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A Mind for Healing

Darshan Mehta ’97 advocates a new model of medicine that helps patients on a journey of self-healing.

Story by Sarah (Zeller) Julian ’07 & Tim Obermiller

What influence does the mind have when it comes to physical health?

A great deal, according to Dr. Darshan Mehta, a 1997 Illinois Wesleyan graduate who has brought that question into play as a physician and educator at Massachusetts General Hospital (MGH).

Mehta is a leader in the field of mind/body medicine, which focuses on the interactions among the brain, mind, body and behavior, and on the powerful ways in which emotional, mental, social, spiritual and behavioral factors can directly affect health. He is the associate director of medical education at MGH’s Benson-Henry Institute for Mind Body Medicine.

The path to Mehta’s eventual involvement in the field began at a young age, he says. As an infant, Mehta emigrated with his parents from India to the Chicago suburbs, where his father found work as an engineer.

“I grew up in the Jain tradition,” he explains. “The movement has largely been a social reform movement, of bringing equality to people based on the concept of an in-dwelling soul.”

The religion also was his first taste of mind-body interactions.

“Prayer and meditation were vocabulary words that we used quite often at a younger age. But it became more relevant to me as I entered college … just to maintain my own sanity in the rigors of challenges of the college environment,” he says. “That’s how it became personally important to me.”
Mehta came to Illinois Wesleyan after completing high school at the Illinois Math and Science Academy — a competitive, publicly funded school for gifted students.

A strong pre-med program and small class sizes were his reasons for choosing Illinois Wesleyan. “Having a liberal arts education taught me to think outside the box,” says Mehta, who enrolled in an acting class for non-theatre majors, was a resident assistant in Dodds Hall and took the 3-6 a.m. Saturday shift as a WESN disc jockey.

Mehta vividly recalls a course on Asian religions taught by Brian Hatcher, the McFee Professor and chair of the Department of Religion. The two have remained in touch, with Hatcher hosting his former student in February when Mehta returned to campus to present a religion colloquium on the history of mind/body therapies.

“Here was a young man who took only one course with me while at IWU, who was working on a major in the Natural Sciences, and had plans to head off to medical school,” Hatcher recalls. “Yet for all that, Darshan would regularly stop by my office to talk about our shared interest in India and Asian religions as well as to talk about his own plans. Not only that, he would bring drafts of his papers to me for comment and revision. I’ve always thought it was a great example of the kind of learning that can occur at a place like IWU and of the kind of relationships that are built off of it.”

Mehta, who completed his Illinois Wesleyan education in three years, had applied to medical schools as planned. Accepted into the University of Texas–Southwestern Medical School, he was allowed to postpone his enrollment for a year after discovering an opportunity to study at Tatvajnana Vidyapeeth, a post-doctoral institution at Thane, near Mumbai, where students are taught comparative Indian and western philosophy and religion.

“It was really wonderful,” Mehta recalls of his year in India. “Part of it was just my own journey of self-discovery: Who am I? What is it that I want? I didn’t just get the answers to my questions in that year, but the seeds were planted. It served as a reminder to be open to things, because you never know where the road will take you.”

After returning to the United States and starting medical school at the University of Texas–Southwestern Medical Center, Mehta decided to pursue internal medicine. But he was concerned about the approaches being taught to work with patients. When he went on to the University of Illinois–Chicago Hospital for his residency, those concerns continued.
“I saw a lot of patients with chronic medical problems, ranging from diabetes, to heart disease, obesity and depression — multiple problems that we didn’t have very good tools for treating. We weren’t taught very well how to counsel our patients on nutrition and exercise. I thought, ‘How do we do this?’”

To answer that question, Mehta turned to his own life experiences. He also remained open to his patients’ questions and ideas.

“For me, that’s where some of these therapies began to emerge,” he says. “My patients really were my teachers. They started asking about integrative medical therapies, and I didn’t know how to answer the questions.”

