Short-term Psychodynamic Therapies for Somatic Symptom Disorders

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Reference Materials

- *Reaching through Resistance.* Detailed manual on ISTDP psychodiagnosis and treatment with case examples
  - [www.reachingthroughresistance.com](http://www.reachingthroughresistance.com) Available on Amazon: http://a.co/3UGMWx0

- Graded Format article on capacity building:
  - [http://bit.ly/2gVT7iB](http://bit.ly/2gVT7iB)

- Article on Resistance

- *Hidden from View: A clinician’s guide to Psychophysiological Disorders*

- Written with a Mindbody expert internist Howard Schubiner and written for doctors

- How to educate, provide first and second line treatments and basic ISTDP methods.

- Coming out end of 2017-early 2018

- [www.unlearnyourpain.com](http://www.unlearnyourpain.com)

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Evidence

5 diagnosable mechanisms of Somatic Symptom Formation

Treatment pathways
Direct Assessment and Treatment of Emotional Factors in Psychosomatic Conditions: Dr. Allan Abbass

Director of the Centre for Emotions and Health at Dalhousie University in Halifax, Canada Allan is a leading teacher and researcher in the area of Short-Term Psychotherapy, and author of *Reaching through Resistance: Advanced Psychotherapy Techniques*, 2015.

Thursday, December 7th, 2017 8:30 am – 5:00 pm
Breakfast and Lunch is Provided
Helen Wood Hall Auditorium
School of Nursing Auditorium 1W-304
255 Crittenden Blvd., Rochester, NY 14620
Online Registration and Additional CME Course Information
http://www.cvent.com/d/jtq885

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Meta-analysis of Short Term Psychodynamic Psychotherapy for Somatic Disorders
Abbass, Kisely & Kroenke, 2009

23 Studies: broad range of conditions

- Medium to Large Effect Sizes vs controls increased over time

- Emotional Experiencing more effective than Insight focused models (ES: 0.60 to 1.31)

- We are process of updating this review: expect 40+ studies.
Intensive Short-term Dynamic Psychotherapy: Davanloo (+ Malan)

- Within the context of forming therapeutic attachment, unprocessed feelings about previous attachments are activated.
- This allows one to directly diagnose *unconscious* emotional contributors to somatic symptoms stemming from attachment trauma.
- Treatment: handling avoidant responses, building reflective capacity and enabling the somatic experience of unprocessed feelings about attachment trauma.

- 15 published outcome studies
- 7 Randomized Controlled Trials 8 Case Series
- Cost reduction >>> treatment cost
- Urethral Syndrome/ Pelvic Pain, Back Pain, Functional Movement Disorders, Chronic Headache, Pseudoseizures, Chronic Pain (3 RCTs) Irritable Bowel Syndrome, Mixed MUS (2 studies), Atopic Dermatitis, Bruxism, Functional Neurological disorders
- Effects are medium to large and sustained in follow-up (Town and Driessen 2013)
- Outperformed Mindfulness-based Stress Reduction for Chronic Pain
ISTDP vs Mindfulness based Stress Reduction for Chronic Pain Chavooshi et al, 2015

Fig. 1. NPRS results. ** $p < 0.01$; *** $p < 0.001$. 
Total Doctor and Hospital Costs/ patient: N=890

17X cost offset

Case
Control

Normal Population Costs

Abbass, et al 2015, J Psychiatric Research
Pseudoseizures

N=28, 3.6 sessions of ISTDP Russell et al, 2016

1 yr pre 1 yr post 2 yr post 3 yr post 4 yr post

Hospital Costs

Doctor Costs

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BOND
With Parents
BOND With Parents  
Trauma  
PAIN FEAR
BOND With Parents

Trauma

PAIN FEAR

Rage, Guilt about the Rage
BOND With Parents

Trauma

PAIN FEAR

Rage, Remorse about the Rage

Diffuse Symptoms Character disorder

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Therapist/Doctor

Past person

Current person

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2. Monitor responses

Unconscious Defense

1. Focus on Feelings or Defenses

Unconscious Impulses & Feelings

Unconscious Anxiety
Main patterns and treatment

- Voluntary muscles tense up, defend and detach
  - HELP TO SOMATICA\ALLY EXPERIENCE THE FEELINGS

- Go flat with smooth muscle anxiety

- Go flat with motor conversion

- Go flat with cognitive perceptual disruption
  - BUILD CAPACITY THE FEEL THE FEELINGS: anxiety
    shifts to voluntary muscles
  - THEN EXPERIENCE THE FEELINGS
1. Striated Muscle Unconscious Anxiety

- Hands Clench
- Arms, Shoulders, Neck
- Intercostal: Sigh
- Abdomen, back
- Legs and Feet

→ Fibromyalgia, tremor, tics, headache, chest pain, abdominal wall pain

See with Intellectualization about feelings
2. Smooth Muscle Unconscious Anxiety

- Gastrointestinal
- Blood Vessels
- Airways
- Bladder

→ Abdominal Pain, Irritable Bowel Syndrome, Dyspepsia, Migraine
→ Absence of Striated muscle anxiety
→ Mediated by (unconscious) Repression of feelings
3. Cognitive-perceptual Disruption

- Dissociation, losing track of thoughts, poor memory, fainting
- Visual blurring, blindness
- Dysfunction of other senses
- Hallucinations in all 5 senses: Can perceive Pain
- Neurological presentations
- Seen with Projection of feelings and impulses
4. Motor Conversion

- Muscle weakness
- Neurology Consultation and Emergency Departments
- Seen with Repression
Unconscious Anxiety

Conscious Feelings

Threshold to Repression or Cognitive perceptual disruption

Threshold to experiencing impulse/feelings

Severe Repression
Moderate Repression
Mild Repression

Striated Muscle Anxiety Isolation of Affect

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1. Pressure to feelings or to defenses
2. Rise in complex transference feelings and anxiety
3. Intellectual recap to bring isolation of affect
5. Sympathy symptoms

- Guilt about rage causes the same symptoms as a person unconsciously wanted to induce in another.

- Common Examples:
  - Strangling → Choking
  - Head damage → headache

- Greater than 1000 videotape case examples
Somatic pathways of impulses and feelings

- Love: warmth in chest and urge to embrace
- Grief: tears and thoughts of loss
- Rage: upward heat and energy to chest then hands then neck and head: urge to do violence
- Guilt: distinct waves of painful feeling with upper body pain and thoughts of remorse
Inhibitory Forces Go Down

Somatic Rage Goes up same system
Attachment efforts mobilize feelings about old attachments.

These unprocessed feelings can activate a spectrum of somatic symptoms.

This process can be diagnosed directly.

Experiencing the feelings can reduce or remove the symptoms and need to suffer (character change).

Diagnostic and treatment implications for psychosomatic disturbances.