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Buddhist Approach to Psychosomatic Medicine

Eun Sasaki

Nishihongwanji Asoka Clinic

[Purpose] Examination of the possibility of a Buddhist diagnostic approach to type 1 diabetes mellitus
[Method] Three perspectives in the following were applied as an approach to focus on the release from suffering, that is, the starting point of Buddhism: 1 “to see things as they are.” 2 “To assume as if one were in others’ situation,” that is, to have respect each other. 3 “Awakening,” that is, to realize through one’s experience.
[Result] A woman aged 57 entered the hospital for treatment of type1 diabetes mellitus. Since her blood glucose control became better, she was discharged. She, however, was readmitted due continual weight loss (42kg-32kg). She and her husband were recommended to take a new look at each other, taking into consideration each other’s situation. Through this, they came to realize the importance of seeing things from the other’s viewpoint, and they gradually became able to accept the reality of the disease. After leaving the hospital, she recovered her weight to 40kg and keeps her HbA1c around 5%.
[Conclusion] In this case, the application of Buddhist principles toward type1 diabetes mellitus proved to be effective.

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Female Genital Mutilation : An Injury, Physical and Mental Harm

Isabell Utz-Billing and Heribert Kentenich

Female genital mutilation is undertaken in approximately 30 countries of the world. There are four different types of female genital mutilation.

All types of female genital mutilation cause acute and chronic physical complications, mental harms and problems during pregnancy and childbirth. Acute physical complications are bleedings, anuresis, infections of uterus and ovaries, tetanus infections, sepsis and injury of surrounding tissue during the operation.

Anatomical, psychological reasons and chronic infections cause infertility of women after FGM in 25 to 30%. The rate of HIV infection is highly elevated in patients after FGM due to the operation itself and due to a higher risk of injuries during sexual intercourse.

Female genital mutilation causes many problems during pregnancy and childbirth. Important studies have shown that during childbirth the number of severe tears, caesarean sections, higher blood loss and death of the mother is also elevated.

Concerning mental harm, women after FGM suffer significantly more from fear, depressions, neurosis and psychosis. Due to many physical problems like urinary incontinence, women after FGM often have problems with participation in normal social life. Infertility, difficult penetration and health problems can cause problems between the couple.

Recapitulating, all types of FGM have to be abolished.