

Shrink Rap Radio #119, November 17, 2007, Using Hypnosis and EMDR to Repair Broken Maternal-Infant Bonds

David Van Nuys, Ph.D., aka “Dr. Dave” interviews Tony Madrid, Ph.D.

(transcribed from www.ShrinkRapRadio by Dori Lehner)

Excerpt: We lightly hypnotize a mother and we have her go back to the things around the birth of her child that were bothering her, and we say, “Why don’t you just clean up that stuff and remove it from your heart? And when that’s accomplished, your index finger will start floating.” And you don’t have to put a person into a very deep hypnotic state, it might only take a minute to tell them to close their eyes and go inside and go back to the events around the birth of their child. And within a short period of time their index finger will start floating involuntarily, and then you say, “Good, now go over to this other thing that was bothering you and clean that up as well.” And that’ll happen; their index finger will float again, and then you say, “Now, anything else in there that’s got to get cleaned up, just go ahead and do it.”

Introduction: That was the voice of my guest, Dr. Tony Madrid. Tony Madrid, Ph.D. is the director of Russian River Counselors. He’s been a psychologist in Sonoma County, California for 35 years, starting as a child psychologist for Sonoma County Mental Health. He was the director of the Erickson Institute in Santa Rosa, California. He directed the inpatient program at Pocket Ranch Institute in Geyserville, California, which was an alternative program to traditional hospitalization. He has been on the faculty of the University of San Francisco for 25 years, and he was a member of the California’s Board of Psychology. He’s also a fellow of the International Society for the Study of Dissociation. His area of research is maternal-infant bonding and childhood asthma, for which he received the American Society of Clinical Hypnosis Hilgard Award for scientific excellence in writing on pediatric/adolescent use of hypnosis. Now, here’s the interview.

Dr. Dave: Dr. Tony Madrid, welcome to Shrink Rap Radio.

Tony Madrid: Well, thank you.

Dr. Dave: Well, it’s good to talk to you again after such a long hiatus. I think it’s been about 30 years since we did some work together on hypnosis.

Tony Madrid: Yeah, I think it has been. I remember you used to come up to my office and teach me how to hypnotize people.

Dr. Dave: Yeah, boy –

Tony Madrid: And at that time there were only two people that I could learn hypnosis from. One was you down at Sonoma State, and the other one was a bartender over at a [laughs] local bar.

Dr. Dave: Wow, well I sure am glad you chose me instead of the bartender. Who knows where your career would have gone if you'd gone with them?

Tony Madrid: I know.

Dr. Dave: [laughs] Might have gone right down the tubes; instead it's gone nothing but straight up. Now, I recently interviewed Dr. Francine Shapiro for my other podcast series, *Wise Counsel*, and she sent –

Tony Madrid: Oh yeah.

Dr. Dave: Yeah, on EMDR, and she sent me a couple of her books in preparation for that interview, and imagine my surprise when I discovered a really fine article in the volume that she edited on family therapy by one Dr. Antonio Madrid. And it was about using EMDR for repairing broken maternal-infant bonds.

Tony Madrid: Yeah, I was really surprised that she was interested in my work. As it happened, a number of people at my office went up to Gualala in a special EMDR training that she had up there. And she had some real hotshots; she had van der Kolk come over from Harvard and do part of it, and during the course some of the people in my office were talking about the work that we were doing with maternal-infant bonding and asthma. And so she asked me to come up and talk to her about it, and was quite interested in that kind of stuff.

Dr. Dave: Well, that's great.

Tony Madrid: We found out that – excuse me.

Dr. Dave: Go ahead.

Tony Madrid: We found out that the approach that we were using – using hypnosis to repair bonding to help kids with asthma – was also amenable to EMDR. And in some places even preferable.

Dr. Dave: Okay, well I'm definitely going to want to talk to you about that. In fact, there are a bunch of things I want to focus on in our conversation. I want us to touch on maternal bonding, hypnosis, EMDR, and your work on the treatment of asthma. So let's get started with maternal-infant bonding. First of all, how did you come to get interested in that?

