

Dreams & Health



Examining the Connection

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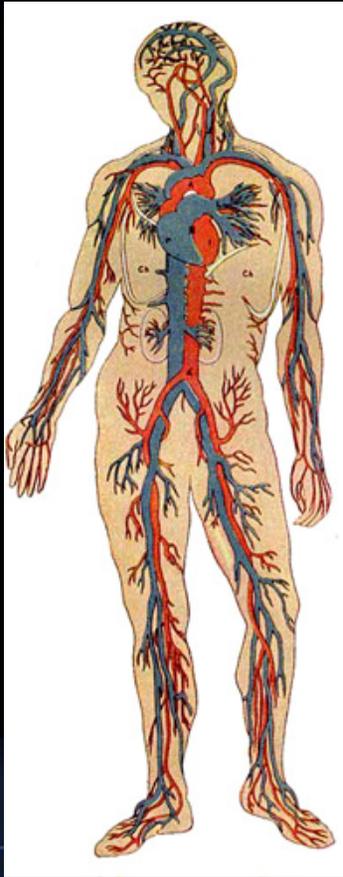
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History

- Hippocrates: proposed that some dreams had potential to indicate diseases & physical conditions.
- Aristotle: "The beginnings of diseases and other distempers which are about to visit the body...must be more evident in the sleeping state."
- Galen: stressed the ability of dreams to foretell impending illness.
- Arnald of Villanova: compared dreams to magnifying glasses which can detect small signs of physical illness.

Prodromal vs. Symptomatic



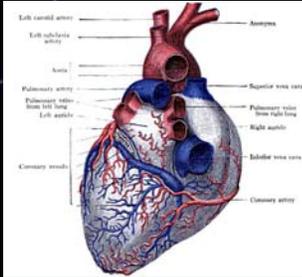
- Terms first proposed during the 19th century.
- Prodromal dreams are those which indicate the onset of illness prior to any noticeable symptoms.
- Symptomatic dreams are those which occur during the course of an illness and reflect symptomology.

Cancer

- Dreams often indicate type and location.
- A woman who had recurring dreams of dogs tearing at her stomach was later diagnosed with stomach cancer. (Lockhart, 1977)
- A breast cancer patient dreamed that her head was shaved with the word 'cancer' written on it. Three weeks later, she received the diagnosis that the cancer spread to her brain. (Siegel, 1983, as cited in Van de Castle, 1994)
- A man who repetitively dreamed of being shot in the left side of his chest was soon diagnosed with a tumor in his left lung. (Schneider, 1976)



Cardiac Events

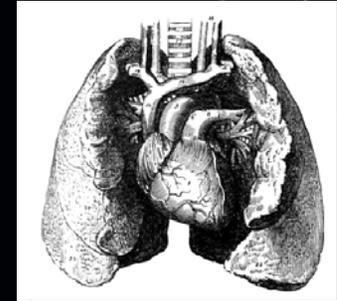


Dreams tend to be specific and include rhythmic sounds, explosions, and/or blood.

- A man dreamed of putting a machine gun to his head and blowing his brains out, focusing on the "rat-a-tat-tat" noise. He woke and experienced a massive heart attack. (Schneider, 1973)
- Another patient dreamed of getting shot in the heart and seeing blood flow out before having a cardiac episode. (Ziegler, 1962)
- Prior to having a mild cardiac arrest, a woman dreamed of skeletal hands grabbing her and piercing her heart. (Kasatkin, 1967)

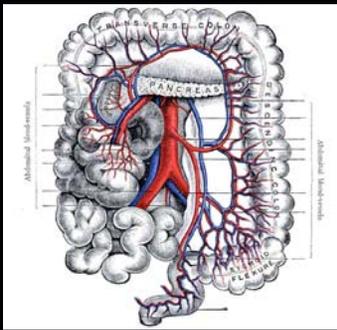
Respiratory Conditions

- Dreams often include feelings of suffocation.
- Tuberculosis patient dreamed of earth falling on top of her, compressing her chest and suffocating her. The dream was reported two months prior to onset. (Kasatkin, 1967)
- A second tuberculosis patient who developed pleuritis in her left lung had reported a dream in which a mountain slide fell on her chest. When she tried to crawl through, the left side of her chest was too large to do so. (Kasatkin, 1967)
- Asthmatics tend to report more aggressive acts and threats to the self. (Levitan & Winkler, 1985)



Gastrointestinal Problems

- Dreams often reflected in dream images of sewage, waste, spoiled food, raw fish, or intestinal worms.

