Hypnosis Alleviates the Fear of Public Restrooms

For the 7% of the population that suffers from paruresis, treatment with hypnosis can alleviate their avoidance of urinating in public restrooms and at friends' homes

by Shaul Navon, (Haaretz, June 10, 2012); translated by Judy Barrett, MA, MSW

In recent months, a number of young men in their 20s and 30s have come to me for treatment. The problem: they avoid entering public restrooms to urinate. The reason: they are embarrassed that someone standing alongside them at the public urinal will be scornful, or that someone standing near the cubicle door will “hear” the sound of urine projected into the toilet bowl.

This avoidance also manifests when any of them visits the home or apartment of a friend, where the bathroom door seems (to the patient) too close to the room in which friends sit. Here too the patient reasons that they will hear “sounds” behind the door. In addition, when a patient uses the bathroom of a male or female friend, and prepares to begin urination, there occurs an unwanted blockage of urine such that minutes pass with nothing happening. In that case, the patient quickly exits the bathroom and returns to sit with friends, feeling like a failure at a task which is so natural and such a part of the behavioral repertoire of most of the world.

Why is the patient adamant about leaving the bathroom quickly? Is it because he believes that the friends sitting in the living room are paying attention to the amount of time he spends in the bathroom, and that when he returns they will ask him something like “is there a problem?”. On the contrary, he assumes that while he is spending too much time in the bathroom, his friends will be talking about him in his absence.

The syndrome from which these young men suffer is known as “shy bladder” (paruresis). The syndrome is diagnosed as a psychological disturbance which results from an anxiety disorder, generally without any medical, urological problem. The phenomenon is not insignificant: in the U.S., some 17 million males suffer from the syndrome. Although the condition is not specified in the DSM-IV (the diagnostic manual of the American Psychological Association which is accepted in Israel and worldwide), Shy Bladder Syndrome is mainly diagnosed in males and greatly affects their quality of life.

Treatment among those who treat youth includes combining cognitive-behavioral treatment with hypnotic therapy. Research from 2010 that was published in the journal Social Work in Health Care examined 101 paruresics who received cognitive-behavioral treatment with one year post-treatment follow-up. At the end of follow-up, a majority of patients (85%) reported returning to normal life and using public restrooms without difficulty.

Shy Bladder Syndrome can be explained against a backdrop of social trauma. One example would be public humiliation of the patient by equating his penis with his manhood. Indeed, one patient – a 22 year old male who came to me – reported the following: that he was sitting with friends when someone said that he was sitting with people who knew him. Everyone around him giggled. Without doubting the original intent or his own inference, he concluded that they meant: “he (the patient) is not a real man”. The patient truly took the remark as critical, and described it as “traumatic”. The remark “followed” him any time he tried to enter a public restroom.
Shy Bladder Syndrome becomes a secret at work, and among friends a burden. For example, one 28 year old patient told me that when he meets a new female friend, he is ashamed to admit that he can’t pee in her bathroom. In the course of treatment, I invited him to tell her whatever would lighten the disclosure. Upon hearing his secret, even his female friend “didn't fall off her chair”. Which teaches that for all of us, our thoughts and fears are likely to be far worse than the realities.

With the help of hypnosis, the patient whose Shy Bladder Syndrome occurs in restrooms can be educated to relax the muscles surrounding the pelvis and begin a stream of urine. Similarly, treatment with hypnosis can enable the patient to experience the trip to a public restroom with greater emotional distance and indifference. It is feasible that this treatment can make possible for the patient a deep experience in which he ignores “what happens outside the restroom door”, and receives a verbal suggestion “as if” he is actually in a restroom familiar to him – in his home or another familiar place – where he feels no fear of urination. As the Talmud says (Derek Eretz 3): “one who is ashamed does not learn”.

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