

Intensive Short term Dynamic Psychotherapy

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Why do patients come to us?

1. Interpersonal difficulties in relationships
2. Symptoms that include traditional psychological problems like anxiety and depression,
3. Also include medically unexplained symptoms such as headache, shortness of breath, diarrhea, or sudden weakness

Psychodynamic Theory

Psychodynamic theory suggests that all repressed feelings and reactions to the **rupture of significant relationships** lie at the root of Neurotic suffering .

Dr Habib Davanloo the founder of ISTDP believes “that the vast majority of neurosis stems from the patient’s **conflictual feelings within family relationships**.”

John Bowlby's Attachment Theory

The origins of attachment theory came from Bowlby's observations that both human and primate infants go through a clear sequence of reactions when separated from their primary caregivers. Bowlby observed three stages of this separation anxiety.

Protest stage

Despair

Detachment

- The origins of **attachment theory** came from Bowlby's observations that both human and primate infants go through a clear sequence of reactions when separated from their primary caregivers. Bowlby observed three stages of this separation anxiety.
 - When their caregiver is first out of sight, infants will cry, resist soothing by other people, and search for their caregiver. This stage is the **protest stage**. As separation continues, infants become quiet, sad, passive, listless, and apathetic. This second stage is **called despair**. The last stage—the only one unique to humans—is **detachment**.

❖ During this stage, infants become emotionally detached from other
people, including their caregiver. If their caregiver (mother) returns, infants will disregard and avoid her. Children who become detached are no longer upset when their mother leaves them. As they become older, they play and interact with others with little emotion



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- ❖ An assumption of attachment theory is that a bonding relationship (or lack thereof) becomes internalized and serves as a mental working model on which future friendships and love relationships are built. The first bonding attachment is therefore the most critical of all relationships.

INSECURE VS SECURE ATTACHMENT STYLES

All **securely** attached infants are confident in the accessibility and responsiveness of their caregiver, and this security and dependability provides the foundation for play and exploration. In an **anxious-resistant** attachment style, infants are ambivalent. The third attachment style is **anxious-avoidant**. With this style, infants lack the ability to engage in effective play