Tony Madrid: Around 1977 my wife was having a baby, and her pediatrician – her OBGYN – gave her the book *Maternal-Infant Bonding* to read by Klaus and Kennell. They were both pediatricians at Case Western Reserve. And my wife said that she didn't need a book to learn how to bond with the baby; she just needed the space to do it. And so I read the book and I was absolutely amazed at the stuff that Klaus and Kennell pointed out.

They started looking at animal studies that showed that if there is separation at birth, there is a limited likelihood that a mother will accept the baby. In fact, if a baby lamb is taken away from its mom for just a couple of hours and then returned to the mom, about 50% of the ewes will just reject the lamb. And if the period of time is longer than that, there's a greater likelihood that the mothers will reject their babies.

And what they did was say that humans also are subjected to the same type of laws, and pointed out that if a baby is taken away from its mom at birth and not returned during a sensitive period of time, that there is a real limited likelihood that the mother will bond to the baby. And, of course, animals will reject their babies, but moms just can't do it, but there'll be a number of behaviors that you'll observe in these mothers. And they did a bunch of studies to show that mothers who are separated from their babies at birth will be less affectionate, will breast feed for shorter periods of time, will have greater incidence of abuse and failure to thrive and neglect, and have a number of other things occur to them.

For example: they did a study, and they had a group of moms who had the normal kind of contact, which is the baby is shown to the mom and then brought over to the nursery and then brought back for small periods of time, as compared to an extended contact group. These mothers had their babies for a longer period of time without interruption. And they compared these children and mothers for about five years.

They showed that the mothers were able to have easier interaction with their babies; while they were waiting for pediatricians they observed them. The mothers asked their children questions rather than demanded things. The babies were able to – the children were able to play by themselves more easily. When the mothers went into the pediatrician, the mothers wouldn't let the babies go – the extended contact mothers – they would want to hang on to their babies while the pediatricians were examining them. And they asked the mothers some questions. They said, "If your baby is crying and you burped it and looked for pins and looked to see if the baby's clean and still cries, what would you do?" The extended contact mothers said, "I'd pick the baby up and carry it around." The mothers who had less contact at birth said they'd let the baby cry itself to sleep.

Dr. Dave: Fascinating.

Tony Madrid: They gave IQ tests to these children when they were five years old, and the greater contact babies had significantly higher IQs. So there's been a lot of research that shows if they – the baby is taken away from the mother during a sensitive period of time which is right after birth, the chances are that the mother will not bond. And then Klaus and Kennell did a real incredible discovery. They said humans are able not only to be physically separated from their babies but also emotionally separated.

Dr. Dave: Wouldn't psychoanalytic theory come into play here, too? Doesn't a lot of later psychoanalytic thought revolve around the whole concept of bonding?

Tony Madrid: There sure is. And that psychoanalytic thought comes in with attachment theory and Bowlby's work.

Dr. Dave: Yes.

Tony Madrid: What Klaus and Kennell point out is that if the mother is having an emotion that is incompatible with bonding, the chances are that she won't bond: such as if a mother's father just died; if the mother has gone through some traumatic experience, which was how Francine Shapiro got interested in this; if the mother is undergoing some emotion that's so intense that it blocks out bonding, then the chances are the mother's not going to be able to bond. And then following what you said, Klaus – his thought is that bonding is an event that occurs in the mother, whereas attachment is something that's applied to the child.

Dr. Dave: Oh. That's not a distinction I was familiar with. That's interesting.

Tony Madrid: Yeah, it's a new distinction that he brings on. He says – and I think it's true – that bonding problems will result in behaviors and emotions that are not necessarily diagnosable according to DSM standards; whereas, of course, attachment problems are diagnosable.

Dr. Dave: So it's very curious that the way that you got into this was your wife's impending pregnancy, and you reading the book that she didn't want to read.

Tony Madrid: That's it.

Dr. Dave: But at what point did this then become important to your clinical practice? Evidently you made some kind of cognitive leap at some point.

Tony Madrid: It was totally accidental, David. I had a patient bring her daughter in who was seven years old, and she was a severe asthmatic. She was on regular courses of steroids, she was on bronchodilators, rescue medication. She used to show up in the emergency room once or twice a month; just really severely asthmatic. And I tried to hypnotize the girl and she would get relief during the session, but afterwards she would return to being fully asthmatic.

