Psychodynamic – interpersonal therapy: applications

Else Guthrie: Professor of Psychological Medicine, Leeds Institute of Health Sciences
Plan

• Some Facts
• Some Fancy
<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>No</th>
<th>Outcome</th>
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</thead>
<tbody>
<tr>
<td>Shapiro D, Firth J. BJP 1987</td>
<td>PIT vs CBT Cross-over N=40</td>
<td>40</td>
<td>Broad Equivalence No effect of order of therapy 62% improvement</td>
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<tr>
<td>Shapiro et al, J Con Clin Psychol, 1995.</td>
<td>PIT 16 PIT 8 CBT 16 CBT 8</td>
<td>117</td>
<td>CB and PI broadly effective. No advantage to 16 vs 8 session, except for severe depression 60% improvement</td>
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<td>Barkham et al (1996) J Con Clin Psychol</td>
<td>PIT 16 PIT 8 CBT 16 CBT 8</td>
<td>36</td>
<td>Broad equivalence 40% improvement</td>
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<td>Barkham et al, (1999).</td>
<td>PIT 2 +1 CBT 2 +1</td>
<td>116</td>
<td>67% improvement Equivalence</td>
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## Other RCTs of PIT/Conversational Model

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<th>Study</th>
<th>Condition</th>
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<th>Outcome</th>
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<tbody>
<tr>
<td>Guthrie et al, <em>Archives of General Psychiatry</em> June 1999: <strong>56</strong>; 519-526</td>
<td>High utilisers of psych services</td>
<td>PIT 8 Usual Care</td>
<td>110</td>
<td>Greater improvement in depression and lower costs</td>
</tr>
<tr>
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<td>Design</td>
<td>No</td>
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<tr>
<td>Guthrie et al, Gastroenterology 1991: Chronic IBS</td>
<td>PIT 8 Supp</td>
<td>102</td>
<td>Greater improvement in IBS symptoms for PIT than control</td>
<td></td>
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<tr>
<td>Hamilton et al, Gastroenterology 2000: Chronic FD</td>
<td>PIT 8 Support 8</td>
<td>83</td>
<td></td>
<td></td>
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<tr>
<td>Creed et al 2003, Gastroenterology. Chronic /severe IBS</td>
<td>PIT 8 SSRI Usual treat</td>
<td>257</td>
<td>PIT and SSRI &gt; usual care for QOL PIT more cost effective</td>
<td></td>
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<tr>
<td>Henningsen’s Group Multisomatoform Disorder</td>
<td>PIT 12 EMC</td>
<td>221</td>
<td>Improvement in Quality of Life: treatment &gt; control ES 0.6</td>
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<tr>
<td>Hall et al 2001</td>
<td>Economic analysis</td>
<td>30</td>
<td>A saving of $18,000 per patient</td>
<td></td>
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<tr>
<td>Korner et al 2006</td>
<td>Allocated by chance to therapist but not RCT</td>
<td>29</td>
<td>patients who received therapy significantly better than wait list controls on most measures. Continued improvement with more than 1 year of treatment</td>
<td></td>
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<tr>
<td>Walton and Bendit Completed but not published</td>
<td>RCT</td>
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<td>PIT v DBT. ??????</td>
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Applications

- Depressive disorders
- Anxiety disorders
- Persistent physical symptoms (high users)
- Persistent psychological symptoms (high users)
- Self-harm
- BPD
- Routine clients referred to psychological services in UK
Format

- 2+1
- 4 sessions
- 8 sessions
- 12 sessions
- 16 sessions
- 1 year twice weekly
- 2 years twice weekly
ENHANCING SKILLS: BOND & EXPECTATIONS OF THERAPY

PIT-LITE

Simple and effective
A practitioner's guide to Psychodynamic Interpersonal Therapy
Simple and Effective

• Most components of the training are not unique to PIT
• Emphasis that is placed upon getting the simple things right and putting the basic building blocks of therapy into place
• Unique characteristic of the PIT model.
Simple but profound

• About getting to know someone, not a lot of facts about them
• Takes what we know are effective components of therapy and focuses relentlessly on these aspects
• Bond and expectations
Who can use it?

• Nurses
• Health professionals
• Therapists

• Some interpersonal skills
• Some emotional intelligence
PIT

• Stage 1 competencies
• Stage 2 competencies
• Stage 3 competencies
"Beauty lay not in the thing, but in what the thing symbolized.

Thomas Hardy: Tess of the D’Urbervilles
One man and his book

1985
Experience
Chapter 3: Experience

Joe
Joe

• “I feel ..........queer.”
Experience

- It is pre-conceptual
- Incommunicable
- It is felt in the body
- It is in relation to things, persons and situations
- In the flow of experiencing the past is taken up as an experience which is immediately present.
- It is not static. There is movement.
- Hobson does not distinguish between physical and mental
Experience

• “No verbal or non-verbal expression of the complexity and interrelatedness of such particular experiences can convey the immediacy of the raw, sensed and felt stuff of awareness.”