PSYCHODYNAMIC Explanation

attachment



Pain and fear



trauma

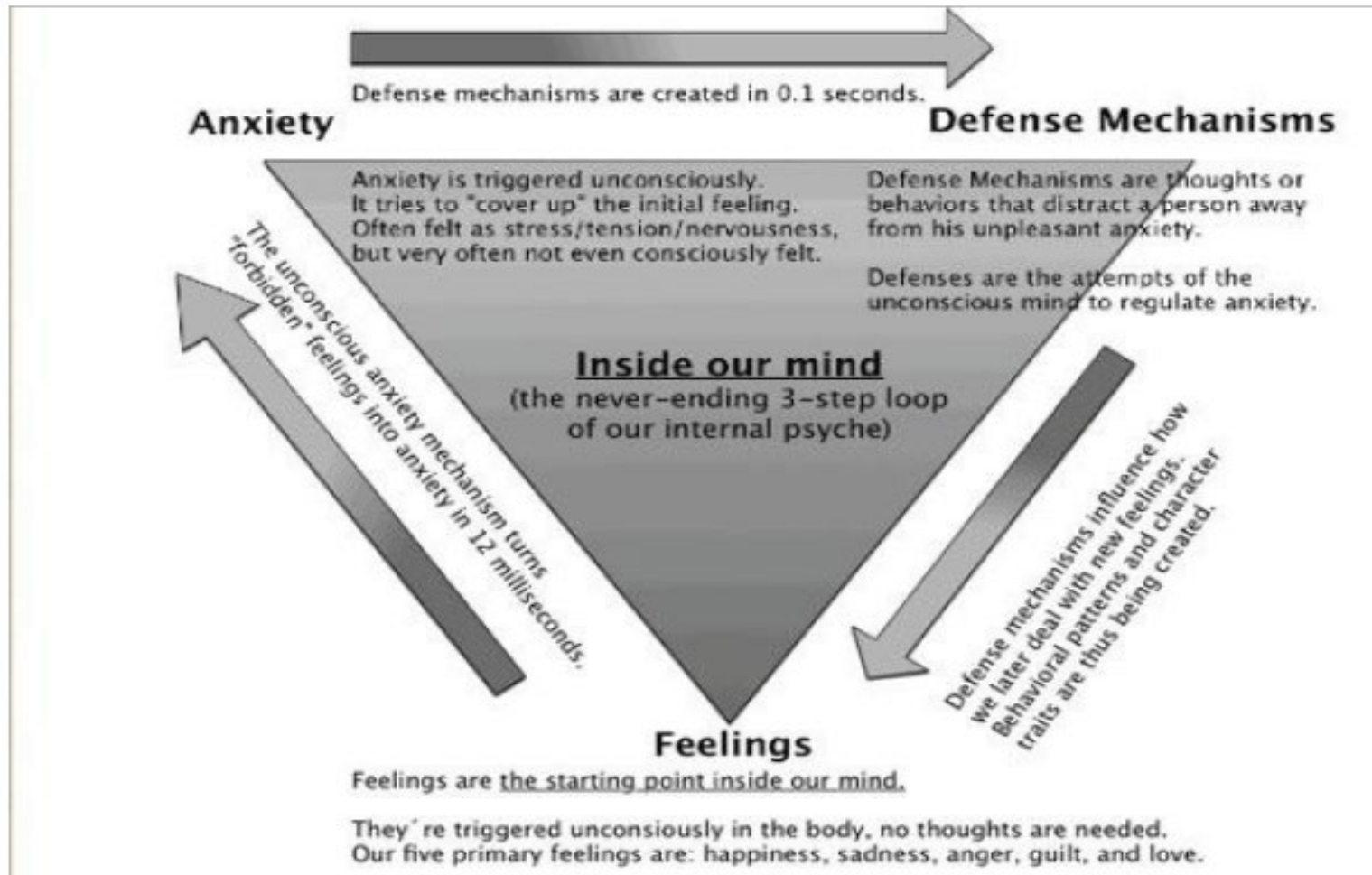
Rage and guilt



Psychopathology
Self destructive



Triangle of conflict



transference

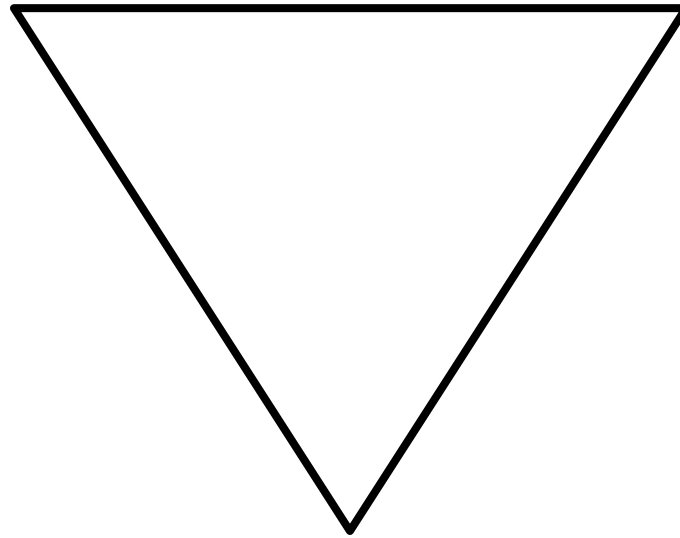
Th. Transference is the carrying over of emotions and attitudes from the past into relationships with present-day people.

It is inspired not by the reality situation, but by previous **happenings in former relationships** that go as far back as childhood.

TRIANGLE OF PERSON

Transference
(Therapist/
Doctor)

Current
person



Past
person

The therapist's efforts to get to know the patient's true feelings often aroused a simultaneous mixed feeling in the patient, composed of deep appreciation for the therapist's relentless efforts to get to know the patient deeply, combined with equally deep irritation at the therapist for challenging the patient to abandon **long-held resistances** which could thwart the therapeutic effort.

RESISTANCE

Despite our best intentions and the most heroic efforts, even where patients express hope and determination to conquer their problems, they may sometimes be unwilling to change them. Personality change is painful as progress takes hold



Signs of resistance

Fatigue, listlessness; inhibitions in thinking, lapses in memory, prolonged silences, avoiding eye contact, intensification of complaints, cancellation, coming late, pervasive self-devaluation, resentment, suspiciousness, aggression, forced flight into health, spurious insight, indulgence in superficial talk, engagement in irrational acts and behavior may occupy patients to the detriment of their progress.

ISTDP

Intensive short-term dynamic psychotherapy (ISTDP) is a form of brief psychotherapy, developed by Dr. Habib Davanloo of McGill University, taught in several international training programs.

Dr. Habib Davanloo, a psychiatrist and psychoanalyst from Montreal grew frustrated with the length and limited efficacy of psychoanalysis. He video recorded patient sessions and watched the recordings in minute detail to determine as precisely as possible what sorts of interventions were most effective in overcoming resistance, which acts to keep painful or frightening feelings out of awareness and prevent interpersonal closeness.

