

IEDTA CONFERENCE 2019, BOSTON MASSACHUSETTS, U.S.A.



- “New Frontiers in Experiential Dynamic Therapy”
- Thursday 26 September to Saturday 28 September 2019

Saturday 28 September

In-Patient and Group Treatment with EDT

9:00–10:20: sessions

10:20–10:35: break

10:35–12:15: sessions, continued

12:15–1:45: Lunch on your own

IN-PATIENT AND GROUP TREATMENT WITH EDT

- 9.00– 9.10 hrs.: Introduction
- today's subject: inpatient and group treatment in residential settings.
- 9.10 – 9.55 hrs.: Presentation of Kirsty Lamb: Using ISTDP in Groups: Structured Group Therapy

- 9.55 - 10.00: Questions, discussion concerning presentation of Kirsty Lamb.
- 10.00 – 10.20 hrs.: Presentation of Filip Myhre: Working well with ISTDP in an inpatient unit both as a novice and experienced therapist.
- 10.20 – 10.35 hrs.: coffee break.
- 10.35 – 11.00 hrs.: Presentation of Filip Myhre – continued.
- 11.00 – 11.05: Questions, discussion concerning presentation of Filip Myhre.
- 11.05 – 11.50 hrs.: Presentation of Kees Cornelissen and José Verpoort: ISTDP-House, An ISTDP based Day-treatment & Group Therapy Program
- 11.50 - 11.55: Questions, discussion concerning presentation of Kees Cornelissen and José verpoort
- 11.55 – 12.15 hrs.: Panel discussion concerning all presentations with emphasis on differences and likeliness of the presented models of treatment



SUMMARY OF THE FIRST PRESENTATION

BY KRISTY LAMB

- In this session we will overview a model of structured group therapy by looking at how to set the frame for emotion focused therapy in the group setting, the three primary goals of early treatment including declaration of will, anxiety regulation, and identification of defenses, and common pitfalls to watch out for working in groups. In order to facilitate understanding we will review a video of this group process in action.

PRESENTATION I; LEARNING OBJECTIVES

Presentation Kristy Lamb

- Identify 5 common mistakes in group therapy and how to prevent them
- Understand the 3 most important unconscious meanings of speaking up in group therapy
- Conceptualize group therapy using a framework of ISTDP

VIDEO PRESENTATION



SUMMARY OF THE SECOND PRESENTATION

BY PHILIP MYHRE

- The Thorsberg-studies showed promising results with a treatment-resistant population. The therapists were fairly new to ISTDP at the time. We will discuss benefits working at inpatient units and working with patients in groups. We will see patients benefiting from work with a therapist fairly new to ISTDP. This will be contrasted by the possibilities coming with a more complex understanding of the model.



PRESENTATION II; LEARNING OBJECTIVES

Presentation Filip Myhre

- Recognize how you can adjust the complexity of your interventions according to your level of skills in ISTDP.
- How to work with ISTDP in an inpatient unit with a treatment resistant patient population.
-

VIDEO PRESENTATION



SUMMARY OF THE THIRD PRESENTATION

BY KEES CORNELISSEN & JOSÉ VERPOORT

- In ISTDP-House we initiated a daytime treatment program, based on ISTDP, for patients with therapy resistant personality disorder in Cluster-C (DSM-V). In our presentation we show video vignettes of one patient from the group in which the work of all professionals (psychotherapist, arts therapist and sociotherapist) is included in order to demonstrate how a multidisciplinary setting can produce optimal effect. Our program exists for one and a half year, here the first results will be presented.



ISTDP-HOUSE

A SHORT INTRODUCTION

-
- Short history
 - R-ISTDP continued



TREATMENT MODEL

- ISTDP- based
- Three Modules, three phase in treatment
- The treatment program in short
- Four central Foci;
 - treatment of the Superego
 - Breaking up with Projection & other pillar defences
 - Regulation of Anxiety,
 - Processing of Emotion
-

HOW IS OUR PROGRAM DESIGNED?

DURATION: 1 YEAR.

3 MODULES.




MODULE I – 4 MONTHS.

