# Psychotherapy of depressive disorders

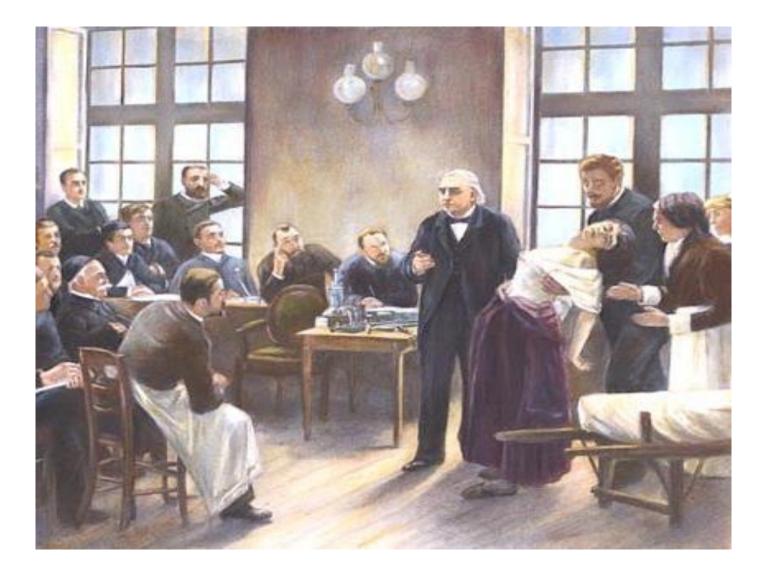
Prof. Tringer László

### "Psychotherapy" in the Bible

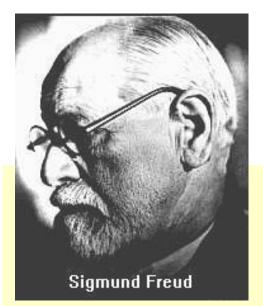




#### Lecture of Charcot in the Salpêtrière



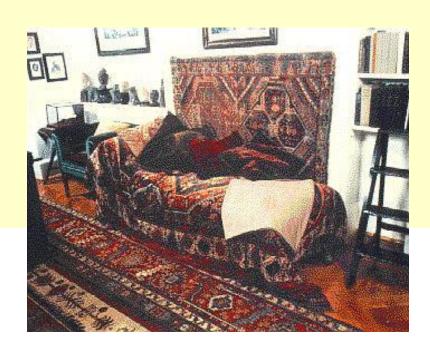
#### Sigmund Freud



(1856 - 1939)

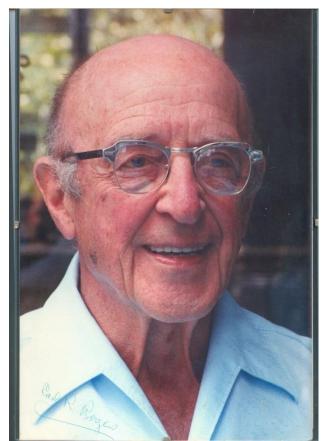
Research in neurology No medical condition behind the complaints

#### University of Vienna



## The theory of Carl R. Rogers

- Humanistic Psychology
- Organism: The individual endeavours to self-realisation
- Self-image: ideas, perceptions, emotions, values and attitudes concerning the self
- Ideal self: the person, the individual desires to become



1902 - 1987

# The necessary and sufficient conditions of psychotherapy

Carl R. Rogers

- Empathy verbalisation
- Unconditional acceptance (regard) of the patient
- Congruence

