The Healing Properties of Therapeutic Writing

Can the process of writing about ailments, treatments and feelings actually help to ease the physical and psychological symptoms of chronic illness?

By Ronale Tucker Rhodes, MS
HAVING A RARE chronic illness that will impact the rest of a person’s life can create feelings ranging from anxiety to depression. Fortunately, during the 1980s, James Pennebaker, PhD, discovered a healing solution that may help. Through his research, he found that writing about life’s stresses helps people heal both physically and emotionally. A professor in the department of psychology at the University of Texas at Austin and author of several books, including *Writing to Heal: A Guided Journal for Recovering from Trauma and Emotional Upheaval*, his research showed that short-term focused writing can have a beneficial effect on everyone, from those dealing with a terminal illness to victims of violent crime to college students facing first-year transitions. “When people are given the opportunity to write about emotional upheavals, they often experience improved health,” said Dr. Pennebaker. “They go to the doctor less. They have changes in immune function.”

Mary Puglisi, who suffers from chronic headaches, is testament to the power of therapeutic writing for chronic illness. “It’s therapeutic to me in so many ways,” says Puglisi. “Every once in a while, I seem to lose my grasp on how to verbalize the thoughts that are continuously rolling around in my head. Most often, this phenomenon occurs when I’m having very high pain-level days. Sometimes, though, it happens when my head is no worse than normal, but I’ve just become so fed up with living such a limited, chronic illness-filled life…. Usually, these funks are spelled with constant ‘why me’s’ and a good deal of blubbering. Instead of talking these funks out, I used to pout about them; but, now, I write about them. It’s been what they like to call ‘life-changing.’”

**The Therapeutic Writing Paradigm**

Also known as journal therapy or expressive therapy, therapeutic writing is defined by The Center for Journal Therapy as “the purposeful and intentional use of reflective writing to further mental, physical, emotional and spiritual health and wellness. It offers an effective means of providing focus and clarity to issues, concerns, conflicts and confusions. In practice, it is the act of writing down thoughts and feelings to sort through problems and come to deeper understandings of oneself or the issues in one’s life.”

Therapeutic writing is personal and emotional and doesn’t pay attention to form, spelling, punctuation, etc.

Therapeutic writing differs significantly from merely keeping a journal. One of the major differences is the way internal experiences, thoughts and feelings are captured. With therapeutic writing, individuals write down, dialogue with and analyze their issues and concerns, allowing them to be reflective, introspective and intentional about their writing.

Therapeutic writing is personal and emotional and doesn’t pay attention to form, spelling, punctuation, etc. “Turn off your resident Dr. Comma Splice,” says John F. Evans, EdD, a writer, scholar and workshop facilitator, as well as the founder and executive director of Wellness and Writing Connections. “Expressive writing pays more attention to feelings than the events, objects or people in the contents of the narrative…. [It is] not so much about what happened as it is about how you feel about what happened or is happening.” According to Dr. Evans, individuals should explore their very deepest emotions and thoughts, and they should give themselves some time after writing to reflect on what they have written and to be compassionate with themselves. Then, after completing several days of writing, they should consider reflecting on what they notice in their life, how they feel and how they behave (see Guidelines for Expressive Writing).
Treat PI on your own terms with CUVITRU

For people living with primary immunodeficiency (PI) 2 years of age or older

CUVITRU™ [Immune Globulin Subcutaneous (Human)] 20% solution gives you and your doctor control over your treatment—from the number of infusion sites to how much, how fast, and how often you infuse.¹

**Number of infusion sites**
Infuse using 1 to 4 sites simultaneously

**Infusion volume**
Infuse up to 60 mL per site, as tolerated

**Infusion rate**
Infuse at rates up to 60 mL per hour per site, as tolerated*

**Infusion frequency**
Infuse daily up to once every 2 weeks, at regular intervals

Weekly infusions typically were completed in **under an hour**† using **1 or 2 sites.**¹

You and your doctor will determine if CUVITRU is right for you and if so, what regimen is best.