I continued to see the mother for counseling and during the course of that time I taught her how to use hypnosis and we used it for emotional issues, and then one day she said, "You know, my daughter's really sick and I have a lot of trouble with it. But the thing that bothers me the most is that I don't even like her. I don't have any emotions for her." Well, I had just read the book by Klaus and Kennell, and

that's one of the things that Klaus and Kennell point out, that mothers who don't bond just don't feel like they love their child.

So I said to her, "What happened during the child's birth?" And she said, "Oh boy, it was just horrible. My husband left during pregnancy." Bingo, you know, emotional trauma.

Dr. Dave: Yes.

Tony Madrid: "My mother was there in the labor room berating me during labor. The nurse was a real abusive nurse. I didn't have my regular OBGYN, he was on vacation. They had to bring somebody else in. It was very uncomfortable. And when the baby was born it was jaundiced, and kept away from me for a period of time. And eventually I went home and they kept the baby in the hospital. And when I came to pick the baby up, they gave me the baby, and the father turned to me, 'Are you sure this is my baby? I don't have any feelings.'" So it was real clear there was a bonding problem, a serious bonding problem.

So working just on the possibility that we might be able to do something, I hypnotized her, and asked her to remove all the traumas and bad memories and feelings, which she did. And then I said, "Now, let's create a new birth." And she was able to put together a picture of a new birth. And I said, "Good. Then let's have your unconscious mind agree to work on this new birth and keep it as part of your emotional history."

So that was the last we thought of that until about three months later when she was leaving therapy, she said, "Remember the time that we did that hospital stuff?" And I didn't know what she was talking about. And I said, "No." And she said, "Remember, we went and cleaned up my baby's birth and then put in a new birth." I said, "Yeah." She says, "Well, a couple of things happened. The first is that my daughter's asthma disappeared that day." And I said, "What do you mean, it disappeared?" She says, "No more wheezing, no more wheezing at night, no more asthma medication. She can play now without wheezing. She says the asthma's gone. It only came back once when she was shipped over to see her father for a weekend and it came back on and he said – he phoned and said, 'Our daughter's wheezing,' and I told him to bring the daughter right back, and as soon as she got back home the wheezing stopped." She says, "No more asthma." She said, "But the thing that's most surprising is that from that day on I loved my daughter, and now I know what it feels like to love my daughter." So I thought, you know, that was a process that took maybe 20 minutes, and in that 20 minutes there was such a dramatic change in the physical state of the daughter and the emotional state of the mother.

Dr. Dave: Now, how do you account for that? I mean, that almost sounds magical. Something shifted in the mother and immediately the daughter gets better.

Tony Madrid: I haven't got the slightest clue of what's really working. If you look at asthma as some type of an allergic response, it means that the immune system of the child is in jeopardy, and if the immune system is responsive to stress, what other stress is more salient than the stress of not being loved by your mother?

Dr. Dave: Um hmm. And somehow at an unconscious level, she picked up on that shift in her mother's emotional attitude towards her.

Tony Madrid: That's exactly it. Somehow at a level beyond what we can see, she was able to pick that up.

Dr. Dave: And that's something that's been replicated in your subsequent work, I gather.

Tony Madrid: Well, we started shaking the bushes, and pulling all the kids we could find with asthma who were current clients in the place I was working, and applied the same kind of treatment to them, and in almost every case, there was an event or events that impacted bonding, and once those things – those events were cleaned up and a new birth was created in the mother's imagination, the child's asthma dissolved.

And we were so surprised by this, that we started doing a study of the incidence of non-bonding within an asthma population. And these were small samples, like 30-40 children, but in three studies we showed that there's at least a 70% incidence of non-bonding within children who have asthma, as compared to maybe 20-24% of children who don't have asthma. So that's an enormous percentage of children who are suffering from not being bonded to their mothers.

If all of them are treatable, I don't know. But it's borne out by a lot of other kinds of psychoanalytic and psychological literature. From the very beginning of the psychological study of children with asthma, the psychoanalysts would say that it is the cry of the unloved child for his mother. And all kinds of research shows that mothers of children with asthma are – and this is horrendous that mothers are blamed – but are distant, are angry, are cold. Surprisingly, however, these same mothers who might be distant or cold to the asthmatic child, can be very warm and loving to other children, so it's not something that's a characteristic of the mother, but a characteristic of the interaction.

