



The Interconnectedness of Physical and Mental Health

Overview

A strong association exists between the physical body and the mental wellbeing of an individual, sometimes referred to as the mind-body connection.⁷ There are significant correlations between the presence of physical health conditions, such as diabetes, hypertension, arthritis, and heart disease, and mental health conditions, such as anxiety, depression, panic disorder, and post-traumatic stress disorder.⁵

Mental and physical health have a bi-directional relationship, meaning that mental health affects physical health and physical health affects mental health.⁷ Because of this reciprocal relationship, it is extremely important that both aspects of health are properly addressed and considered when conducting assessments and providing treatment to individuals. In one study, it was found that among adults with co-occurring chronic physical and mental health conditions, 10% of the effects of past physical health issues could be attributed to mental health factors. In the same study, 8% of past mental health issues could be explained by physical health factors.⁶

Although the two are highly interconnected, many health professionals do not work in a holistic manner, which considers how both physical and mental health may determine the level of an individual's wellness and may alter associated treatment options. For example, some medical professionals believe that mental health conditions are simply a consequence of poor physical health and do not require focused medical attention on their own.⁸ Additionally, some mental health clinicians believe that treating mental illness presents significant challenges to which physical health issues are of lesser importance, which are then not addressed properly or at all.¹

The relationship between physical and mental health is often cyclical in nature, and each aspect of health

can worsen if both are not addressed properly. For example, depression can have significant negative metabolic effects on the body, which may cause an individual to develop type 2 diabetes over time, especially if they are already at risk via family history, body mass index, or poor diet. The associated stress from the lifestyle changes that are necessary to manage diabetes, along with the potential financial burden of purchasing medication, may cause the individual's depression to worsen, thus creating a harmful cycle which exacerbates each condition.¹⁰ Furthermore, if an individual has a chronic physical condition which causes significant pain or discomfort, such as fibromyalgia, they are more likely to develop depression, which can make it harder for the individual to adhere to treatment plans or cope with the physical pain, again worsening each condition.⁹

The Effect of Diagnostic Overshadowing on Physical Health Treatment

Although the American medical system is slowly beginning to make a paradigm shift towards integrative care, which considers the whole person, stigma associated with disability and mental health continue to hinder proper treatment for many individuals. People with disabilities frequently experience diagnostic overshadowing in clinical settings. This means the presence of their disability is the main focal point for clinicians and, as such, most health issues are simply attributed to their disability status, rather than a separate or underlying health issue.¹ Diagnostic overshadowing also applies to patients with mental health diagnoses with and without disabilities. When individuals with mental health conditions present with a physical ailment, they often report disparities in treatment as physical complaints are misattributed to their mental health diagnoses, meaning patients are made to believe their physical discomfort is "all in their heads."⁸ This lack of proper care is hypothesized to be one of

several reasons why individuals with mental health diagnoses have higher rates of physical illness and experience increased rates of premature mortality compared to the general population.^{3, 4} Given the diagnostic overshadowing which hinders proper medical care among individuals with disabilities and people living with mental health diagnoses independently, the likelihood of physical health mistreatment among people with co-occurring disabilities and mental health diagnoses is likely much more prevalent and problematic.

Conclusion

In order to ensure that people with disabilities and/or people with mental health diagnoses receive proper care, patients need to be evaluated and treated in a holistic manner. The attribution of physical health symptoms to psychiatric or cognitive differences can lead to significant delays in proper care as well as frustration on the patients' behalf and potential worsening of both physical and mental health status.

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