*Recommended to infuse first 2 infusions at 10-20 mL per hour per site.
†Median: 0.95 hours; range: 0.2-6.4 hours.
We’ve got patients with PI covered

Eligible patients with PI can save up to $5,000‡ on their out-of-pocket deductible/co-payment/co-insurance costs within a 12-month period for all Shire Ig products, including CUVITRU [Immune Globulin Subcutaneous (Human)] 20% solution.

For more information on MyIgCoPayCard and other support programs, visit MyIgSource.com or call 855-250-5111.

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Please see the Indication and Important Safety Information on the adjacent page, and the Brief Summary of the FDA-approved patient labeling on the back page of this ad.
CUVITRU [Immune Globulin Subcutaneous (Human)] 20% Solution

Indication and Important Safety Information

What is CUVITRU?
• CUVITRU is a ready-to-use, liquid medicine that contains immunoglobulin G (IgG) antibodies, which protect the body against infection.
• CUVITRU is indicated for the treatment of primary humoral immunodeficiency (PI) in adult and pediatric patients two years of age and older.
• CUVITRU is made from human plasma that is donated by healthy people. CUVITRU contains antibodies collected from these healthy people that replace the missing antibodies in PI patients.
• CUVITRU is given under the skin (subcutaneously).
• Most of the time infusions under the skin are given at home by self infusion or by caregivers. Only use CUVITRU by yourself after you have been instructed by your healthcare provider.

Important Safety Information

What is the most important information that I should know about CUVITRU?

CUVITRU can cause the following serious reactions:
• Severe allergic reactions causing difficulty in breathing or skin rashes
• Decreased kidney function or kidney failure
• Blood clots in the heart, brain, lungs, or elsewhere in the body
• Severe headache, drowsiness, fever, painful eye movements, or nausea and vomiting
• Dark colored urine, swelling, fatigue, or difficulty breathing

Who should not use CUVITRU?

Do not use CUVITRU if you:
• Are allergic to immune globulin or other blood products.
• Have selective (or severe) immunoglobulin A (IgA) deficiency with antibodies to IgA.

CUVITRU can cause serious side effects. Call your healthcare professional or go to the emergency department right away if you get:
• Hives, swelling in the mouth or throat, itching, trouble breathing, wheezing, fainting or dizziness. These could be signs of a serious allergic reaction.
• Bad headache with nausea, vomiting, stiff neck, fever, and sensitivity to light. These could be signs of irritation of the lining around your brain.
• Reduced urination, sudden weight gain, or swelling in your legs. These could be signs of a kidney problem.
• Pain, swelling, warmth, redness, or a lump in your legs or arms. These could be signs of a blood clot.
• Brown or red urine, fast heart rate, yellow skin or eyes. These could be signs of a liver or blood problem.
• Chest pain or trouble breathing, or blue lips or extremities. These could be signs of a serious heart or lung problem.
• Fever over 100°F. This could be sign of an infection.

What are the possible or reasonably likely side effects of CUVITRU?
The following one or more possible side effects may occur at the site of infusion: mild or moderate pain, redness, and itching. These generally go away within a few hours, and are less likely after the first few infusions.
The most common side effects that may occur are: headache, nausea, fatigue, diarrhea, and vomiting.

These are not all the possible side effects. Talk to your healthcare professional about any side effects that bother you or that don’t go away.

You are encouraged to report suspected side effects by contacting FDA at 1-800-FDA-1088 or www.fda.gov/medwatch or Shire at 1-800-999-1785.

The risk information provided here is not comprehensive. To learn more, talk about CUVITRU with your healthcare provider or pharmacist. The Brief Summary of the FDA-approved patient labeling can be found on the reverse side.