#### Common factors of psychotherapies

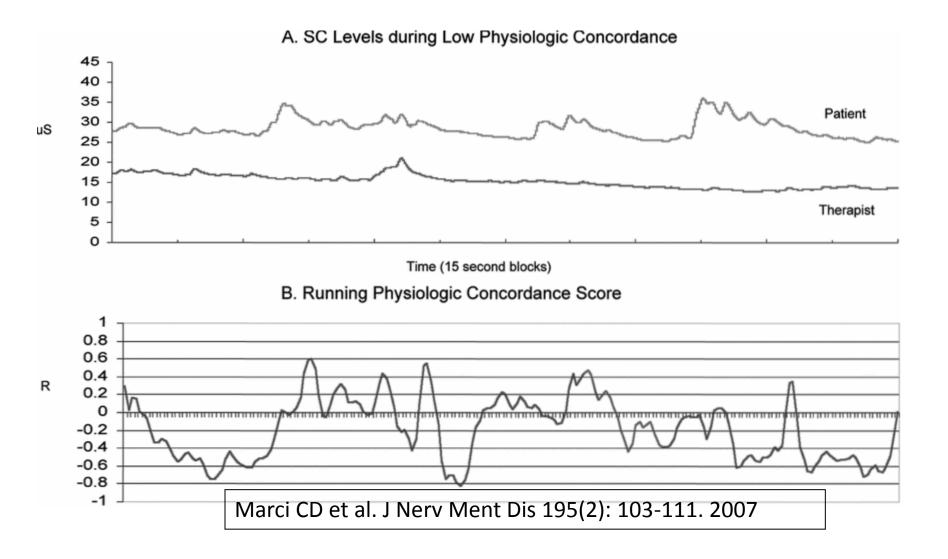
- 1. Positive and warm therapeutic relationship
- 2. Use of effective procedures (support, encouragement, acceptance etc.
- 3. Acceptable explanation of symptoms integrated with the treatment
- 4. Eliciting positive expectations for the treatment

Frank 1991, Arkowitz 1992

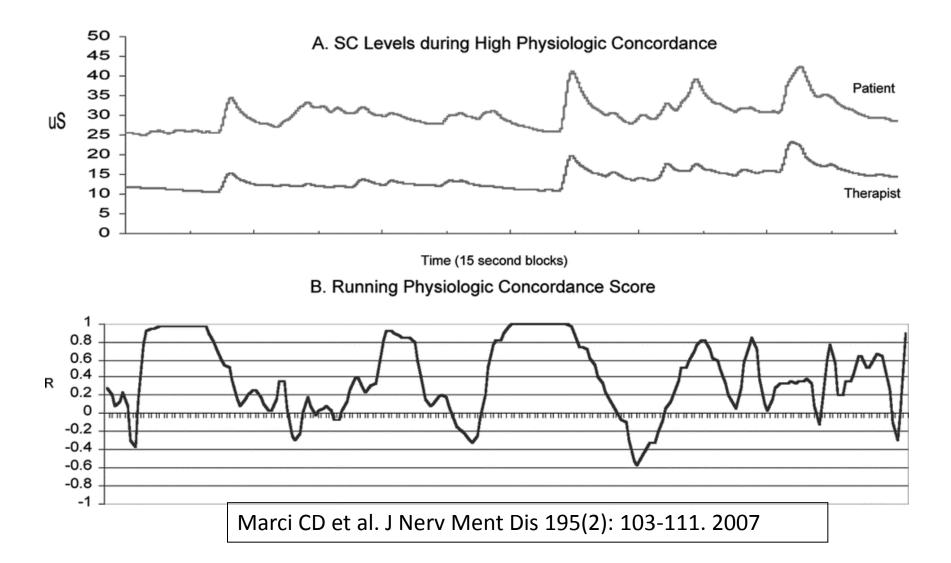
# The aim of psychotherapy in neurobiological terms

 Restructuring of neural networks of the subcortical and limbic system, responsible for the non-conscious emotional and motivational dispositions.