• Hobson emphasized the importance of staying with experiencing
• I feel queer
• ‘Queer’ denotes an experience; a symbol intimating experiencing which is felt by Joe in his body.
• “Let’s stay with that feeling”
Key Learning Point: Form of Feeling

Feelings, experiences in ‘here and now’

Specific images, memories

Key relationships
Key Learning Point:
Form of Feeling

Feelings, experiences in 'here and now'

Specific images, memories

"A form of feeling is not just an imaginative emotion which when vividly conceived generates an idea. Forms of feeling are elaborations of presentational symbols."
Coronary Care Unit
A form of feeling is not just an imaginative emotion which when vividly conceived generates an idea. Forms of feeling are elaborations of presentational symbols.
Language

Feeling Language

Jam-Jar Language
Language

Feeling Language

“So we beat on, boats against the current, borne back ceaselessly into the past.”

Jam-Jar Language

“To open the jam jar, you unscrew the lid anticlockwise”
Conversational Model

• Bodily experience: being both physical and mental
• Language
• A personal relationship
• Forms of Feeling
• Self
Teresa

IBS for the last 30 years. Numerous investigations. Constant deep pain in her tummy. Always there.
Teresa

- As you know, no two people with IBS ever have the same symptoms
- “I’m very loud”
• “With my IBS, my body, my whole body hurts.”
• “It just shuts down.”
• “If the damn thing works at all.”
• “The only loo that I’ll use is my own.”
• “I keep myself behind closed doors.”
Metaphor

• “A creative relation between hitherto unrelated terms. By terms I do not mean merely a written or spoken word but rather a pattern of meaning, an idea, a schema, a complex system”.

“I’m very loud”
The only loo I can use is my own
The only loo I can use is my own

Terrible fear of someone hearing me
The only loo I can use is my own

Terrible fear of someone hearing her

Behind closed doors
The only loo I can use is my own

Behind closed doors

Form of Feeling

Don’t you tell anyone anything
Angela
Angela

I feel like a beached whale
• A beached whale
Symbols and symbolic transformation

Images in the mind

• Symbols enable us to elaborate and connect inner forms
A personal relationship

- Therapy occurs in the context of a personal relationship
- It’s about getting to know someone, not about getting to know a lot of facts about them
Julia

• “Like a cold chill, ringing through me, I can’t stop shivering, and shaking with pain.”

• Bereaved 18 months earlier. Husband had had a sudden MI and died. Went to work and never came back.
Why do you stand in the dripping rye,
Cold-lipped, unconscious, wet to the knee,
When there are firesides near?' said I.
'I told him I wished him dead,' said she.

'Yea, cried it in my haste to one
Whom I had loved, whom I well loved still;
And die he did. And I hate the sun,
And stand here lonely, aching, chill;

'Stand waiting, waiting under skies
That blow reproach, the while I see
The rooks sheer off to where he lies
Wrapt in a peace withheld from me.'

Thomas Hardy
Julia

- Stand in the dripping rye,
- Cold-lipped, unconscious, wet to the knee,
- Stand waiting, waiting under skies
- That blow reproach
Forms of Feeling

• Differentiation and integration of psychic phenomena and bodily experiences to produce a commanding form

• Building blocks of ourselves......threads that weave forwards, backwards, sideways to create a sense of connectiveness
Conversational Model

- An attempt to get to know someone rather than know a lot about them
- Use of statements rather than questions to encourage ‘feeling’ as opposed to ‘jam jar’ language
- Connecting and organisation of form in an interpersonal relationship
- Staying with experience to see what ‘comes to mind’
- Use of symbolic images and metaphor to access forms of feeling and deeper meaning
The model

- Statements not questions
- Pick up cues
- Stay with bodily experiences to see what comes to mind
Symptoms

“It’s there constantly, can’t get away from it. It just dominates my life. I can’t go anywhere or do anything. I’m a virtual recluse, trapped.

If I go out, I’m constantly checking for toilets, I just don’t feel safe…no one understands what it’s like….they just think I’m always complaining.

I’ll go all day without eating, cos I know if I do, I’ll be in for trouble.I can’t bear going out now, it’s just become an ordeal.

I’m better by myself. It’s difficult if someone comes round, I can’t bear it. I feel…supposing I need to go to the loo and I’m in there for hours…what are they going to think?

I have to pretend to everyone I’m alright. If they only knew!

I’m so worn down by it. Like my insides are rotting away.
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I remember my mother saying to me, “Don’t you tell anyone our business, and here I am telling you everything!”
The central role of ‘experience’

• Avoids the mind body split.
Written on the Body
“Written on the body”
Key point: Bodily symptoms in MUS

• Not conversion
• Not somatisation
• Descriptions of feelings
Key Point

• For every mental experience there is a corresponding physical experience
• We feel love, hate, fear in our bodies
• Even the little feelings in the background are felt in the whole of ourselves
Self-harm
Self-harm

• Therapist: I wonder if we could start by you telling me a little about what happened on Saturday,........ how you came to take the overdose

• JB: I dunno really........I just got fed up.........

