

Somato-Psychic Syndrome (SPS) and Somato-Psychic Autonomic Dysregulation (SPAD) as a Pathophysiological Bridge Between Body and Mind

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Abstract

Somato-Psychic Syndrome (SPS) and Somato-Psychic Autonomic Dysregulation (SPAD) form a novel clinical and pathophysiological framework for understanding the development of mental distress arising from primary bodily dysfunction. Unlike traditional psychosomatic models, which assume a psychological origin of somatic symptoms, the SPS concept proposes the reverse pathway: a structural disorder—most notably axial blockage (AxBb)—disrupts autonomic nervous system (ANS) function, which in turn becomes the primary driver of psychological and behavioral symptoms. The core mechanism is SPAD—autonomic imbalance triggered by somatic irritation of ANS structures.

This presentation outlines the clinical manifestations and diagnostic features of SPS across the developmental spectrum from infancy to adolescence, with particular attention to its relationship with neurodevelopmental disorders and psychopathology. Preliminary results from a retrospective study involving 135 children aged 2–12 years are also presented. Following a minimum of five manual therapeutic interventions targeting AxBb correction and enhancement of ventral vagal activity, statistically highly significant improvements were observed in attention, behavior, sleep, anxiety, and depressive symptoms (all $p < 0.001$; effect sizes per Cohen's d ranged from 0.4 to 1.4).

A multimodal therapeutic approach (FPIT, LVLA/LVHA manipulations, OCF, BR, VM) aimed at restoring somatic integrity and autonomic balance appears to be a clinically effective strategy. SPS is proposed as a distinct nosological entity whose timely diagnosis and targeted treatment may significantly improve quality of life in children who are otherwise often misdiagnosed and treated under prevailing psychopharmacological or psychiatric paradigms.