#### Skin conductance and low empathy I.



#### Skin conductance and high empathy II.



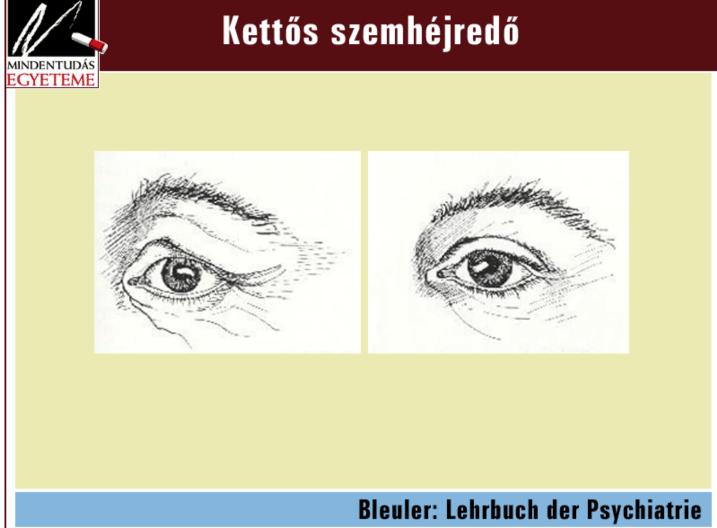
# The depressive syndrome

- Behaviour
  - Slowing down, inhibition of movements, thinking, and attention disorders
- SomatiC symptomS
  - Sleep disorder, loss of appetite, loss of weight, sexual disorders
- Subjective Symptoms

 Anxiety, low spirits, hopelessness, worthlessness, sense of guilt, suicidal ideas

# The double wrinkle of the upper lid









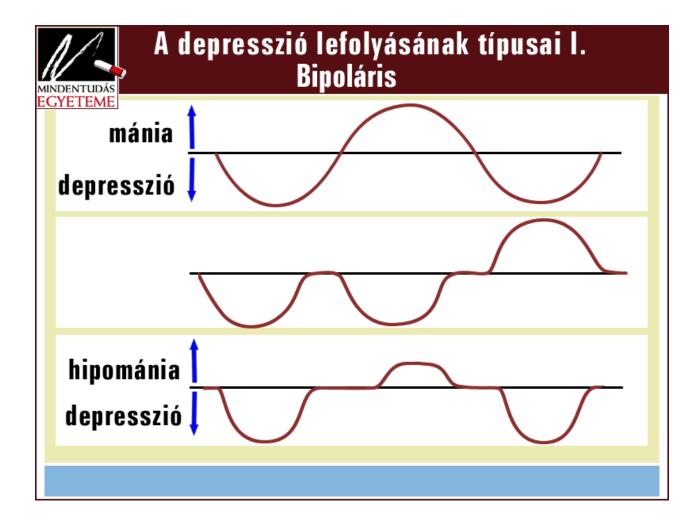
#### **Concepts of depression**

#### **Monistic views:**

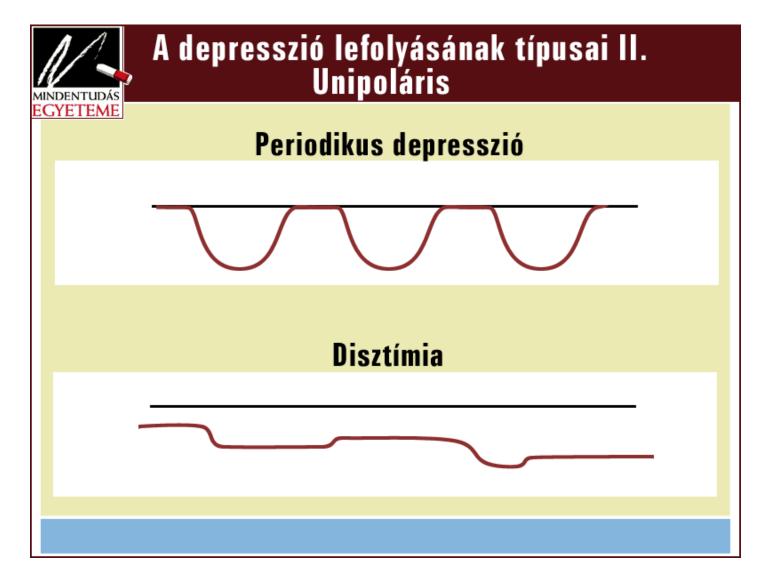
#### **Dualistic views:**

- Continuity between normal states and clinically severe forms of depression
- Psychological and biological depressions