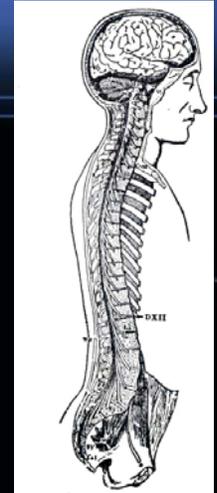
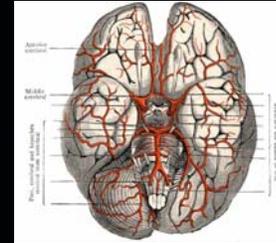


A man dreamed he was in an apartment full of feces and dirty water. In a second dream, he was in a restroom littered with feces. Following these dreams, he awoke with lower abdominal pain. (Kasatkin, 1967)

- A man experienced a recurring dream in which a rat was gnawing at the lower part of his abdomen. He was soon diagnosed with a duodenal ulcer. Following the operation, the recurring dream ended. (Mitchell, 1923)

Neurological Disorders

- Dreams usually focus on the head or images of immobility.



- A woman dreamed of her father placing a crown on her head, which felt heavy and drew blood as it tightened. When she awoke, she recalled that her father had suffered from epileptic seizures. Within the next two weeks, she experienced two epileptic seizures. (Vande Kemp, 1997)
- A woman dreamed for months of characters who were still and immobile. Corpses appeared in some dreams as well. The woman was later found in a deep coma and diagnosed with a myxedema coma. (Garfield, 1991)

Migraines



Dreams focus on the head, often with direct attacks.

- A girl dreamed of being shot on the left side of her head. She awoke from the dream with a severe migraine headache on the left side of her head. (Warnes & Finkelstein, 1971)
- A woman dreamed she was walking outside when she was struck by lightning in the head. She awoke with a migraine headache. (Gutheil, 1958)
- Dreams immediately preceding migraine onset tend to contain more anger and apprehension. (Heather-Greener et al., 1996)

Pain and other ailments

- A woman dreamed repetitively that a nurse was holding a lighted candle near her left leg. As the dreams progressed, the candle was brought closer and closer to her leg until it began to burn. After some time, the woman developed pain and eventually an infection in the bone marrow of her left leg.
(Mitchell, 1923)
- A woman who developed visual problems (inflamed retina) and pain had dreamed of colourful worms crawling on her eye lids only days earlier. (Mitchell, 1923)

Dreams & Medical Outcomes

- Smith (1984) investigated a relationship between dreams and clinical outcomes in patients suffering from severe medical diseases (cardiovascular disease, infections, etc).
- Among males, significant associations were found between death references in dreams and subsequent decline in health. Females displayed a significant relationship between separation references and poor medical outcome.
- Smith (1986) later found that cardiac patients who do not dream at all have an even worse prognosis compared to those who do dream.

Dreams during the Menstrual Cycle

(Van de Castle, 1964, as cited in Van de Castle, 1994)

- Menstruation is often symbolized by images of bloody female anatomy, blood and bleeding, and the colour red. Giving birth and caring for babies or children are also more common themes during menstruation.
- In dreams occurring shortly after the start of menstruation, blood appears in fairly large quantities and is on a body.
- In dreams later in the menstrual period, there is less blood and it appears in the distance, often in containers or jars.

Dreams during Pregnancy

(Van de Castle & Kinder, 1968)

- Dreams occurring around the time of conception often include putting items into boxes or containers (e.g., putting a loaf of unbaked bread into an oven).
- During pregnancy, references to babies are common. Actual delivery of the baby is often left out; babies often appear out of no where. Anxieties about the baby's condition are often displayed.
- References to plant growth are also common.
- Images of houses are frequent. Houses have long been thought to symbolize the body in dreams.



Summary of Previous Research

- Previous research suggests a strong link between waking day health and dream content.
- Subconscious detections of illness are likely expressed in dreams, resulting in prodromal dreaming. Symptomatic dreams continue to reflect the course of the illness or disorder.
- There are also reports of dreams reflecting recovery and healing.
- Limitation of the research: Many common themes have been reported by investigators who simply heard or read a large number of dream accounts. Systematic analysis is lacking.

Current Research @ Trent

- Findings from King and DeCicco (in press).
- Examined the relationship between health (physical & mental) and dream content, testing:
 - the continuity hypothesis of dreaming (Hall & Nordby, 1972), which states that dreams reflect waking life.
 - the compensatory theory of dreaming (Jung, 1964), which states that dreams compensate for that which is lacking.

Research Method

- N = 27 university undergraduate students. Each participant submitted 4 dream reports over the course of 6 weeks.
- Dream content frequencies were determined via the Hall & Van de Castle (1966) method of Content Analysis.
 - Categorical system of analysis with very precise rules for inclusion or exclusion of dream images.
- Totals were summed for each category across all four dreams.
- Physical and mental health were measured using the Medical Outcomes SF-36 Health Survey and the POMS.

Results

Physical Health (SF-36)

- As physical health declined, *misfortunes (injuries/ illnesses)* increased in dreams.
- This finding was true for all physical health subscales (physical functioning, pain, energy) of the SF-36.
- Most significant correlation was observed between lower levels of physical functioning and *injuries/illnesses* ($r = -.80$, $p < .05$).
- Suggests a preoccupation during dreamtime with the physical body and its weakening or deterioration.