Dr. Dave: Yes, and in fact your subsequent work has revealed that there are things that can happen around birth that can interfere with that bonding process, and so those things might happen in relation to the birth of one child but not the birth of some of their other children. So maybe you could describe –

Tony Madrid: Exactly.

Dr. Dave: Yeah, so describe for our listeners some of the sorts of things that can interfere with bonding.

Tony Madrid: Well, if you take the physical separation, the things that can interfere are any kind of hospital procedure which takes the child away from its mother right after birth. And, of course, during your and my times this was the standard procedure. This is your baby, they take the baby and they put him into the nursery. Because of Klaus and Kennell, who revolutionized birthing processes, children now have rooming in and birth centers and those kinds of things. If a child goes into an intensive care nursery there is a limited likelihood that the mother will bond to the child. If the mother is anesthetized during birth, if it's a C-section, if the mother is very ill and unable to attend to her baby, if the baby is born very ill and the mother doesn't have access to the baby, if the child is a twin or triplet, it's likely that she will not be able to bond to one of them, if a child is adopted, of course. Now, David, Klaus is quick to say that if those things happen at birth, the mother who is resilient can still bond with her baby given the right amount of time and given the right environment.

Dr. Dave: Okay.

Tony Madrid: But the likelihood goes down if those kinds of things occur at or around birth that separate the baby from the mom. The second way that bonding can be interfered with is through emotional separation. And emotional separation is just really simple. It means that the mother is going through some traumatic event in her life where she can't have bonding emotions.

So, if a mother's – somebody in the family just died – let me give you an example: if somebody in the family just died; if the mother is ripped to another community and is away from her support group; if there is a – if there are problems in the marriage; if the father is giving the mother a lot of trouble for one reason or another; if the mother doesn't want the baby.

Let me give you an example. There was a lady that I was seeing 30 years ago – no, it was about 25 years ago – who was – who said one day, "I have to rush home because my son is sick." And I asked, "Well, what is he sick with?" And she says, "He's got asthma, and he's having an attack right now." And I said, "Tell me about his birth." She said, "The birth was fine. Everything was really good." And I said, "Well, was there any death in the family?" And she said, "Oh yes." She says, "I had a baby die about six months before we conceived this baby."

So, we took her back to the time of the birth – to the pregnancy, and had her remove all of the grief in her heart from the death of the first baby, and had her feel what it was like to go through her pregnancy with joy; then she had the baby with joy and bring it right up to the present time. That was on a Friday. It took about 15 minutes. Honest to god, it takes about – it's so quick. It took about 15 minutes.

So she phoned on Monday, and she said, “I couldn’t phone over the weekend because the office was closed, but that night my kid’s asthma disappeared.” She says, “And I’m looking out the window right now at him playing soccer. And it’s the first time in his life that he’s been able to play soccer and be healthy. He’s not wheezing or anything.”

Dr. Dave: Tony, that’s incredible. You must have felt so gratified.

Tony Madrid: Exactly. And it was so surprising. It’s – I think that mothers and their babies are meant to attach. They’re almost like Velcro.

Dr. Dave: Yes.

Tony Madrid: And if the impediments to bonding are erased, the baby just slaps right on the mom and the mom slaps right on him.

Dr. Dave: Right. Now I think it was remarkable in that very first case that you shared with us that the mother was even able to tell you that she didn’t love her baby, since there would be such social – such a social stigma to admitting something like that generally. So she must have had a lot of trust in you, I think, to even share that.

Tony Madrid: I was so pleased that she could acknowledge that. Yeah, there is somewhat – you know, the thing that bothers me about most of the psychological stuff that goes on with asthma and mothers, is that the mothers are blamed for the asthma in their children. Any time a psychological report comes out, that’s what it says. When in fact, according to our studies, it’s an absolute accident, where there’s –

Dr. Dave: Yeah, that’s just like in the history of the thinking on schizophrenia and autism both. Both of those have a history of mothers having been blamed in a similar way.

Tony Madrid: Absolutely, the schizophrenogenic mother.

Dr. Dave: Yep.

