



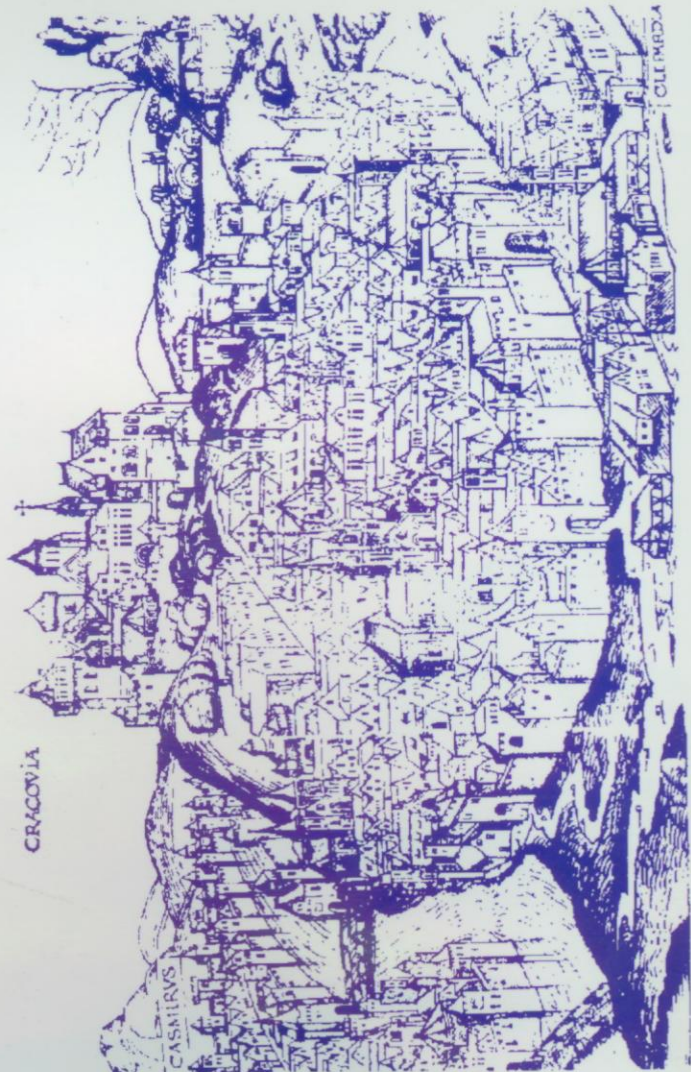
# 14<sup>th</sup> WORLD CONGRESS

of the World Association for Dynamic Psychiatry

Co-sponsored by the WPA, WASP and WAPR

## TRAUMA - ATTACHMENT - PERSONALITY

### Different Approaches, Different Paradigms



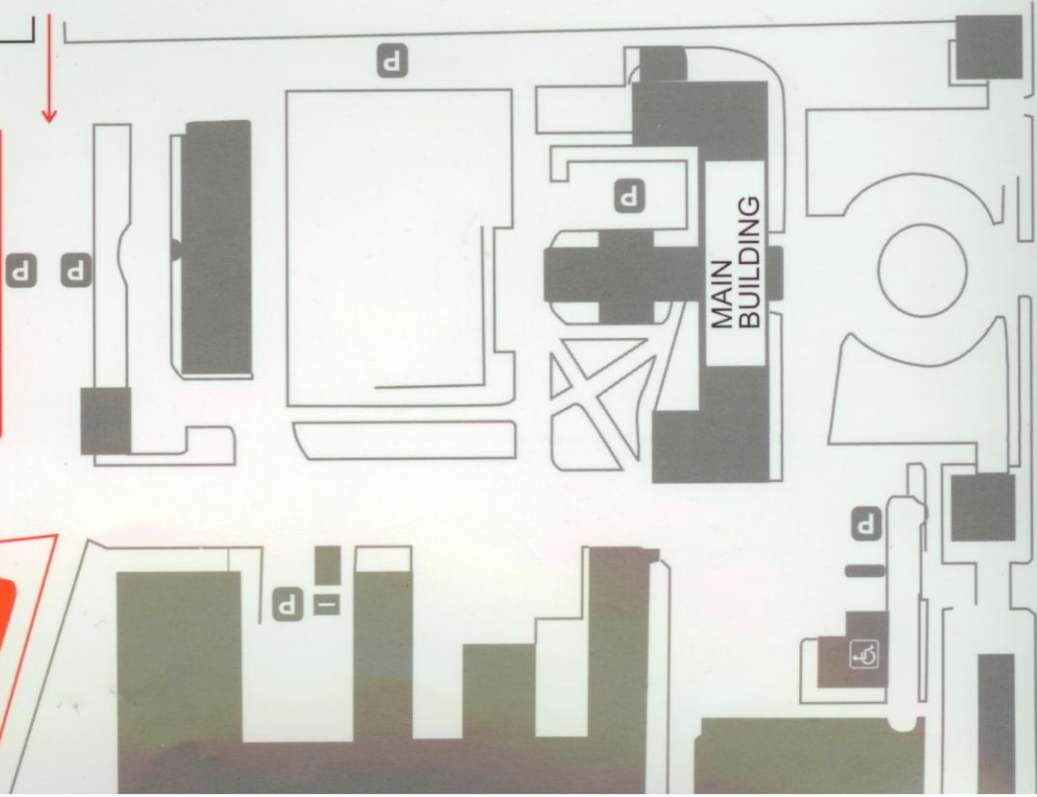
BOOK OF ABSTRACTS

Lubomirskiego St.

CONGRESS VENUE

PRECONGRESS

Entrance from Lubomirskiego St.



## THE UNDERSTANDING OF TRAUMA, ATTACHMENT AND PERSONALITY DEVELOPMENT IN DYNAMIC PSYCHIATRY

Maria Ammon lecture in opening ceremony

First of all the author describes the close connection of attachment disturbances and early traumatizing in the primary group in early childhood for causing severe early personality injuries and psychic disturbances. This understanding of psychic illness is the fundamental basis for the holistic personality concept and the treatment of Günter Ammon's Dynamic Psychiatry in approach. From this understanding man is seen in his wholeness and uniqueness with special consideration of his creative potentials and abilities. The treatment goal is the development of identity and to help the patient establishing a life-worth life. A reliable relationship with a surrounding group of psychiatrists and psychotherapists and in the whole a constructive social energetic field is necessary for a reconciliating treatment of early traumatized patients. Of central importance for treatment in dynamic psychiatry are therefore the concepts of constructive aggression, the unconscious as area of creative possibilities, a holistic personality concept, the understanding of health and illness with the gliding spectrum of archaic ego diseases, the concept of social energy, the multidimensionality and androgyny of man, and a multidimensional diagnostic and treatment concept.