Intake

- Information gathering (digital).
 - 3 sessions individual ISTDP-based therapy
 - 1 systemic therapy based intake.
 - Psychiatric evaluation.
-

Individual sessions: - 1 ½ hours – every 2 weeks.

- groupsessions – every 2 weeks: body work (non-verbal therapist)
 - making a signalling plan.
 - when indicated: systemic therapy.
- 

MODULE 2 – 3 MONTHS

3 consecutive days in the week.

From 9.30 – 16.30

Psychotherapy, Sociotherapy, Art therapy and Movement therapy.

When indicated: systemic therapy.

When indicated: psychiatric consultation.

MODULE 3 – 5 MONTHS

3 months: Group therapy – weekly – 3 hours.

Every week: group psychotherapy.

Every other week: either sociotherapy or arts therapy.

2 months: Individual therapy with own psychotherapist.

On indication: systemic therapy, arts therapy or sociotherapy

PRESENTATION III; LEARNING OBJECTIVES

Presentation Kees & José, participants has;

- learned that group treatment with ISTDP is helpful for a range of psychopathology.
- learned that patients in a group are able to heal each other in understanding the triangle of conflict.
- learned that beginning ISTDP therapists do have results with even more difficult pathology.



THE PATIENT

- Woman, single, 30 years old, School Teacher
- Diagnosed as Borderline (High level), Mild Depression, Generalized Anxiety and Panic Attacks (occurred not in treatment)
- Family; Mother died 12 years ago, Parents divorced when patient was 5, one sister, symbiotic relation pattern with the mother, father remarried, showed not much interest in his children
- Problems with Attachment, Intimacy and Closeness & with having an Independent Life of her Own
- Former treatment CBT and MBT for three years, day treatment
- Is on medication (setraline 5 mg p.d (ssri), mirtazapine 7.5 mg p.d. oxazepam 10 mg, when needed)
- Functions as mother's crutch, parentified, Mother is still more important than Patient
- Anxiety regulated in striated muscles, patient benefitted from former therapy
- Tactical Defenses; Looking away, Being vague and general, Intellectualization, Diversification, Rumination, Leading to major defenses s.a.; Resistance Against Closeness (REC), Repression & Controlling, Self Attack (bad girl, not important, no rights for herself)



ISTDP-HOUSE

AN ISTDP BASED DAY-TREATMENT & GROUP THERAPY PROGRAM BY KEES CORNELISSEN & JOSÉ VERPOORT

- Part I; initial Interview
- Part II; ISTDP Session, individual with the Group attending
- Part III; Sociotherapy, the Patient in the Group
- Part IV: Art Therapy, the Patient in the Group
- Part V: ISTDP session within the Group



VIDEO PRESENTATION



PART I; INITIAL INTERVIEW

- Short Vignette of our patient
- Purpose of the Initial Interview
- 13 minutes of the First Session, starting at 00:02:57



THE SELECTED SCENES OF THE INITIAL INTERVIEW CONNECTED.

- Fragment I; The patient asks questions about the videocamera since she experiences that as very confrontational, it triggers the idea of being vulnerable and that provokes the rise of her anxiety
- Fragment II; The exploration of her problem continues
- Fragment III; The patient comes to the insight that she started to take care for her mother at a very young age. Mother impressed as a strong woman to the outside world but was feeble and weak at home. The patient realizes herself that she ignored herself for many years, favouring her mother who needed her to function properly. The patient experiences self-compassion. We explore the relationship with the mother. Therapist explains that in another case a patient who cried a lot was confronted with a mother who assessed that as a rejection from the baby towards her and that she lived with this knowledge forever since.
- Fragment IV; The therapist starts working in the T. because there are signals about projective material that draw his attention. Therapist focus on negative experiences the patient has had in her past with being vulnerable and being hurt when she exposed herself to another person