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Low rate of infusion site reactions even when infused at higher volumes and rates per site\(^1,2\)

- **2 out of every 3 people** who received CUVITRU had **no infusion site reactions**
- The most common infusion site reactions are mild or moderate pain, redness, and itching (these generally go away within a few hours, and are less likely after the first few infusions)
- The most common side effects that may occur are headache, nausea, fatigue, diarrhea, and vomiting

To learn more about CUVITRU, visit ListenPI.com and talk to your doctor to find out if CUVITRU is right for you.

**Important Safety Information**

**CUVITRU can cause blood clots** in the heart, brain, lung, and elsewhere in the body. Call your healthcare professional or go to your emergency department right away if you have pain, swelling, warmth, redness, a lump in your legs or arms, chest pain, trouble breathing, or blue lips or extremities. These could be signs of a blood clot.

**Do not take CUVITRU** if you are allergic to immune globulin or other blood products, or have selective (or severe) immunoglobulin A (IgA) deficiency with antibodies to IgA.

Please see the Indication and additional Important Safety Information on the inside of this fold out page, and the Brief Summary of the FDA-approved patient labeling on the back page of this ad.
IMPORTANT INFORMATION ABOUT
CUVITRU [Immune Globulin Subcutaneous (Human)], 20% Solution

The following summarizes important information about CUVITRU. Please read it carefully before using this medicine. This information does not take the place of talking with your healthcare provider, and it does not include all of the important information about CUVITRU. If you have any questions after reading this, ask your healthcare provider.

What is CUVITRU? • CUVITRU is a ready-to-use, liquid medicine that contains immunoglobulin G (IgG) antibodies, which protect the body against infection. CUVITRU is used to treat adult and pediatric patients two years of age and older with primary immunodeficiency diseases (PI).
• There are many forms of PI. The most common types of PI result in an inability to make a very important type of protein called antibodies, which help the body fight off infections from bacteria or viruses. CUVITRU is made from human plasma that is donated by healthy people. CUVITRU contains antibodies collected from these healthy people that replace the missing antibodies in PI patients.

What is the most important information I need to know about CUVITRU? CUVITRU can cause the following serious reactions:
• Severe allergic reactions causing difficulty in breathing or skin rashes
• Decreased kidney function or kidney failure
• Blood clots in the heart, brain, lungs, or elsewhere in the body
• Severe headache, drowsiness, fever, painful eye movements, or nausea and vomiting
• Dark colored urine, swelling, fatigue, or difficulty breathing

Who should not use CUVITRU? • Do not use CUVITRU if you have a known history of a severe allergic reaction to immune globulin or other blood products. If you have such a history, discuss this with your healthcare provider to determine if CUVITRU can be given to you. Tell your healthcare provider if you have a condition called selective (or severe) immunoglobulin A (IgA) deficiency.

What should I avoid while taking CUVITRU? • CUVITRU can make vaccines (like measles/mumps/rubella or chickenpox vaccines) not work as well for you. Before you get any vaccines, tell your healthcare provider that you take CUVITRU.
• Tell your healthcare provider if you are pregnant, or plan to become pregnant, or if you are nursing.

What are the possible or reasonably likely side effects of CUVITRU? The following one or more possible reactions may occur at the site of infusion: mild or moderate pain, redness, and itching. These generally go away within a few hours, and are less likely after the first few infusions.

The most common side effects with CUVITRU are: headache, nausea, fatigue, diarrhea, and vomiting.

If any of the following problems occur after starting treatment with CUVITRU, stop the infusion immediately and contact your healthcare provider or call emergency services. These could be signs of a serious problem.
• Hives, swelling in the mouth or throat, itching, trouble breathing, wheezing, fainting or dizziness. These could be signs of a serious allergic reaction.
• Bad headache with nausea, vomiting, stiff neck, fever, and sensitivity to light. These could be signs of irritation of the lining around your brain.
• Reduced urination, sudden weight gain, or swelling in your legs. These could be signs of a kidney problem.
• Pain, swelling, warmth, redness, or a lump in your legs or arms. These could be signs of a blood clot.
• Brown or red urine, fast heart rate, yellow skin or eyes. These could be signs of a liver problem or a blood problem.
• Chest pain or trouble breathing, or blue lips or extremities. These could be signs of a serious heart or lung problem.
• Fever over 100°F. This could be a sign of an infection.

