<u>Picking Your Skin, Excessive Tattoos, Piercings, or</u> Cutting: Patient Handout

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<u>Disclaimer:</u> Not everyone, in the scientific community, will agree with this information. From 30 years of psychiatry experience, I have had hundreds of patients stop this behavior, cold turkey. Finding out the **cause** is something most patients were never told. Note that if the behaviors are for "attention-seeking" behavior, treatment may differ.

Why do I pick my skin or make myself feel pain?

When you injure yourself (tattoo, skin picking, piercing, cutting), your body releases opiates (narcotics) which your brain uses as a natural pain blocker. This "opiate release" is like Heroin/Vicodin/Norco, which are pills used to stop the pain.

It may start out as picking a sore on your skin or getting a few tattoos/piercings and then it progresses. You may have gotten your first tattoo and then felt the need for more and more **AND more often**. You get the idea; **you need the pain more often to feed the habit**. Your brain is craving your body's natural opiates (pain killers).

Am I a drug addict?

Yes, you are an addict but, to your body's own natural pain killers.

This isn't your fault. You probably never knew, why you do things to cause pain, and why it makes you feel better. Now you know.

Sometimes I pick my skin and don't realize that I did it. I got a tattoo/piercing that I regret and never meant to get it done.

This is because the part of your brain (pleasure-seeking) is craving more and more opiates and bypasses the frontal lobe (decision-making

part of the brain) to make you inflict pain. (The brain knows how to get what it craves and **tricked you**).

I have lots of tattoos, why is that a problem?

I am not against body art of any kind however, some people with a predisposition to "pain addiction" run into problems. They use socially acceptable tattoos and/or piercings to justify the behavior. You are probably fine **if** you don't have an issue with:

- --causing pain and feeling better afterwards
- --getting excessive tattoos/piercings that you regret
- --getting excited (and planning) your next tattoo, after you just got one
- --getting tattoos more often than you had planned
- --thinking too much about your next tattoo
- --picking or cutting your skin in between
- --justifying money spent on tattoos/piercings when it could have been spent on essentials such as food/shelter/childcare/unpaid bills, etc.

Unlike non-pain seekers, your brain has extra receptors for opiates which means, that your brain wants to fill up those areas with opiates. Every tattoo gives you MORE pain receptors that need to be filled up with opiates. The more pain receptors you have, the more OFTEN they need to be filled (fed).

Is this genetic?

Some people have relatives with an opiate addiction to Heroin or controlled prescription medications. This may be genetic which you

inherited. Therefore, in your lifetime, you need to be careful with the use of pain medication because, you have a risk of getting addicted.

I take norco for pain in my back. How does this affect my treatment?

You might notice, that if your doctor wants to lower the number of narcotic pain medications you take every day, the **pain-causing behaviors** might get worse. Be aware of this, so that you can stop it and prevent it. (You might feel the need to get another tattoo, which is a trap, in order for your brain to feed the habit, from less norco.)

There are many safe ways to get rid of real pain without using a narcotic. I recommend Voltaren gel for joint pain or the Flector Patch which is the same as the Volteren gel for back pain. A physiatrist might be able to help you manage and/or prevent pain safely. Be sure to let the person know about your history of opiate addiction (your body's own opiates). Feel free to show the pain specialist this information. Be warned that not everyone agrees with this information.

Can I get another tattoo?

Yes, but make sure it is something sacred and important to you. Try to wait at least 2 years because that is how long it takes for these extra receptors to die off. If you cannot wait, make sure you don't restart painful behaviors again in any way. Make sure it isn't because your narcotic pain medication was discontinued or reduced.

What can be done?

Now that you understand **why** you do this behavior, you can stop cold turkey. Most people are able to do so, once they realize WHY this behavior occurs.

It is best to stop on your own. However, in some rare cases, we can **block the opiate response** in your brain with a pill, eventually, you will stop the painful behavior. If you inflict pain on yourself, it will be

blocked by the <u>opiate blocker medication</u>, this way your brain won't get the response it wants and eventually stop the cravings and pain-inducing behavior. If you are on a narcotic pain medication or use heroin/street drugs, you cannot take an opiate blocker. While on the opiate blocker (naltrexone, suboxone, revia), you need to let a trusted friend know and put it in your wallet emergency card. In case you are in a car accident or injured and taken to an ER. You CANNOT have any opiates while on this medication. Once the pain-inducing behavior stops, you can be weaned off the opiate blocker and should be fine.

Remember, with this medication, you may still do the behavior but, your brain won't get "fed" from it, and eventually, the brain won't get any rewards so you will stop the behavior. Most people are able to stop cold turkey once he or she realizes the cause of the behavior.

The **pleasure-seeking** part of the brain is so sneaky, that it can bypass the **good-decision** making part of the brain!!!!

Remember to be honest with yourself and your medical provider.

Break the addiction cold turkey or with medication. You can do it.

IF YOU ARE A CARE PROVIDER FOR SOMEONE WITH A DEVELOPMENTAL DISABILITY READ THE FOLLOWING:

Sometimes, a repetitive behavior occurs such as picking the skin or scratching a certain area. This is the same idea as above and can be treated with an opiate blocker as well. The person will continue the behavior for about a week or more, until the brain gets the message, that it won't get the response it wants.

Keep nails cut short, hands clean, the injured skin clean and dry.

Do not punish the person and continue a loving and kind approach. Now you understand how the brain caused this to occur and treatment available. **But always assume it is medical first and get that ruled out** i.e., dry skin, tapeworms, allergic skin condition, etc.

For people with a serious mental illness:

The person may need to see a dermatologist if picking certain areas such as bumps in the skin that the person thinks has bugs or larva in it, to rule out a condition called, delusional parasitosis.

This information and more contained in the book, <u>Everything You</u>
Should've Learned in Psychiatry School: But Didn't by Dr. Kelly
Gardiner