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THE PSYCHODYNAMIC ASPECTS OF COMBINED PSYCHOTHERAPEUTIC AND PSYCHOPHARMACOLOGICAL TREATMENT

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Scientific studies revealed that combined psychotherapeutic and psychopharmacological treatment may be more effective than psychotherapy or psychopharmacology separately. In clinical practice there is lack of integrity in psychological and medico-biological view. The artificial division of psychiatrists into psychopharmacologists and psychotherapists may be interpreted as the expression of competitive infant emotions that were not experienced through and were deferred.

During the course of psychotherapy the prescription of psychotropic drugs is based on the three main principals:

1. combined therapy is more effective than psychotherapy alone;
2. psychotherapists, who have no skills and knowledge in psychopharmacology, must be in contact with psychiatrists;
3. psychotherapist must understand the subjective meaning of prescription of psychotropic drugs for his patient.

From the psychodynamic viewpoint, therapy is regulated based on a complex feeling shared and experienced by the patient and psychiatrist during the therapeutic process as well as an in-depth comprehension of psychological phenomena:

1. the psychiatrist, who prescribed the medications, can become the object for intensive transference feelings;
2. on the other hand the prescription of psychotropic drugs may be determined by powerful and not realized completely emotions (i.e. anger, anxiety, hopelessness, traumatic narcissistic injury) of psychiatrist;
3. the patient's resistance to the treatment, refuse to collaborate, denial of disease is intensive phenomenon in psychotherapy as well as in psychopharmacology and disturbs creation of safe therapeutic alliance.