

TREATMENT AND TRANSFORMATION

Symposium 2011

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PSYCHOLOGICAL CARE OF THE MEDICALLY ILL AND DYING

James J. Strain, MD
Stanley Grossman, MD

OVERVIEW

1. **Basic Universal Stresses.**
2. **Unconscious forces in the Physician.**
3. **Counterphobic Responses in Physician.**

The Sick, Hospitalized, Dying Patient is Vulnerable to Eight Categories of Psychological Stress.

Basic Threat to Narcissistic Integrity

Fear of Strangers

Separation Anxiety

Fear of Loss of Love and Approval

Fear of the loss of control of developmentally achieved functions, (e.g. bowel and bladder control, regulation and appropriate modulation of feeling states).

Fear of loss of or injury to body parts (castration anxiety).

Reactivation of feelings of guilt and shame, accompanying fears of retaliation for previous transgressions.

Fear of Pain

Fear of Death

Stresses Mimic Developmental Stresses

Resilience

Reactions to Stressors

Basic Stresses Can Occur in Physician(s)

Basic Stresses Can Occur in Consulting Psychiatrist

The Prerequisites for Successful Adaptation to Illness, Hospitalization, and Death

- 1. Ability to regress adequately in the service of recovery or dying.**
- 2. Ability to maintain adequate defenses against the stresses evoked by illness, hospitalization, and impending death.**
- 3. Access to feelings and fantasies and ability to communicate needs.**
- 4. Basic trust in medical caretakers.**
- 5. Services of empathetic and flexible physicians and caretakers.**

The Physician's Response to the Dying Patient

James Spikes, MD

Jimmie Holland, MD

Unconscious Fantasies of Omnipotence

The Powerful Healer

1. Become Angry

2. Wish the Patient Would Die

3. Over treatment

The Indestructible Self

The Destructive Force

- 1. Give up so as not to hurt patient**
- 2. Transfer the patient**
- 3. Project disappointments on to psychiatrist.**

The Psychiatrist's Reactions.

1. Becomes angry.

2. Unwarranted acceptance of the total emotional care of the patient.

Counterphobic responses in Physicians - Caretakers

THANK YOU