These are not all of the possible side effects with CUVITRU. You can ask your healthcare provider for physician’s information leaflet. Tell your healthcare provider about any side effect that bothers you or that does not go away.

You are encouraged to report suspected side effects by contacting FDA at 1-800-FDA-1088 or www.fda.gov/medwatch or Shire at 1-800-999-1785.

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U.S. License No. 2020
Issue Date: 09/2016
16D028-CUV-US
S28017 01/17
Studies Support the Health Benefits

For those who are ill, therapeutic writing can be beneficial in a number of ways. It helps people feel they are taking control of the powerlessness that illness often causes. It also helps them to clarify the practical questions to ask doctors that they really want answered. And, most importantly, listing practical questions raises the more difficult, existential ones such as what’s important in life.6

Numerous studies have supported the health benefits of therapeutic writing.

Therapeutic writing also offers an alternative to support groups, psychotherapy or antidepressant drugs that help individuals cope with fears and challenges that illness brings. It allows patients to better understand what may be bothering them or triggering stress.7

In fact, numerous studies have supported the health benefits of therapeutic writing. In one study, researchers tracking the effects of journal therapy in patients with breast cancer found that standard four-day journal writing was effective in reducing physical symptoms.5 Another study at the University of Texas M.D. Anderson Cancer Center examined 42 patients with metastatic renal cell carcinoma who were randomly assigned to an expressive writing group or a neutral writing group. Patients in the expressive writing group wrote about cancer, and patients in the neutral writing group wrote about health behaviors. While no statistically significant differences were found regarding symptoms of distress, perceived stress or mood disturbance, patients in the expressive writing group reported significantly less sleep disturbance, better sleep quality and sleep duration, and less daytime dysfunction compared with patients in the neutral writing group.4

Another study looked specifically at clinical populations. The meta-analysis of nine expressive writing studies found a significant benefit for health, although when analyzed separately, the effects for physical outcomes in medically ill populations were significant.9

Other studies showed similar beneficial health effects. Participants with asthma or rheumatoid arthritis showed improvements in lung function and physical-related disease severity, respectively, following a laboratory-based writing program. Patients with HIV infection showed improved immune response similar to that seen in mono-therapy with anti-HIV drugs, and women with chronic pelvic pain reported reductions in pain intensity ratings.10

Is It for Everyone?

But, therapeutic writing may work better for some than others. Miriam Kuznets, a psychotherapist who is a proponent of therapeutic writing, says that since writing lets people choose their words, it works well with people who are less able to verbalize their feelings or who are skeptical about talk therapy. “It’s more concrete than just talking,” she explains, “and you can do it on your own, anywhere.”6

Therapeutic writing may not be as effective for people who experience cognitive or intellectual challenges.4 And, some studies show that writing’s effectiveness may be mediated by individual differences such as handling of stress, ability to self-regulate and interpersonal relations.11

Researchers have studied specific health populations to determine for whom therapeutic writing would be most beneficial. For instance, Dr. Pennebaker found that some personality types benefit more from therapeutic writing than others. “People who are able to construct

