

The role of psychotherapy in the medical praxis

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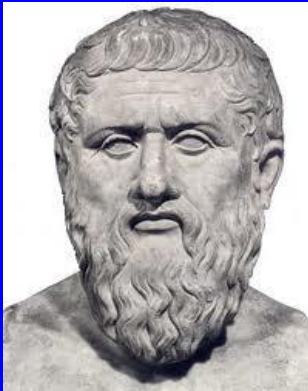
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Outline

- History
- Definition of psychotherapy
- What is common in psychotherapy and pharmacotherapy?
- Basic elements of psychotherapies
- Major psychotherapeutical methods
- Neuroscientific basis of psychotherapy

The psychological background of healing – history of psychotherapy

The healing is a complex and holistic process, aiming the total health (including the body and the soul).



Plato: „a sound mind in a sound body”.

Medical anthropology:

The shaman (=medicine man) used the drugs and the spiritual rituals as well.

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The first examples of the psychologically based healing practice was the „magnetism”, the initial form of hypnosis.

Franz Anton Mesmer (1734-1815).



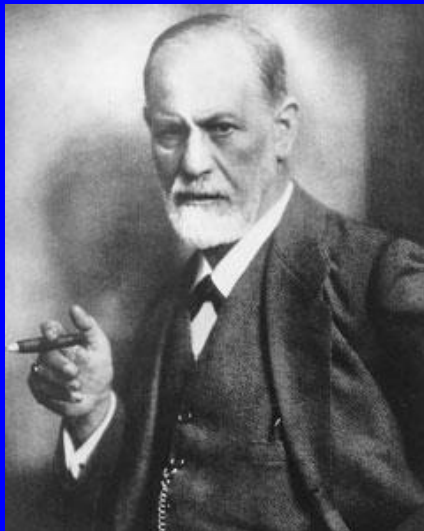
The notion „psychotherapy” was used first in 1872
(Tukes).

The first form of scientifically based psychotherapy was the psychoanalysis (*Sigmund Freud, 1856-1939*).

His first books:

Studies about hysteria – 1895.

The interpretation of dreams – 1900.



The psychoanalysis was very popular in Hungary as well – „Budapest School”.

Sándor Ferenczi (1873-1933) was the chair of an early institute of psychoanalysis in 1919.



Definition of psychotherapy

The different definitions contain the following criteria:

1. Psychotherapy is a healing practice based on scientific, psychological theories.
2. Its aim is to heal the (bodily and psychological) symptoms, the correction of behaviour, and the promotion of the personality development.

3. It is a practice based on a so-called psychotherapeutical contract, which contains mutually defined goals.
4. The doctor-patient relationship is of central importance – interaction and communication.

Psychotherapy can be used by a trained and educated expert.

It is not the same as the lay help.

There are three levels in psychotherapy:

- Psychotherapeutical approach;
- Psychotherapeutical intervention (it is occasional);
- Use of psychotherapy in a structured way.

What is common in psychotherapy and pharmacotherapy?

The traditional, dualistic approach – dichotomy:
separation of psychotherapy and pharmacotherapy.

Today: dominance of integrative thinking:
biopsychosocial model of illnesses.

The interaction of drugs and psychotherapies is a
new research area – no more traditional
dichotomy.

The psychosomatic medicine is a good example.

The modern theories of psychotherapy involve the evidences of neuroscience.

The psychotherapeutical advantages of medication:

- Medications, through the reduction of acute symptoms, may enhance the patient's self-esteem by decreasing feelings of helplessness, futility, and passivity as well as enhancing the acceptability of treatment.
- Medication may increase the safety with the therapeutic relationship permitting more open expression of fantasies, feelings, and fears.
- Pharmacotherapy, for some patients, may have a positive placebo effect allowing a more substantial therapeutic alliance and decreasing the stigma of seeking mental health treatment.

- Medication may improve autonomous ego functions (concentration and recall for example) that allow the mobilization of greater resources for the therapeutic process.
- Feelings about medication-related side-effects often provide invaluable insight into the patient's personality and emotional experience.