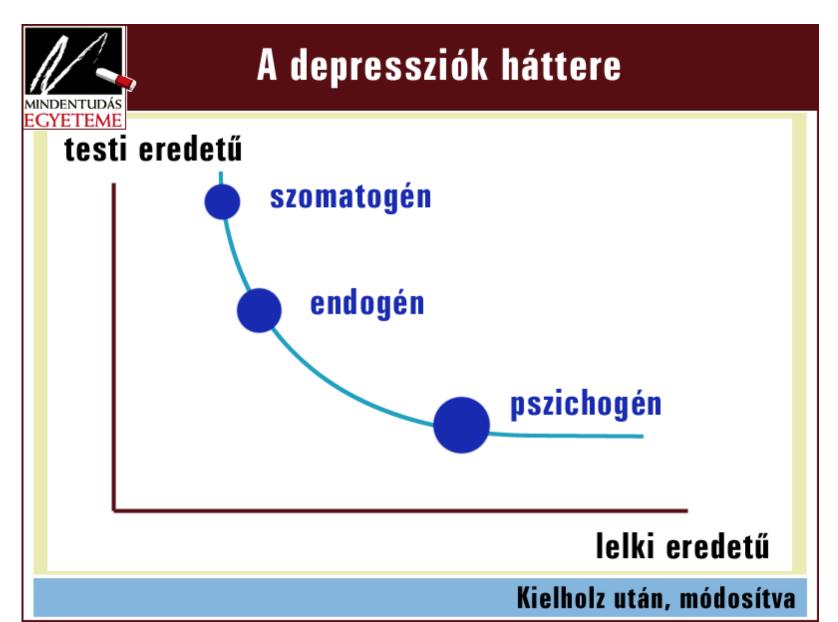
### **Bipolar course**



#### Unipolar course



#### View of depressions (Kielholz, modified)

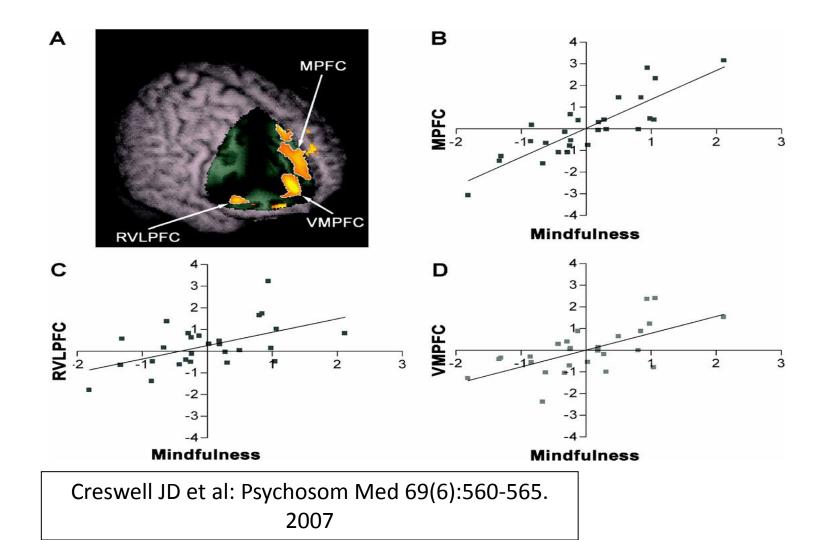


Neurobiological correlations of mindfulness (fMRI studies)