## PSYCHIATRIST-PATIENT RELATIONS – AN ISLAMIC PERSPECTIVE

Oren Asman symp.# 33

A psychiatrist treating a Muslim patient, and the Muslim patient himself sometimes face dilemmas which are directly linked to the teachings of the Islamic religion.

One Problem is the need to avoid *Khalwa* (seclusion) of the Psychiatrist and Patient of the opposite sexes. This may be solved by a presence of a nurse or a female relative during the treatment – a solution that infringes medical confidentiality and the intimacy of treatment. In cases where psychotherapy is involved in the treatment, the patient often reveals sensitive information regarding others, including his family, which might contradict the Islamic prohibition to gossip.

A Muslim Patient living in a non-Muslim society may need to be treated by a non-Muslim psychiatrist. This can become a more serious problem when the non-Muslim psychiatrist is to decide on medical matters which have an effect on Islamic religious worship such as the *Ramadan* fast and the *Hajj* (Pilgrimage).

This presentation will reveal some of the Islamic-oriented professional dilemmas, and offer some of the modern religious solutions to those problems, which balance between the religious teachings and the practices of contemporary psychiatry.

## DYNAMIC PSYCHIATRY (PSYCHOTHERAPY) DEPARTMENT OF THE ORENBURG MENTAL HOSPITAL

Serguei M. Babin, Lev M. Portnov, Mikhail I. Shlafer, U. Pustoin symp.# 6

Orenburg region belongs to those regions of Russia where psychotherapeutic inpatient care in mental hospitals has been developing most intensively. In 2001 in the Regional Mental Hospital 2 there was organized Dynamic Psychiatry (Psychotherapy)

Department. It patterned its structure after the model Dynamic Psychiatry Meterschwaige, organized by Mr. G. Ammon (Munich, Germany).

