

Psychotherapeutic Processes in a psychotic patient: A pilot study

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General Objective

Adaptation of the Therapeutic Cycle Model to Spanish language
Specific Objective

To determine the clinical usefulness of the Therapeutic Cycle Model as a guide for the study of psychotherapeutic processes in psychotic patients.

Method

Emotion-Abstraction Patterns EAP (Mergenthaler 1996): The EAP is a computer assisted approach to identify key moments in verbatim transcripts of psychotherapy sessions. The Therapeutic Cycle provides an adequate theory of change.

Key moments are defined as one or more sessions of a treatment or segments within a session that are seen as clinically important.

Emotion-Abstraction Patterns identify cognitive states and are based on the combination of two independent language measures: 1) Emotion Tone measures the density of emotionally tinged words within a text and thus serves as a marker for the activation of emotion schemata. 2) Abstraction measures the density of abstract nouns and serves as a marker for reflective processes, based on linguistic phenomena that allow for the possibility of building abstract terms out of concrete concepts. The pattern CONNECTING indicates Key Moments.

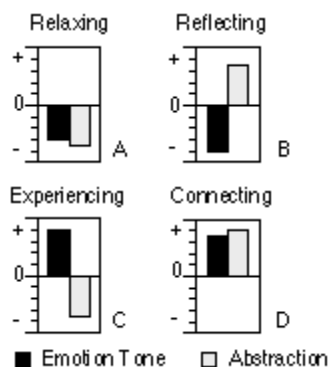


Figure 1: Emotion-Abstraction Patterns

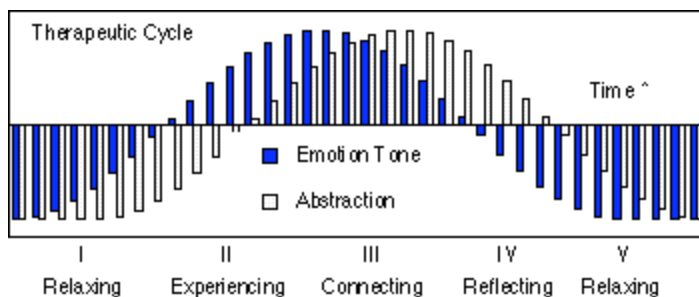


Figure 2: Therapeutic Cycle

Requirements

Transcripts of psychotherapy sessions; a segmentation into word blocks of 150 words each will be done automatically.

Dictionaries for Emotion Tone and Abstraction need to be updated for new texts.

Software Realization: Text Analysis System TAS/C (Mergenthaler 1993); needs an UNIX environment.

Material

Session #78 from a psychoanalytic treatment with a psychotic patient; this hour was considered by the analyst to be a key session and also bearing a key moment.

Results

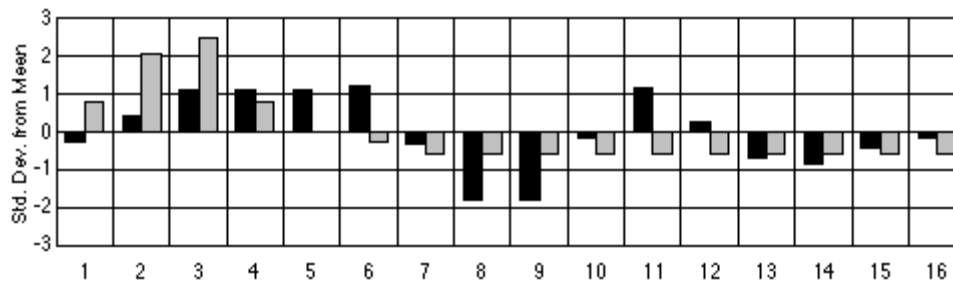


Figure 3: Flow of the EA-Patterns across the session for patient speech only
A Therapeutic Cycle can be observed in word blocks 2 through 4 and the pattern Connecting, indicating a key moment, was due to the fact that the patient ironically repeated the analyst's interpretation on the patient's self destructive tendencies. The irony was revealed through her tone of voice rather than through the words the patient used.