Longer-Term Benefits of Expressive Writing8

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<thead>
<tr>
<th>Health Outcomes</th>
<th>Social and Behavioral Outcomes</th>
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<tr>
<td>• Fewer stress-related visits to the doctor</td>
<td>• Reduced absenteeism from work</td>
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<tr>
<td>• Improved immune system functioning</td>
<td>• Quicker re-employment after job loss</td>
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<tr>
<td>• Reduced blood pressure</td>
<td>• Improved working memory</td>
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<tr>
<td>• Improved lung function</td>
<td>• Improved sporting performance</td>
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<tr>
<td>• Improved liver function</td>
<td>• Higher students’ grade point average</td>
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<tr>
<td>• Fewer days in hospital</td>
<td>• Altered social and linguistic behavior</td>
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<td>• Improved mood/affect</td>
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<td>• Feeling of greater psychological well-being</td>
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<td>• Reduced depressive symptoms before examinations</td>
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<td>• Fewer post-traumatic intrusion and avoidance symptoms</td>
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a story, to build some kind of narrative over the course of their writing, seem to benefit more than those who don’t,” he said.¹

To evaluate who would most benefit, Dr. Pennebaker and colleagues developed a text analysis program called Linguistic Inquiry and Word Count (LIWC), which looks at the types of words people use in their writings. Linguistically, Dr. Pennebaker looks for words that are associated with more complex thinking, including certain prepositions such as “except,” “without” and “exclude” and causal words such as “cause,” “effect” and “rationale.” According to him, an increase in these types of words over the writing process suggests that writing is becoming clearer and more narrative. Dr. Pennebaker also found that ability to change perspectives during the course of writing is a strong indicator of how well therapeutic writing will benefit an individual. Using LIWC, he can analyze the types of pronouns an individual uses, which can indicate a shift in perspective. “So, one day, they may be talking about how they feel and how they sit,” he explains, “but the next day, they may talk about what’s going on with others, whether it’s their family or a perpetrator or someone else. Being able to switch back and forth is a very powerful indicator of how they progress.”¹

Combining Writing with Therapy

Traditionally, therapeutic writing has primarily been used in therapy to increase awareness and insight, promote change and growth and further develop sense of self. Integrating journal writing into different types of psychotherapy is called “therapeutic journal writing.” It is sometimes guided by journal therapists who are trained through programs approved by the National Federation for Biblio/Poetry Therapy, or independent programs like Kathleen Adams’s Center for Journal Therapy or Dr. Ira Progoff’s Dialogue House. But, even those not trained in journal therapy can still incorporate it into practice.³

Therapists employ a number of methods. But, a popular method is the therapist requesting a person begin each session with a writing exercise to declare his or her intention for the session or to home in on present concerns. With this method, the writing is used as a mode of communication between the person and the therapist, providing an extra layer of safety. At the end of the session, the therapist may assign therapy homework for the next session.⁴

For homework, therapists generally recommend individuals write for three to five consecutive days for 15 minutes to 20 minutes at a time. They also might provide writing instructions such as: “For the next four days, I would like you to write your very deepest thoughts and feelings about the most traumatic experience of your entire life or an extremely important emotional issue that has affected you and your life. In your writing, I’d like you to really let go and explore your deepest emotions and thoughts. You might tie your topic to your relationships with others, including parents, lovers, friends or relatives; to your past, your present or your future; or to who you have been, who you would like to be or who you are now. You may write about the same general issues or experiences on all days of writing or about different topics each day. Don’t worry about spelling, grammar or sentence structure. The only rule is that once you begin writing, you continue until the time is up.”¹⁰

A growing trend championed by Nathan Field, an analytical psychotherapist, is Internet writing therapy. Field’s paper titled “The Therapeutic Action of Writing in Self-Disclosure and Self-Expression” focuses on how individuals can use the Internet to strengthen the therapist-client relationship. Email is the primary mode of contact between the client and the therapist, with both agreeing on a specific time frame to respond to each other. According to Field, email removes inhibitions that often occur face to face. Confronting issues through email encourages freedom, and clients can reflect and take time to communicate exactly what they are thinking. In addition, clients enjoy as much time as they need to explore their thoughts instead of being limited to a specific time frame.¹²