PART II; ISTDP SESSION, INDIVIDUAL WITH THE GROUP ATTENDING



PART III; SOCIO THERAPY, THE PATIENT IN THE GROUP



PART IV: ART THERAPY, THE PATIENT IN THE GROUP



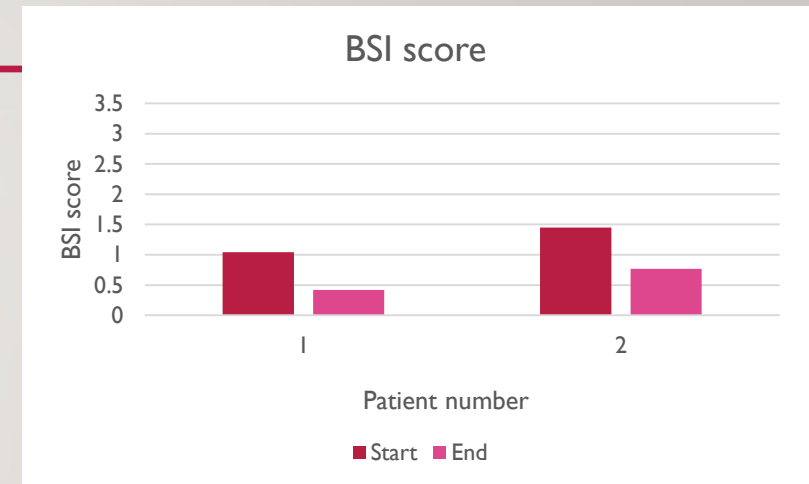
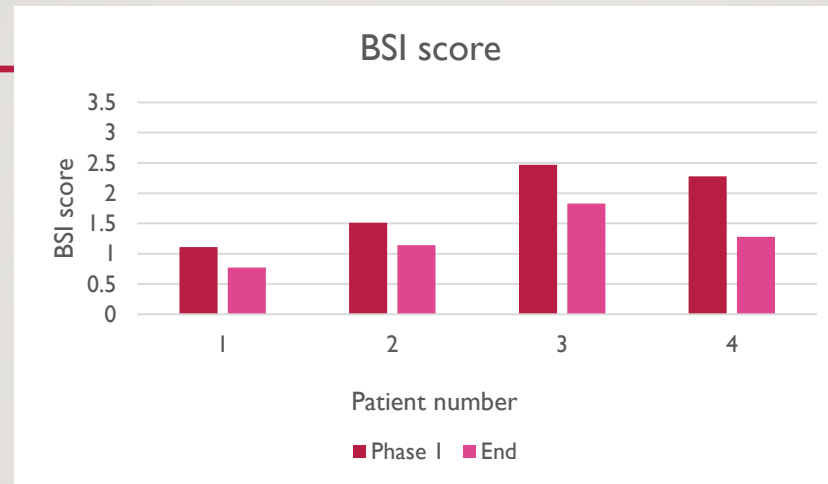
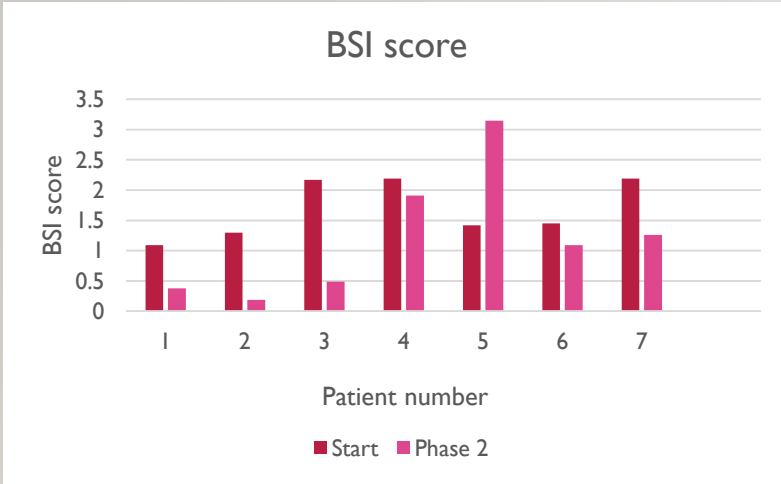
PART V: ISTD P WORK WITHIN THE GROUP-SETTING



ROM – EVALUATION OF EFFECT.