Unconscious Therapeutic Alliance

Davanloo's major discovery

The unconscious healing force

Mobilized by activating the complex transference feelings

Works to oppose the resistance

Brings mental images of past relational trauma and clear linkages to trauma

Ongoing Functions of the UTA

Keep eye on the defenses

Share insights with therapist

Keep remembering

Keep images in mind until guilt passes

Flashes of the unconscious

Dreams that are memories or breakthroughs

A voice or presence in the mind guiding healthy activity

Memory and Emotion Systems

Mid rise
in CTF

High rise
in CTF

Partial
unlocking

Major
unlocking

R >> **UTA**

Whispers from
the alliance:
concise
understanding
of dynamics

R > **UTA**

Negation,
slips of the
tongue

R < **UTA**

Rage, grief:
clear linkages

R << **UTA**

Rage and Guilt:
image transfer

R= Resistance

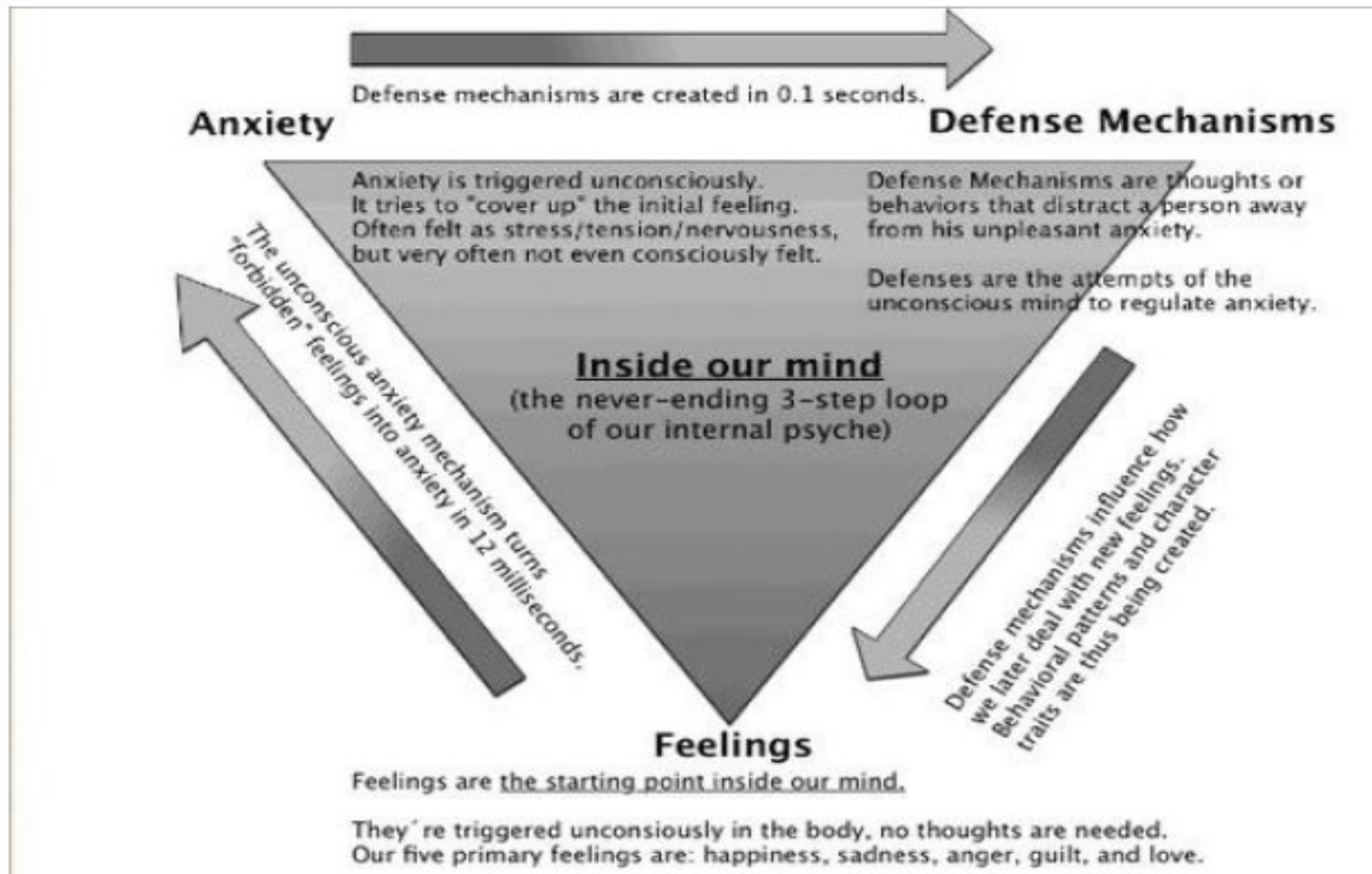
UTA= Unconscious Therapeutic Alliance

ISTDP's primary goal is to help the patient overcome internal resistance to experiencing true feelings about the present and past which have been warded off because they are either too frightening or too painful.

The technique is **intensive** in that it aims to help the patient experience these warded-off feelings to the maximum degree possible;

it is **short-term** in that it tries to achieve this experience as quickly as possible; it is **dynamic** because it involves working at unconscious forces and transference feelings

Triangle of conflict



Experiencing the feelings: overrides the symptoms

Rage: Upward heat or energy sensation. From feet up to neck then down arms

Urge to grab and do some form of violence

Guilt: Chest constriction and pain with thoughts of remorse.

Grief: pain with thoughts of loss, tears, longing for the lost person.

Love: warm sensation expansion in chest, urge to embrace

Steps to breakthrough to the unconscious

Step 1 Identifying the feeling

Step 2 experiencing the feeling in the Body

Step 3 Experience of an impulse that goes with the experience of the bodily experience of the feelings

NOW WE ARE READY FOR THE BREAKTHROUGH



Build awareness about anxiety and symptoms

When patients can self-reflect on emotions, the anxiety reduces

Patient becomes aware of how he or she punish themselves for experiencing feelings

They are encouraged to turn against self sabotaging behaviors as they experience their true feelings

THANK YOU