

Psychotherapy Guidebook

PRIMAL THERAPY

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e-Book 2016 International Psychotherapy Institute

From *The Psychotherapy Guidebook* edited by Richie Herink and Paul R. Herink

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Primal Therapy

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DEFINITION

Primal Therapy is a psychotherapy in which patients vividly reexperience intensely painful events of infancy and childhood. Such reexperiences are called Primals. A Primal is a two-phase response pattern, which starts with intense suffering and a sympathetic nervous system crisis. The first phase is a crescendo of involuntary panic during which one cries or screams in agony. This reaches a peak and is abruptly followed by a parasympathetic recovery phase. At the start of the second phase one has a vivid reexperience of an early-life painful event. The recall is total and organismic. The recalled memory is typically visual, but any or all of the sensory modalities may be included in the reexperience. At the end of a completed Primal one is slightly euphoric, very lucid, and profoundly calm.

Primal therapists consider Primal Therapy to be neurosis in reverse. Neurosis comes into being because children are hurt. They respond partially to that hurt. The parts of the pain responses not felt (completely experienced and expressed) in childhood are the basis for neurosis in adults. In Primal Therapy complete responses to early pains occur, and neurosis dissolves.

HISTORY

Dr. Arthur Janov saw his first Primal in 1967, as described in his first book, *The Primal Scream*. By 1977, approximately 1,400 people had had Primal Therapy.

TECHNIQUE

The techniques of Primal Therapy have never been published. There are many mock-primal clinics in the world and we have learned from patients at those clinics that Primal Therapy is extremely dangerous when attempted by those without training. If a patient at a mock-primal clinic obtains excessive access to early Primal Pain, the result is mental fragmentation and suicidal impulses. Because Primal Therapy deals with Painful feelings rather than words about those feelings, it should not be attempted by those without appropriate training. (Pain is not learned as an idea, but rather as a total experience; thus, it is unchanged if approached only with words.)

Research

Neurosis is a psychophysiological disorder involving the brain and body. We cannot measure Primal Pain but we can measure the way it is physiologically processed.

In a completed Primal, the first phase includes marked elevation of pulse rate, blood pressure, and EEG voltage, and an increase of 2-4°F in body temperature. At the end of a completed Primal (and physiologically, its definition), all the vital signs and EEG voltage are below baseline values. Over many months in Primal Therapy there are sustained decreases in pulse, blood pressure, and EEG voltage, and a 2-3°F decrease in core body temperature. Recent studies of plasma epinephrine and norepinephrine in Primal patients have disclosed 10 to 80 percent decreases in the levels of these hormones. Preliminary studies of plasma lipids have also indicated decreases in plasma triglycerides and cholesterol.

APPLICATIONS

Our experience indicates to us that there is but one neurosis — the individual's response to unintegrated childhood pain. Because a wide variety of disorders are but many individual responses to pain, the classification of many "neuroses" is in fact artificial. Anxiety, depression, thought-fragmentation, preoccupation with death, etc., are all partial responses to Primal Pain.

Excessive smoking, drinking, and all the addictions are responses to Primal Pain. The sexual dysfunctions, some hormonal disorders, and all psychosomatic disorders are responses to Primal Pain. Full reexperience of

the early Pain, the Pain which is the *raison d'être* for neurosis, is the way to reverse neurosis. Asthma, colitis, hypertension, and migraine are particularly responsive to Primal Therapy. When neurosis fails — as a group of mechanisms for dealing with childhood Pain — the result is psychosis. Although it takes much longer, Primal Therapy can also reverse nonorganic psychosis.