Tony Madrid: Well, you know, David, about 20 years ago there were some articles about the asthmatogenic mother. And there were some studies done at the Children’s Asthma Research Institute in Denver, and they got kids over to the hospital in Denver from around the country, and they found that these children had a remission in their asthma almost as soon as they went into the hospital.

And so they thought maybe this has something to do with the environment and they asked the mothers to send their bedding without washing them. And send all the dander and the stuff from the dogs, send it all. It didn’t matter. When the kids

showed up at the hospital, their asthma went away. And so they said it must have something to do with the parents and especially the mother, and so they developed the term the “asthmato-genic mother”.

What we’re finding out is that this lack of bonding is totally accidental. I know in California, accidents really don’t occur [laughs], but the father dies, the – somebody else in the family dies, there’s separation at birth, totally accidental. And because of these accidents at birth, the bonding is disrupted.

Dr. Dave: Okay, so when that happens, I imagine there’s certain sets of symptoms that you tend to see in mothers who haven’t bonded, certain sets of symptoms that you’d see in the children of mothers who didn’t bond with them, and perhaps even symptoms that you see in adult children later on. Maybe you could cover those three sets.

Tony Madrid: Absolute, absolutely. The mothers who don’t bond will feel less attached to their children, will feel that there’s something wrong with their child. I used to remember when I was a child psychologist, that mothers would come in and say, “There’s been something wrong with this child right from birth.” And I’ll say, “What about your other children?” And she’s all, “These are all fine. But this child, I don’t know, there’s always been something wrong with him: he’s been less demonstrative, he never would cuddle, he was colicky,” and the other descriptors that Klaus and Kennell pointed out along with mothers and children who don’t bond.

The mothers, interestingly enough, will overcompensate and are often seen as being controlling or domineering or over-controlling. And so what that means is that the ease of getting along with this child and protecting the child isn’t there; the natural way of knowing the moods of the child isn’t there. And so they have to work hard at getting along with the child, and that’s the overcompensating and the controlling portion.

The children will be antsy, will be pulling at their mothers. We’re working with one child who was not asthmatic, but the mother came in because the child rubbed on her all the time and she says, “I just don’t have any feelings for this child.” The child will be at their mothers on a regular basis. There’s no – Klaus and Kennell used to talk about the dance between a mother and a child that are bonded. There’s no dance, they’re stepping on one another’s toes.

And as you point out, the characteristics of adults can be surprising. The adults will say, “You know, my mother and I never got along. We’re friends now, but we just didn’t get along as children.” And you find a lot of unbonded adults bonding to other things, David, bonding to work, bonding to drugs and alcohol, bonding to any kind of addictive behaviors.

We had – this is really interesting – I used to teach at USF, hypnosis, and I was teaching hypnosis and talking about bonding, and one of the ladies in the class, about 45 years old, she said, “That’s how it is with my mother. We’re friends now but we never got along.” And I said, “Well, what do you think went on at birth?” She said, “Oh, it’s real obvious. My father was in the Second World War and was away, and he was in the – he was out in the battlefields and my mother was afraid he was going to die, and she was a wreck.”

So we went through – in the adult, we went through changing the feeling of the fetus – which is her – changing the feeling of the fetus of being in a mother who is peaceful. And we went through all of that. I don’t know as much about bonding adults as we do about bonding kids, but nevertheless we did it. And at the next class the lady said, “You know, I’ve been real peaceful all week. I’ve been very, very happy,” she says, “but what’s very surprising is that my mother phoned from back east and said, ‘Honey,’ – and my mother never calls me honey,” she said. “Honey, what’s been going on with you?” “Why?” she says. “Well, I don’t know. I’ve been thinking about you this week, and I’ve been fingering the little bracelet that you had when you were born, almost like a pair of rosary beads.” She says, “Are you doing something weird over there?” [laughs]

Dr. Dave: Well, Tony, if you and I lived in California, which we do [laughter], we might speculate that there’s almost some kind of psychic connection between mother and child that they pick up on these kinds of shifts in the other so quickly.

Tony Madrid: Yeah. If we lived in California, we’d start formulating some theory here.

Dr. Dave: Yeah, right. Now, I know a number of my listeners are interested in hypnosis and probably want to hear more about it, so maybe you can talk a little bit. I gather that you use the hypnotic state to kind of recreate the early circumstance for people. Take us through that a little bit.