• Therapist: umh ..........you felt a bit low’ (statement, understanding hypothesis)

• JB: Well, I’ve been feeling down for a bit now........since my mum died........I thought I’d coped OK.....but it’s my sister.... She’s got her ashes and she won’t tell me what she’s done with them........
Therapist I see..... your mum died recently? I’m so sorry

JB: three weeks ago.....but my sister....Lorraine’s got her ashes and she won’t tell me where they are or what she’s done with them....it’s tearing me apart

Therapist: An awful situation and Very distressing for you (statement understanding hypothesis)

JB: Yes...yes (tears in her eyes)

Therapist: You’re very upset.......I mean you are very upset now about it when you talk with me” (statement, focus on feelings in the here and now)
• JB: I can’t stand it….not knowing where my mum is

• Therapist: like you can’t place her ......talk to her anymore? (understanding hypothesis)

• JB: I don’t know where she is

• Therapist: I wonder if you can stay with that feeling...... (focus on feelings)
• JB: I can’t be with my mum……..(tearful)

• JB: Yes..... Therapist: I wonder if we can go back to the way you were feeling on Saturday......it feels ....a bit like how you are feeling now (focus on feelings, here and now)...I’m not sure

• JB: I want my mum.....I can’t not think of her resting anywhere....I can’t be with her......I can’t think of her being settled.....
• Therapist: you’re in a lot of pain….right now (here and now)

• JB: ....I can’t bear it....I feel so alone....I can’t go on until I know where she is....I’d rather be dead....

• Therapist: Umh......

• JB: I might as well be dead.....

• Therapist: Umh...
Therapist: Errr..... keep that feeling.....I know it’s very painful....wanting to die....missing your mum......I wonder if something comes to mind....an image or picture..or memory.....it may not... (focus on feelings, here and now)

JB: being bottom of everything

Therapist: umh
• JB: Trampled on ......not listened to....I always say sorry eventually...and then well....I’ve lost again...and everyone knows that they can just trample all over me, cos I’ll give in...I’m always bottom of the heap
• Therapist Not a nice place to be or a nice way to feel... (focus on feelings)
• Pause
• JB: No ....
• Therapist: Can we stay with this ....this feeling of being at the bottom.....the lowest of the low......perhaps ....(focus on feelings)
• JB: .......I get all the shit......all of it...... (tears) ..I’m not worth anything....no body cares about me..
• Therapist: all alone......no one cares...wanting your mum....? (understanding hypothesis)
• JB: yeah...but she was never there.....you know....
• Therapist: a bit like how you felt on Saturday......you feel that now with me....(focus on feelings)
• JB: yeah... no one ever gave a toss about me, except for my mum....she did care..she just couldn’t look after me....she were too poorly....sick...I realized later she was a big drinker ......

• Therapist: and you feel cut off from her...this is a big feeling for you....big because of her ashes....big because it’s been there running deep inside for many years .....(focus on feelings, linking)
• JB: I always wanted my mum…….it’s a terrible feeling

• Therapist: this hope that you would get her back
          ........but now you’ve lost her again.......her
          ashes......her..... and you don’t know where she is.......like
          a little girl abandoned...... I’m not sure if that’s right or it’s
          a bit much (understanding hypothesis, linking)

• JB: No,....that’s exactly how I feel......
The bigger picture

- Therapist: this feeling was unbearable on Saturday.....feeling alone and unloved
- JB: uh......yes......
- Therapist: and you feel it here (pointing to middle of tummy)
- JB: yes like somethings missing inside
- Therapist: sometimes when we face something.....with someone...something big.....it becomes....less big......less overwhelming......and when it’s less big..we can find ways to deal with it.....
A simple model of experience

- Genetics
- Physiology
- CSA Neglect Loss
- Parental Modelling of illness and behaviour
- Experience
- GP Medic Visits
Hobson’s model

- “Near fusion of body and mind experiences”
- Memories are stored and recreated as images
- Memories are approximations and are reconstituted and re-worked
- Feeling is important in decision making but is often out of conscious awareness
- We react to outside experiences and inner memories with feelings before time to ‘think’
- Our self is a stream of consciousness which may be grounded more in feeling states
“But who shall parcel out
His intellect by geometric rules
Split like a province into round and square?

In weakness, we create distinctions, then
Deem that our puny boundaries are things
Which we perceive, and not which we have made”

Wordsworth The Prelude
(R F Hobson, 1985, Tavistock, London)

Intimacy and Alienation: Memory, Trauma and Personal Being.
(R Meares, 2000, Routledge, London)

The Metaphor of Play: Origin and Breakdown of Personal Being (3rd Edn).
(R Meares, 2005, Routledge, London)

The Conversational Model
Tavistock Vidoetapes: Hobson and Margison