

## GRIEF AND YOUR HEALTH

The loss of a loved one, no matter what his age, can be a life-shattering experience. The stress that results from the deeply felt emotions of grief can create physical problems, thus leaving us susceptible to diseases such as the common cold and other infections. Ulcerative colites, rheumatoid arthrites, asthma, heart disease and cancer are also believed to be connected to the stress of grief. If a physical illness was present before your loved one died, the grief is likely to be exacerbated. Statistics show that there is a 40% higher death rate from cardiovascular disease among the male widowed population over 55 years of age than there is among their counterparts who are married.

The connection between the mind and body is not always recognized, but there is real scientific evidence that what we think and feel has a direct effect on our biological systems.

The bodies of all human beings (and animals alike) react to stress in the same manner. In 1944 Hans Selye, a neurophysiologist, formulated the three phases of stress reactions, but it is only recently that scientists can identify with considerable accuracy what actually takes place.

According to Selye the reaction to stress happens in three phases, but we will discuss only phase one.

The first phase occurs immediately on contact with the stressor (grief at the death of a loved one). The brain "translates" the stress of grief into a chemical reaction in the body. This stimulates the pituitary gland to produce a hormone called adrenocorticotrophin (ACTH). This reaction makes the body ready to do battle. ACTH then travels to the adrenal gland where it causes another chemical reaction which, ultimately, produces cortisone. As the cortisone level increases it causes the production of ACTH to level off.

In the case of grief, where the stressor continues sometimes for years, the system does not operate as it should. Because the stress is continuing, the production of ACTH is continuing, thus causing the adrenal gland to produce more and more cortisone. The result is an abnormally high level of cortisone circulating in the blood.

A high level of cortisone is one of the factors that causes our immune system (the system that normally fights off disease carrying bacteria, fungi, and viruses) to falter. The high level of cortisone affects the thalamus which manufactures the white cells of our blood. With the thalamus not functioning properly it cannot produce white cells that are effective. These white cells normally locate and phagocytize (eat up) the invading germ, viral particle or even precancerous cells. Thus, with the white cells unable to function properly the individual is 100% more susceptible to the most common germs.

Of course, this is an over simplified description of body chemistry, but knowing that there is a legitimate reason for susceptibility to illness during grief encourages us to take preventive measures. The two most important measures we can take are (1) to learn about the grief process and (2) to allow ourselves to express the emotions of our grief.

Knowing that changes in eating habits; problems with sleeping; restlessness; lack of physical energy; difficulty in thinking clearly; and various other manifestations are a normal part of the grief process, will lessen the anxiety when they occur. We need to know that what we are experiencing is normal.

The other way to lessen the stress is to acknowledge and appropriately express the emotions of grief. Because the emotions of grief are painful we may attempt to push them from our minds. The avoidance or suppression of grief is emotionally, as well as physically unhealthy.

Learning about grief and allowing ourselves to face it can considerably decrease the potential for illness to develop because they prevent a built up of the tension of grief. Good nutrition, exercise, and proper rest are also important preventive measures.

Another point to consider is that the stress of grief is rarely the only stress we experience at the time of our loved one's death. Financial matters or accepting responsibility for our child's children, are only two examples of additional stresses. The more stresses in our lives, the more diligent we must be in attempting to reduce them.

To reduce stress and the likelihood that we will become ill we must do more than passively say

“I’m doing as well as can be expected.” We must be very aware that the loss of our loved one can cause physical illness. We must learn all we can about grief so that so that we will know that we are not “crazy” as we may fear. Then we must lean directly into our grief and allow ourselves to face our painful emotions. Keeping busy and trying not to think about your love’s death won’t work. Suppressing our thoughts and emotions not only keeps us from working through our grief, but it creates even more stress.

Talking about our child and the circumstances of his death, crying when we need to, and talking with someone who will listen non-judgmentally to our anger and guilt is the only way to successfully resolve our grief—and ultimately resolve the stress that is caused by grief.

The choice is ours. Our society is uncomfortable with another’s painful emotions. Hence the dictum “Count your blessings and don’t grieve.” Well, when we do count our blessings, we will find that one is missing—and we need to grieve for that missing blessing. If we don’t, physical illness may well be the result.