- As in psychotherapy, can elucidate the patient's self-defeating conflicts about achievement and success.
- Medications may not only increase the likelihood, but also the speed and magnitude of the response to psychotherapy.
- During times of interruption of treatment, medication can maintain a connection to the treatment relationship.

Psychotherapy, when added to an ongoing pharmacotherapy, may have the following benefits:

- Psychotherapy promotes improved adaptation and coping.
- Psychotherapy improves compliance with pharmacotherapy.
- Psychotherapy, even in patients with the most severe disorders, decreases the likelihood of recurrence of symptoms.

- Psychotherapy decreases relapse when medications are discontinued.
- Psychotherapy provides a much broader and more comprehensive inquiry into the patient's condition than is the case with medication monotherapy.

Is the pharmacotherapy a form of psychotherapy as well?

The drug mediates, means trust, contains condensed knowledge.

Giving a drug is a therapeutical alliance, and stimulates the patient to report his/her emotional state.

The instructions relating to the drug may cause psychotherapeutical effects, help the compliance.

Placebo effect: a connection between psychotherapies and pharmacotherapies, both theoretically and practically.

Placebo is an aspecific psychotherapeutical and pharmacotherapeutical factor.

In a sense the adequate *pharmacotherapy is a good psychotherapeutical method*: means positive reinforcement, strengthen the therapeutical relationship.

The medicament can be a mediating factor between transference and counter transference.

The patients often combine the positive characteristics of the doctor and the sensorial specialities of the drug.

The tablet can replace the doctor in a symbolic way.

Biopsychosocial model →
role of different factors →
the need of integrative thinking
in the treatment

Difficulties of combination

Psychotherapy may interfere with pharmacotherapy.
Therapeutic triangle: patient – doctor – psychologist
It is important to clarify the responsibilities.

Basic elements of psychotherapies

Psychotherapy is a planned process, a series of
therapeutical sessions.

There is need for a therapeutical contract.

Therapeutical motivation: pressure of suffering.

Psychotherapy is a special relationship.

The doctor have to provide a safe and trustful environment, the respect of personal boundaries, secrets.

The violation of these basic requirements is a serious ethical problem.

Nonspecific factors of psychotherapy – basics of person-centered therapy

There are nonspecific factors in the psychotherapy, these are the general characteristics of the special healing process.

Carl Rogers (1902-1987): person-centered (or: client-centered) theory and psychotherapy.

Rogerian triad:

- empathy
- unconditional positive regard of the patient
- congruence, genuineness

Therapist and patient factors which help the effectivity of psychotherapy

Therapist factors: self-involvement (mentioning the own emotions, experiences), concretism, active effort, interpretational tendency, confrontation, focusing.

Patient factors: self-disclosure, focusing to here-and-now, pression of suffering, motivation, intelligence.

YAVIS patient:

Young

Attractive

Verbal

Intelligent

Successful

*The opposite type is: HOUND (Homely, Old,
Unsuccessful, Nonverbal, and Dumb)*

Psychotherapeutically based helping practices

There are some forms of helping methods which are based on psychological principles, although they do not cover the concept of psychotherapy:

- Patient conduction
- Counselling
- Crisis intervention
- Supportive therapy

Broader scope of psychotherapy:

Human resource management

Trainings, coaching, etc.

Major psychotherapeutical methods

Psychoanalysis

The psychoanalytic theory states that the inner impulses, which are suppressed to the unconscious by the ego defense mechanisms, can come back in an avoiding way, in the shape of symptoms, and often with a symbolic meaning.

These impulses have dynamics (a metaphor from physics).

The symptoms relate to the problem, the inner conflict, and on the other hand they help the patient to avoid the recognition of unacceptable impulses, emotions, desires, etc.

The basic methods are:

- Free association
- Interpretation of dreams, humour
- Transference and countertransference
- Elaboration
- Interpretation of resistance

The classical analysis is long, lasting even years.

There are focal, short dynamic therapies.

The notion „psychodynamic therapies” summarizes the newer concepts based on psychoanalysis (e.g., object relation theory, attachment theory).

Behaviour and cognitive therapies

These are based on learning theories.

Basic assumption: the pathological conditions develop by faulty learning mechanisms (e.g., conditioning, model learning).