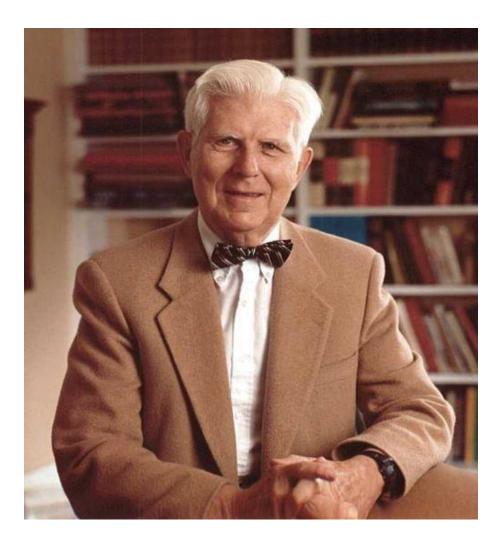
- Increase of the activity of the medial prefrontal cortex
- Decrease of the activity of bilateral amygdala

Creswell JD et al: Psychosom Med 69(6):560-565. 2007

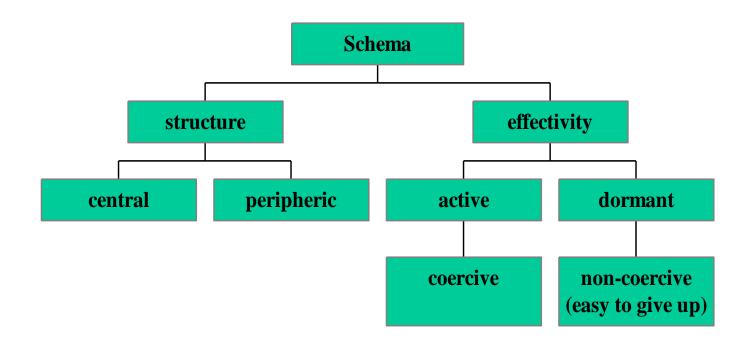
# Increase of the activity of prefrontal regions in the function of mindfulness

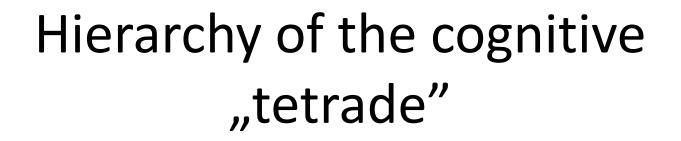


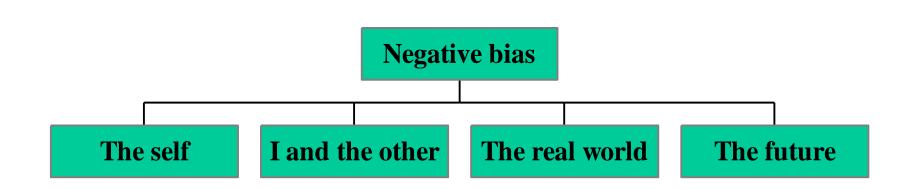
#### Aaron Beck (1921-)



# Classification of cognitive schemata







## **Cognitive distortions**

- All or nothing (dichotomous thinking
- Exaggerated generalisation
- Mental filter (selective abstraction)
- Disqualification of the positive
- Mind reading (early conclusion)
- Future telling
- Catastrophising
- Minimalisation maximalisation
- Emotional logic
- Should statements
- Labelling
- Personalisation

### "Superiority" of CBT

Control	Superi- ority	No. of Studies
Waiting list	29%	20
Placebo		
Antidep-	15%	17
ressants		
"Other"	10%	22
apies		
Behavior th.	2%	13
	Waiting list Placebo Antidep- ressants "Other" psychother apies Behavior	OrityWaiting list29%Placebo-Antidep- ressants15%"Other" psychother apies10%Behavior2%

Gloaguen et al. J Affect Dis 1998. 49: 59-72.

## Process of cognitive therapy

- Building up relationship
- Aims and priorities
- Identification of automatic thoughts
- Control of automatic thoughts
- Identification and modification of cognitive schemata
- Correction of the self-image