lately."

"Why is she worried?"

"Well, we don't live in our own house right now. We're renting," he said. "And our daughter is studying in a public school, and you know how they are in Brazil."

“And what about the money? Will this new position mean an increase in salary?” I asked.

“Yeah, sure,” he said. “It would double my salary.”

“Sounds like something that’s going to be very good for you,” I mentioned.

“Well, maybe,” he said. “But I have my doubts about it.”

And I began to observe that, while he was still having some problems breathing, he had become a little bit calmer and wasn’t having as much trouble as when he had first come in. So I decided to say something to him directly.

“But if you take this position, you’ll be doing something very good for your wife and family. Maybe you’ll be able to have your own house in the future. You can put your child in a private school, which would be much better for her. By the way, do you have a car?”

“Oh sure, I have an old car that we’ve been driving for years.”

“Well, you can also buy a better car,” I told him.

“Oh yes, maybe, maybe,” he agreed.

“I think that this promotion seems like a really good thing for you,” I said. “And I think it would be very helpful for you to perceive the denial you have towards something that could be really good – not just for you but for your family, too.”

“Yes, well maybe you’re right,” he said.

And then I asked him what he had said to his boss, and he replied that he had told him that he was probably going to say no. I asked him if his boss was a nice guy, and he said, “Oh yes, he’s wonderful. I like him very much. I was unemployed and he took me on and taught me the business 12 years ago. He’s been very, very good to me.”

“So then, your decision is also going to be a disappointment for your boss.”

And he began to perceive that he was about to do something very bad to this good man who had helped him for all these years. And he stopped for a long moment. Then he said, “Maybe you’re right.”

Now, this conversation took about 20 or 30 minutes, but by the end of it, his breathing had almost returned to normal. I hadn't given him one drug, and he was breathing much better. I had managed to show him the inversion he had: that something that would be good for him he wanted to dismiss as being bad.

Now what's even more interesting is that his idea about why his asthma was getting worse was because of the paint fumes he was around all the time. He was in the habit of coming to the hospital at least once a month for treatment. But I was able to show him that the problem was not this, but was instead something inside him. He was seeing life upside down: something that was good for him, he saw as bad. And we can say that what asthma is psychologically is a rejection of life. Because air is oxygen, something essential and connected to life, and if you are suffering from an asthma attack, your bronchial tubes are almost closed to air, to life. There is a big restriction of air. In this man's case, it corresponded to the big restrictions that he was placing on his opportunity. And he understood this, at least at that moment, and the symptoms disappeared. He was able to leave the hospital without any medication.