Deciding he needed more education, Mehta returned to school, completing a clinical research fellowship in complementary and integrative medicine at the Harvard Medical School Osher Research Center, while simultaneously earning a master of public health degree from the Harvard School of Public Health.

During his fellowship, Mehta worked with the Benson–Henry Institute (BHI) for Mind Body Medicine. After he graduated with his public health degree, he was hired as associate director of medical education at the institute.

There, he has been able to pursue two of his passions: teaching and working with patients who can benefit from mind/body medicine.

At BHI, Mehta follows in the footsteps of Herbert Benson, a pioneer in mind/body medicine whose work in the late 1960s and ’70s found strong evidence supporting the practice. In one landmark study, Benson examined a group of individuals who meditated regularly and found they were able to slow their metabolism, breathing rates, heart rates, even brain waves while meditating for 20 minutes, versus simply sitting quietly for the same amount of time.

By changing their thought patterns, the subjects were able to tune in to what Benson called a relaxation response, which is the foundation of mind/body medicine practiced at the BHI. Benson noted that the relaxation response can be elicited by a variety of meditative techniques, such as diaphragmatic breathing, repetitive prayer, chi gong, tai chi, yoga, progressive muscle relaxation, jogging, even knitting.

Mehta says this approach is meant to work in relation to more traditional Western medicine, not as a replacement. He uses Benson’s metaphor of a three-legged stool. Pharmaceuticals along
with surgery and procedures are the first two legs. Self-care — which includes the relaxation response, nutrition and exercise — is the third leg.

Since roughly 60 to 90 percent of doctor visits are for conditions related to stress, the mind/body, or self-care, approach is a vital component of effective health care, says Mehta. It can often be the only viable recourse left for patients who have chronic pain, sleep disorders, mild/moderate depression, fatigue or other symptoms — but no official diagnosis.

“Many physicians perceive them as difficult patients. I enjoy them,” he says. “They’ve kind of exhausted the medical system, gone through multiple specialists and still have not been able to find a satisfactory answer.”

Many such patients, Mehta says, are locked in a cycle of “remembered illness.”

“They know what it’s like to feel ill all the time. Through our work we’re hoping to break that cycle and create a cycle of remembered wellness.”

For example, Mehta recalls a patient who struggled with chronic migraine headaches. After treatment, “she noticed that she actually had well moments, and she could cultivate those moments for herself. Her pain wasn’t what defined her.” Like many other patients, the woman experienced fewer symptoms and less interference in her daily life through the “self-care” approach.

“That shift that occurs in relation to their symptoms is so meaningful to the patient that they begin to have more sense of control in their life, a greater sense of autonomy and independence, which is ultimately empowering.”

“In this new model,” Mehta says, “the role of physician is no longer a paternalistic one, which was the old model of the physician. I consider that model dead, or at least dying very quickly. Patients want a more participatory relationship; patients want us, as doctors, to be a guide in this journey, but not telling them what to do in this journey.”

It’s a message being heard by physicians, says Mehta, who spends significant time developing curriculum for medical residents and medical students on mind/body interventions for stress management and stress reduction.

“I always want to be in an environment where I am surrounded by people who are students of some sort or another,” he says. “I love this interface. I’m on the outside of medicine, so it’s something different, but yet I’m within mainstream medicine. There’s opportunity for controversy and debate, which is always good in stimulating academic discussion, and there’s always opportunity for advancement, and just continual evolution.”

Still, Mehta doesn’t know exactly what his future holds.
“In five or 10 years, I don’t know where I’ll be,” he says. “I certainly hope I’m in an environment that continues to encourage this spirit of curiosity and allows me to interact and work with people who also have that similar type of spirit.”

So far, he says, life has presented him with one opportunity after another.

“It’s been the flow of a river. Stepping back, it’s surprising to realize how one event in my life really connects to the next.

“I certainly didn’t plan it that way,” he adds with a smile.