Psychotherapy is the most important component of the treatment providing several forms of psychotherapeutic communication, thus we differentiate individual, group and family interaction. At present the specialists of our I apply different kinds of psychotherapy: verbal supportive therapy, arts therapy, dancing therapy, theatre therapy, sand therapy, fairy-tale therapy; various types of interaction therapy with psychodramatic elements and projective group discussions.

Recently there has been introduced milieu (environment) therapy. Therapists develop a professional psychotherapeutic community.

The specialists of Dynamic Psychiatry Department are engaged in research methods study, focused in the introduction and development of the dynamic in other regions of Russia.

Thus, it's possible to say that Orenburg Regional Mental Hospital 2 has adjusted of the specific dynamically-oriented model of inpatient psychotherapy for mental patients.

## THE DIARY AND PSYCHOTHERAPY OF A YOUNG DYING HODGKINS PATIENT

Claus Bahne Bahnson workshop

A very young woman, half child, half woman got diagnosed with Hodgkin's disease as she lived alone in a large city far away from her family, that had emigrated to a southern island after the crash of her fathers business. Presented to me for work-up, the tremendous need for therapeutic help became obvious, and a period was initiated, that lasted the 6 months until the day of her death.

The patient, unknown to the therapist, at first, wrote a detailed emotion diary. The therapist, of course, wrote his therapeutic notes. The patient's notes were read to the therapist until the patient gave them to him the day of her death.

The workshop will make use of these double exposures to the intense reactions to the defenses they reflect in order to understand better what the most difficult seem to be in the early encounter with the threat of death, both for patient and therapist. The intense and emotional transference and counter-transference reactions, „holding“, role in the threat situation, as well as the palette of deep questions, values, fatalism, belief, rage, and an array of defensive attempts will be discussed in the light of the relationships between the family break-down and the disease onset. The workshop will focus on the choice of defenses, and the bonds of this sick and wise young woman.

Participants in the workshop can bring their own relevant material for inclusion in the discussion, and the themes of therapy with sick somatic patients and the special problems they bring both for the patient and for the therapist may be dealt with.

## TRAUMA AND RESPONSE IN SERIOUS SOMATIC ILLNESS

Claus Bahne Bahnson symp.# 10

Serious somatic illness always is traumatic for the patient and for the family. How this stress is handled on the part of the patient is dependent on several group dynamical and psychological factors. From accumulated research in

SYMPOSIUM 31 – hall # 9

BORDERLINE PERSONALITY – THERAPY AND RESEARCH

Chair: **D. Hermelink, B. Wasilewski**

**G. Finke**

Outcome and follow-up of the treatment of personality disorder

Ts. **P. Korolenko, E. Zagorujko, T.A. Korolenko**

Self-mutilation, suicide and rage-type violence in patients with borderline personality disorder

**D. Hermelink et al.**

Splitting dynamics of both a borderline patient and the hospital staff within a group dynamic context

**T. Bihler**

Borderline therapy in dynamic psychiatry from the perspective of attachment theory

SYMPOSIUM 32 – hall # 8

FAMILY ASPECTS OF DYNAMIC PSYCHIATRY

Chair: **I. Burbiel, G. Chistie, B. de Barbaro**

**G. Christie, A. Morgan**

A co-therapy couple engage with unexplained infertility

**K. Haehn**

Family Structure (Thoughts about when and under which conditions confidence will be stable and why confidence can partly disappear and how it can be made to return)

**A. Fazekas**

The most important thing is the family should keep together

**J. Bar-el, B. Geiger**

Couples of two people with schizophrenia, an additional burden or a blessing?

SYMPOSIUM 33 – hall # 7

PSYCHOTHERAPY IN CULTURAL CONTEXT

Chair: **I. Tal, R. Primbas, D. Stolarska**

**P. Budzyna-Dawidowski**

Cultural aspects in therapy with a focus on attachment problems of children and adolescents.

**O. Asman**

Psychiatrist-Patient relations – an Islamic perspective

**Ch. Tezuka**

Naikan therapy from a transcultural psychiatry perspective

**R. Bhagat**

Holistic approach of personality disorders in modern era