Adaptational problems can also be the consequences of missing skills, behavioural deficits.

The essence of behavioural methods is the relearning of the reactions, and learning new skills.

Cognitive processes modify intensively the behaviour (e.g., disorders of self-evaluation, depressive mood, anxiety).

Cognitive therapies are generally shorter (15-20 sessions), and problem oriented.

The aim of the therapy is the recognition, definition, and modification of cognitive distortions, negative automatic thoughts, dysfunctional attitudes, and maladaptive schemata.

Interpersonal psychotherapy

Short-term (15-20 sessions), focal psychotherapy.

The aim is to help the patient in the identifying and modification of interpersonal problems.

Relaxation and symbol therapies

The basic form is autogenic training.

Its roots come from the yoga and hypnosis.

A systematic relaxation helps to decrease the anxiety, and the psychosomatic symptoms.

Another form: progressive relaxation.



Symbol therapies

Guided affective imagery (Leuner): there are standard images (e.g., meadow, house, mountain).

These help to approach and elaborate hidden, unconscious contents.

Biofeedback

Method of psychosomatic treatment, based on psychophysiological reactions.

Physiological responses can be demonstrated as electrical signals – e.g., skin temperature, pulse rate.

The patient can practice the influence of the physiological parameter.

There are many biofeedback instruments.

Family therapy

It is based on system theory. The roots are:

- Psychoanalysis
- Group theories
- Communication theory

Historical background: need for marriage consultation, sexual therapy.

The main characteristics of the family therapy are: positive reframing, activity, and change orientation, focused on the future rather than the past.



Group psychotherapy

There are different methods: psychoanalytic orientation, client-centered (Rogerian), assertiveness training, behavioural or cognitive therapeutical, psychoeducation, nonverbal, movement or dance (body oriented therapy).

Self-help groups are also well-known.



Therapeutic factors of group therapy:

- Supportive factors: giving hope, acceptance, altruism.
- Factors of self experience: self-disclosure, catharsis.
- Learning factors: model learning, counselling, education.
- Other psychological factors: acceptance of reflections, new behavioural skills, insight, corrective emotional experience.

Hypnotherapy

Hypnosis is an interaction, where one person reacts on the other person's suggestions with changed perception, memory, and willingness to act.

This experience is similar to hallucinations.

Hypnosis makes easier the application of other therapeutical methods (e.g., cognitive behavioural techniques).

Two major groups of the methods used in hypnotherapy:

- exploration, dynamically oriented (hypnoanalysis, dreams, age regression, imaginations),
- Behavioural and cognitive, symptom-oriented techniques.



Active-alert hypnosis induction (*Bányai É.*)



Self hypnosis: similar to autogenic training.

Psychoeducation and self-help

Health education: helps the healthy lifestyle and the maintenance of health.

Psychoeducation: provides greater control over the disorder for the patients and the relatives.

Self-help has an increasing importance.

In milder cases it can be enough.

First example: Anonymous Alcoholics.

Use of the modern information technologies:
telemedicine.

Advantages of the self-help:

1. Ego strengthening – it is important because of low self-esteem.
2. Economic – the cost-benefit ratio is good, there are almost no costs from the side of the health system.
3. Self-help may decrease the difficulties of the help seeking.
4. It is easy to spread.

Integrative models

Stepped care model means that the interventions are proposed in a hierarchical way: first the simplest and cheapest methods should be used (e.g., self-help, psychoeducation, group therapy).

If the effectivity is not enough, we can step forward to the next method.

These depend on the intensity, costs, and the probability of the success.

There are many integrative programs for many conditions.

Where to use psychotherapy?

Psychiatric disorders

Psychosomatic disorders

Behavioural problems

Crisis situations

Self-experience, development of self

Modern scientific results in the psychotherapy: neurosciences, epigenetics

There are many new research areas relating to the biological effects of psychotherapy.

The psychotherapy is not only „talking” – it has measurable neurobiological effects.

E.g., PET in obsessive compulsive disorder: similar changes can be demonstrated after drug treatment and psychotherapy (*Baxter és mtsai, 1992*).

Epigenetic changes were reported after interventions relating to lifestyle (sport, diets, etc.).