Results

Physical Health (SF-36)

- As physical functioning declined and role limitations due to physical health increased, reports of *body parts* increased in dreams.
- In terms of specific body parts, lower physical health was only related to mentions of the *head*.
- Those with lower levels of energy displayed a higher number of *physical movements* (e.g., walking, running) in their dreams.
- Those reporting more physical pain had more *animals* in their dreams.



Results

Emotional Health (SF-36)



- Those with lower levels of mental health, as measured by emotional well-being, had more reports of *sadness* in their dreams.



Results Mood (POMS)

- Higher levels of depression were related to more frequent reports of *sadness* and *anger* in dreams.
- Those higher in depression also reported more *total aggressive acts*, and *aggressions with the dreamer as the victim*.
- Suggests a masochistic quality of dreams of the depressed, as reported previously by Beck & Ward (1961).



Discussion of Findings

- Overall findings support the continuity hypothesis of dreaming (Hall & Nordby, 1972), with some support for the compensatory theory (Jung, 1964) as well, suggesting that these two theories may be able to exist side by side.
- Scores on the SF-36 Health Survey were by far the most significantly related to dream content, suggesting strong continuity between physical health and dreams.
- Although the specific health problems were unknown in this study, the dream images appear to be symptomatic in nature.

Implications

- Findings suggest a fairly direct relationship between waking life and dreams: physical-physical and emotional-emotional.
- If people took more time to consider the information contained within their dreams, they would likely develop a greater awareness of their waking life, especially their physical and emotional health.
- Such an implication can be extended into clinical work. Teaching individuals to better reflect on their dreams could help clinicians increase a patient's self-awareness.

Conclusions

- From a holistic view of health, any additional insight into an individual's health is valuable, including that which is gained from dreaming.
- While the current body of research is still quite limited, it does suggest a strong connection between body and mind. This is especially evident in cases of prodromal dreaming, in which the subconscious appears to be detecting bodily changes quite early.

References

- Beck, A.T., & Ward, C.H. (1961). Dreams of depressed patients: Characteristic themes in manifest content. *Archives of General Psychiatry*, 5, 462-467.
- Garfield, P. (1991). *The healing power of dreams*. New York: Simon and Schuster.
- Gutheil, E. (1958). Dreams as an aid to evaluating ego-strength. *American Journal of Psychiatry*, 12, 338-357.
- Hall, C. S., & Nordby, V. J. (1972). *The individual and his dreams*. New York: Signet.
- Hall, C. S., & Van de Castle, R. L. (1966). *The content analysis of dreams*. New York: Appleton Century Crofts.
- Heather-Greener, G.Q., Comstock, D., & Joyce, R. (1996). An investigation of the manifest dream content associated with migraine headaches: A study of the dreams that precede nocturnal migraines. *Psychotherapy & Psychosomatics*, 65, 216-221.
- Jung, C.G. (1964). *Man and his symbols*. London: Aldus Books Limited.
- Kasatkin, V.N. (1967). *Teoriya snovidenii* [Theory of dreams]. Leningrad: Meditsina.
- King, D.B., & DeCicco, T.L. (in press). The relationship among dream content, physical health, mood, and self-construal. *Dreaming*.
- Levitan, H., & Winkler, P. (1985). Aggressive motifs in the dreams of psychosomatic and psychoneurotic patients [Abstract]. *Interfaces: Linguistics, Psychology & Health Therapeutics*, 12, 11-19.
- Lockhart, R.A. (1977). Cancer in myth and dream: An exploration into the archetypal relation between dreams and disease. *Spring*, 1, 1-26.

References cont'd

- Mitchell, E.G. (1923). The physiologically diagnostic dream [Abstract]. *New York State Journal of Medicine*, 118, 416-417.
- Schneider, D. (1976). *Revolution in the body-mind: Forewarning cancer dreams and the bioplasma concept*. Easthampton, NY: Alexa Press.
- Smith, R.C. (1984). A possible biologic role of dreaming [Abstract]. *Psychotherapy & Psychosomatics*, 41, 167-176.
- Smith, R.C. (1986). Evaluating dream function: Emphasizing the study of patients with organic disease [Abstract]. *Journal of Mind & Behavior. Special Cognition and Dream Research*, 7, 397-410.
- Van de Castle, R.L. (1994). *Our dreaming mind*. New York: Random House, Inc.
- Van de Castle, R.L., & Kinder, P. (1968). Dream content during pregnancy. *Psychophysiology*, 4, 375.
- Vande Kemp, H. (1997). *The dreams in periodical literature: 1860-1910: From Oneirocritica to Die Traumdeutung via the questionnaire*. Unpublished doctoral dissertation, University of Massachusetts, Boston, MA.
- Warnes, H., & Finkelstein, A. (1971). Dreams that precede a psychosomatic illness. *Canadian Psychiatric Association Journal*, 16, 317-325.
- Ziegler, A. (1962). A cardiac infarction and a dream as synchronous events. *Journal of Analytical Psychology*, 27, 360-378.