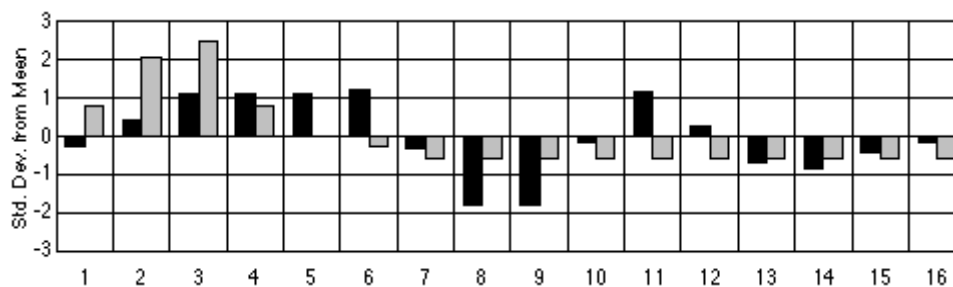


Figure 4: Proportion of speech (patient gray, therapist black)
The therapist was very active and shows many interventions.

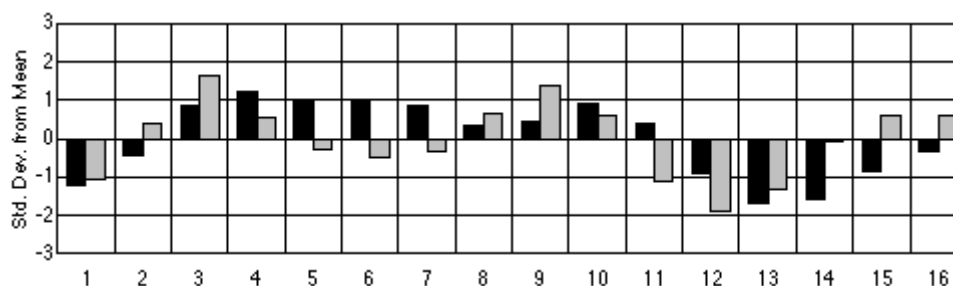


Figure 5: Flow of the EA-Patterns across the session for patient and therapist speech together
The pattern Connecting can be observed in word blocks 3 through 5, and also in word blocks 8 through 10, where the analyst is interpreting the patient's self destructive tendencies.

Comparing this graph to the patients speech in figure 3 clearly shows the analyst's dominating verbal behavior in this patient-therapist dyad: the analyst contribution is determinant.

Discussion

From a clinical viewpoint this session is a key session. This could however not be verified with a macro-analysis for the EA-Patterns as the surrounding or preceding sessions at least were not available as transcripts. The key moment clinically is located close to word block 13: the analyst was paralyzed in his function by the projection of primitive aspects from the patient. But he managed to recover his function by no longer using interpretations, but rather to use a more concrete language style. Thus he became interested in the patient's projection, showing a clinically supportive function as container and promoting some organization within the patient.

Near word block 13 the Connecting pattern, as we would expect for a key moment, does not predominate, rather does the relaxing pattern. The data analysis and the clinical view do not correspond.

Conclusions

1. The method presented here originally was conceived for the analysis of treatments with patients best being described with psychoneurotic or psychosomatic diagnoses. For psychotic patients due to their peculiar use of language "false" Connecting patterns like "irony" may be obtained. This highlights about the need of going back from the graphs to the clinical material, but also supports the discriminative power of the EA-Patterns.

2. Taking into account that the analyst's contribution is determinant here, we suggest to also study the analyst's speech in the light of the Therapeutic Cycle as a means of studying psychotherapeutic processes with psychotic patients: If a therapeutic cycle completely can be found in the therapist's speech he or she is about to trigger the therapeutic process.

3. Another issue that follows from this pilot study is the role of the Relaxing pattern for psychotic patients and its relations to key moments.

Future Work

1. Incorporation of Referential Activity for use with the Cycles Model (Bucci and Mergenthaler). Referential Activity RA is defined as the activity of the system of referential links between verbal and nonverbal representations and thus as the narrative quality of language style (Bucci, 1993). High RA is seen as an important step toward the activation of emotion schematas.

2. Further Development (selection criteria, validity and reliability) of the Spanish Dictionaries for Emotion Tone, Abstraction, and Referential Activity.

References

Bucci, W. (1993). The development of emotional meaning in free association: A multiple code theory. In A. Wilson & J. E. Gedo (Eds.), *Hierarchical conceptions in psychoanalysis*, (pp. 3-47). New York: Guilford.

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