Tony Madrid: In these particular cases working with mothers, they are so entranced by the whole concept of developing a better relationship with their child that it’s real easy to get them into hypnosis. And the idea of bringing them back to the birth of their child is not that hard to do. As you were telling me when you trained me in how to do hypnosis, you can get a person into a hypnotic state and through the use of ideomotor signals, a person can achieve a lot of hypnotic phenomena without going into a very deep trance. And just by a light state of hypnosis, a person can have access to information and to emotional and behavioral changes.

What we do is we just have – we lightly hypnotize the mother, and we have her go back to the things around the birth of her child that were bothering her, and we say, “Why don’t you just clean up that stuff and remove it from your heart? And when that’s accomplished, your index finger will start floating.” And you don’t have to

put a person into a very deep hypnotic state, it might only take a minute to tell them to close their eyes and go inside and go back to the events around the birth of their child. And within a short period of time, their index finger will start floating involuntarily, and then you say, “Good, now go over to this other thing that was bothering you and clean that up as well.” And that’ll happen; their index finger will float again. And then you say, “Now, anything else in there that’s got to get cleaned up, just go ahead and do it,” with instructions that are that wide, just go in and clean up anything else.

Dr. Dave: Interesting.

Tony Madrid: And as you taught me, the unconscious mind can do some remarkable things without specific directions. Once they get into that warehouse of abilities, there’s no limit to what they can do.

Dr. Dave: That’s really great. You know the – I was thinking of you and this approach, particularly after I read your article in the family therapy volume in which you talk about a case – I don’t have it in front of me – you talk about a case, I think, working with a – I think it was working – ah, I’ve forgotten the details of it, but –

Tony Madrid: Yeah, it was a mother whose child – who had a child that she didn’t get along with, just rubbed her the wrong way.

Dr. Dave: Okay.

Tony Madrid: And she had all kinds of physical problems around the time of the birth of that baby.

Dr. Dave: Okay, well I heard from a listener and the listener may recognize this, but I’m not going to give anything away, but I heard from a listener who had a very unpleasant experience with her own natural birth parents, and later in life was able to find another set of older adults who really cared for her and she cared for them. And yet at some level she still felt, or continues to feel, unbonded to her natural parents, and not as fully bonded, I guess – if I understood it correctly – to her adoptive parents as she’d like to feel. And I just have the feeling, having read what you’ve written and listened to what you’ve said, that maybe she could benefit from a hypnotic session such as you’re describing.

Tony Madrid: I think that it’s possible for her to feel even more bonded to her adoptive parents, maybe even to her mother, and the issue becomes feeling that bond right from the beginning.

Dr. Dave: Um hmm. To go back to that state and in active imagination of a light hypnotic trance –

Tony Madrid: That's it.

Dr. Dave: And to really have that experience.

Tony Madrid: Yeah, that's it.

Dr. Dave: Yeah. Now maybe you can talk a little bit about EMDR, because I'm not sure all my audience would know what EMDR is, and how it works. I know that EMDR stands for Eye Movement Desensitization Reprocessing. Maybe you can say a little bit about it.

Tony Madrid: EMDR is the, in my opinion, biggest discovery that has hit the psychological field in 50 years.

Dr. Dave: Wow.

Tony Madrid: Everybody who works where I'm working is compelled to get trained in EMDR. It is such a powerful tool that for a – I'm real judgmental about this – for a psychologist to not know EMDR and intentionally not learn it, is like a physician deciding that he doesn't want to use Erythromycin. It is such a – it's a well-proven technique, especially for the treatment of trauma.

And the way it works, as you know, David, is you have a person who went through some trauma think about that traumatic event while he moves his eyes back and forth following the fingers of the therapist or some kind of a bauble, just moves his eyes back and forth. And during the course of that, the emotional impact of the traumatic event leaves.

I first got interested in it by hearing a tape of an EMDR course and there was a fellow who was a train engineer who gave a testimony. He said, "I crushed a car full of a family when I was driving my train, and for 20 years I see the faces of that family and get a knot in my stomach, and it just ruins – it's ruined my life. And I've tried everything to get over it. I've tried medication; I've tried relaxation; I've tried yoga." He says, "I've even tried hypnosis, and nothing would get rid of it." He says, "With one session with EMDR I got rid of it and it no longer bothers me." Isn't that powerful?