Guidelines for Expressive Writing¹⁰

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<tr>
<td><strong>1</strong></td>
<td>Time: Write a minimum of 20 minutes per day for four consecutive days.</td>
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<td><strong>2</strong></td>
<td>Topic: What you choose to write about should be extremely personal and important to you.</td>
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<td><strong>3</strong></td>
<td>Write continuously: Do not worry about punctuation, spelling and grammar. If you run out of things to say, draw a line or repeat what you have already written. Keep pen on paper.</td>
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<tr>
<td><strong>4</strong></td>
<td>Write only for yourself: You may plan to destroy or hide what you are writing. Do not turn this exercise into a letter. This exercise is for your eyes only.</td>
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<tr>
<td><strong>5</strong></td>
<td>Observe the flip-out rule: If you get into the writing, and you feel that you cannot write about a certain event because it will push you over the edge, stop writing!</td>
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<tr>
<td><strong>6</strong></td>
<td>Expect heavy boots: Many people briefly feel a bit saddened or down after expressive writing, especially on the first day or two. Usually, this feeling goes away completely in an hour or two.</td>
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The “79-Cent Therapy”

But, therapy isn’t necessary to benefit from therapeutic writing. Kathleen Adams, founder for the Center for Journal Therapy in Colorado who writes in inexpensive, spiral-bound notebooks, is a proponent of using therapeutic writing as a self-help mechanism, coining it the “79-cent therapy.” “For nearly 30 years, I’ve had the same therapist,” says Adams. “I’ve called on my therapist at 3 a.m., on my wedding day, on a cold and lonely Christmas, on a Bora Bora beach and in the dentist’s reception room. I can tell this therapist absolutely anything. My therapist listens silently to my most sinister darkness, my most bizarre fantasy, my most cherished dream. And, I can scream, whimper, thrash, rage, exult, foam, celebrate. I can be funny, snide, introspective, accusatory, sarcastic, caustic, inspirational, opinionated or vulgar. My therapist accepts all of this without comment, judgment or reprisal.”

As mentioned previously, self-help therapy can work well for people who have difficulty verbalizing their feelings or who are skeptical of talk therapy. This is true for Gillie Bolton, a researcher at King’s College in London, who finds therapeutic writing self-healing, allowing her to maintain control of difficult issues. “I suffered some very traumatic experiences, and writing saved my sanity,” she says. “In my early 30s, I was in a bad psychological state, but didn’t really know why. My husband suggested that I write my autobiography. I did, conjuring up a lovely, glorious story. Then, I came up with something far more chaotic but closer to the truth. Then, I refined it again, this time didn’t just seek regular therapy, she responded: “I couldn’t trust a therapist the way I could a piece of paper. Paper’s always there to reread or rewrite. Once you’ve said something, you can’t unsay it, but with a page of writing, you can. You don’t ever have to share it. You can burn it if you want.” (see Tips for Including Therapeutic Writing in a Self-Care Routine.)

A “Life-Changing” Therapy

For people with chronic illness, like Puglisi, Adams and Bolton, therapeutic writing can be “life-changing.” Indeed, studies show that therapeutic writing can help heal illnesses’ physical and psychological effects. Whether deciding to combine therapeutic writing with talk therapy or go the self-help route, the process is personal and emotional. It can help individuals vent frustration, shed light on feelings, gain insight about how illness has affected their lives and help them cope with fears and challenges.

Traditionally, Therapeutic Writing Has Primarily Been Used in Therapy to Increase Awareness and Insight, Promote Change and Growth and Further Develop Sense of Self.

Tips for Including Therapeutic Writing in a Self-Care Routine

- Ensure privacy by keeping materials in a safe place.
- Save everything that is written, and review it often to spark inspiration for future writing and offer perspective on how far you’ve come.
- Use timed writing exercises to help avoid writer’s block and tap into relevant unconscious material.
- Write freely and ignore the urge to edit the work.
- Be honest with your thoughts, feelings and experiences.

References