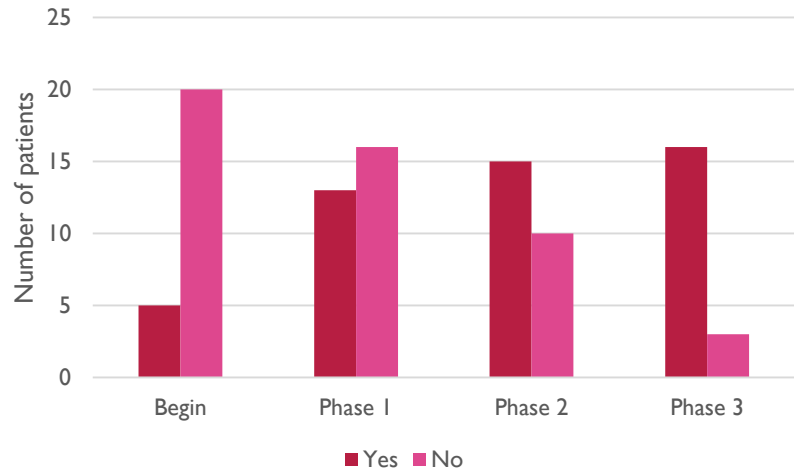
BSI	(Brief Symptom Inventory)
OQ- 45	(Outcome Questionnaire 45)
CORE -34	(Clinical Outcome in Routine Evaluation - 34)
BDI	(Beck depression Inventory)
GDA – 7	(Generalized Anxiety Disorder – 7 items scale)
MBI	(Maslach Burnout Inventory)
CQi	(Consumer Quality Index)

FIRST EFFECTS – BSI

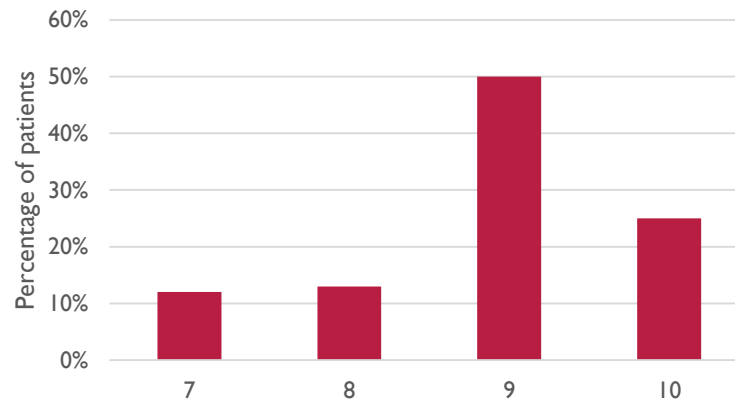


FIRST EFFECTS – CQI

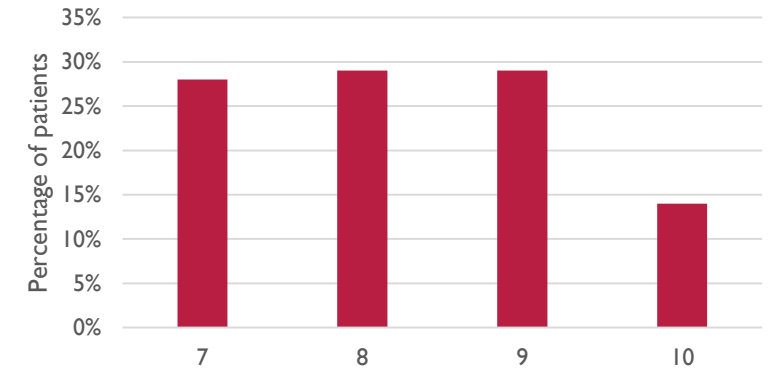
Goals achieved



Would patients recommend treatment (0-10)



Patient satisfaction (0-10)



THE END

- Bergen Op Zoom September 2019, Kees Cornelissen & José verpoort

Save the Date

February 20-21-2020, A Two-day Workshop

ISTDP in Groups

Residential & Day Treatment Group-Psychotherapy

Bergen op Zoom, The Netherlands.