Dr. Dave: Yes, I'll say, my goodness. Wow. So when would you decide to use hypnosis versus EMDR? How would you make that decision?

Tony Madrid: That's a great question [laughter]. That's a great question. I use hypnosis all the time, unless I can't hypnotize them, and then I go to EMDR.

Dr. Dave: Okay.

Tony Madrid: That's my rule of thumb.

Dr. Dave: Okay, great. Now, you've gone on to create something called AsthmaBusters, and you've got an AsthmaBusters website. Feel free to give out that URL and tell us what you're up to there.

Tony Madrid: It's asthma-busters.org, asthma hyphen busters dot org, and what it is, is a website that describes the process of helping kids with asthma by bonding them to their mothers, and it's got some information on there about what kind of things indicate a mother was not bonded to her child. And then it gives a couple of references and a survey where they can mail it in and find out whether or not this therapy might be helpful. What we want to do is get this information around the country and set up some AsthmaBusters around the country. The treatment is so quick, and so effective that I just – I can't imagine not trying to get it out there.

Dr. Dave: Yeah, what would be the typical length of treatment in working with asthmatics?

Tony Madrid: Well, getting the information would probably take one session. Doing the therapy would take one or two more sessions, although the majority of people that we've worked with, we only take one or two sessions for the whole thing.

Dr. Dave: Amazing. And what sort of success rate are you seeing? Are you doing any kind of follow-ups so you know what kind of successes you're getting?

Tony Madrid: Well, we've done two pilot studies and the success rate is between 80 and 90 percent.

Dr. Dave: That's pretty remarkable.

Tony Madrid: In the last study that we did, there were 10 children who were taking medication. Eight of them no longer needed medication and the other two were able to decrease their medication.

Dr. Dave: Okay. And I believe that's a sort of an advance copy of a book that you sent me, that long Word file. Do you have a book coming out?

Tony Madrid: Well, I've written a book, but I don't know if it's going to get published. It's called *The Mother and Child Reunion*, and it talks about maternal-infant bonding and the cases that were successful with re-bonding the mothers to their children, and then we talk a little bit about our asthma stuff.

Dr. Dave: Yeah, it's great. You definitely should get it published, even if – and maybe the best way to go – is to self-publish. And initially just sell it from your AsthmaBusters website, and then as it spreads and grows, as I suspect it will, then some publisher might want to pick it up.

Tony Madrid: That's a good idea. I'll talk with you more about this after we're done.

Dr. Dave: Yeah, good. So what are your plans for the future? Where do you see all this going?

Tony Madrid: You know, I've been a psychologist, as you have, for 35 plus years. And I work over at a little clinic out in my neck of the woods called Russian River Counselors, and we see the local folks out here, and children and families. And I – what I want to do in the future is spend a whole bunch more time on the asthma project. You know, when you're a psychologist for a long time, you look back and you say, "What have I contributed to the field?" Well, I haven't contributed much to the field outside of seeing a bunch of patients. I haven't contributed much to the field except for this maternal-infant bonding repair and its connection with asthma, and so I want to devote the next part of my career to this.

Dr. Dave: Yes, yes, well, that sounds like a good plan, like a good vision.

Tony Madrid: I sure appreciate the opportunity to get this out on the airwaves.

Dr. Dave: Yeah, this is maybe a beginning of making it more widely known. So as we wind it up here, is there anything that I've missed that you maybe wanted to have a chance to say? Or any last words that you'd like to leave people with?

Tony Madrid: Yeah, I really want to hammer the point that when bonding has not occurred, it's not the fault of the mother. And that it really is, most of the time, an accidental occurrence, and that it's repairable. That's the part that I really want to emphasize; that without much ado the mother's intent to be connected with her child is so strong that if the impediments are erased from her heart, she will automatically slap onto the kid and the two of them will be bonded.

Dr. Dave: That's such a wonderful strong message to close with. Dr. Tony Madrid, thanks so much for being my guest today on Shrink Rap Radio.

Tony Madrid: Thank you, David Van Nuys.