

Psychotherapeutic Approach in Oncological Somatizations

Cristina Lupu¹

Abstract: Treating, with predilection, the problem of the oncological diseases, which take over both the physical and the psychological side, in a marked way, meant to cause significant dislocations in the human existence, the proposed article thoroughly clarifies the sufferings of the mind, transposed through a wide process, in physiological form, the somatic pathology being in a continuous process of intertwining with the psychological pathology, resulting in a broad clinical polymorphism, translated into oncological conditions. In this way, a psychotherapeutic approach, with a regulatory role, is necessary, gradually pursuing the causes of a psychosomatic nature, which gradually establishes the disease, the intervention of psycho-oncology having an indispensable character, adopting a series of procedures at different stages. of the condition, the importance of collaboration with the treating physician, the confrontation with the grim diagnosis, the role of the family in the psychological approach and the compliance with the treatment completing the clinical picture.

Keywords: neurotic psychotrauma; cancer; psychosomatic theories; doctor-psychologist-patient relationship; psychotherapy

Cancer, defined in the specialty literature as “a group of conditions characterized by abnormal and uncontrolled growth of cells, which invade surrounding tissues and can spread far away from the tissue or organ of origin”, remains a constant concern, both in the field of classical medicine, as well as in the psychotherapeutic approaches, following, in particular, both the somatic and the psychological pathology, in order to solve the clinical-medical event, on the basis of which, in particular, there is the psychological conflict, which generates frustrations and ideof-affective complexes, causing physiological disorders. Thus, the oncological

¹ Student, 1 year, Faculty of Communication and International Relations, Specialization Psychology, Danubius University of Galati, Romania, Address: 3 Galati Blvd., Galati 800654, Romania, Tel.: +40372361102, Fax: +40372361290, Corresponding author: lupu.cristina09@yahoo.com.

disorders are closely linked to the emotional sphere of the patient, the role of psychotherapy being to restore.

Psychic balance, through complex, personalized methods, since the psychotherapist's contribution to the healing process is fundamental in treating psycho-trauma, often of neurotic factor, which increases the intensity of the patient's somatic experience, dominated by anxiety, feeling of powerlessness, loss of control and phobia of disease. In this context, establishing the diagnosis of certainty involves clinical examinations, paraclinical investigations and extensive laboratory analyzes, confirmation of the oncological condition causing serious repercussions in the emotional sphere of the individual, the feeling of vulnerability completing the clinical picture, leading, inevitably, to anxiety and depression.

The depression that arises from this diagnosis is so strong that the patient adopts an attitude of resignation, ignoring the progress of surgery and modern methods to fight cancer, any contribution being put at this stage, sign of futility. The disease is perceived as a fatal test, the individual adopting a behavior dominated by passivity and resignation. Thus, psycho-oncology, which "defines itself as an interdisciplinary field that theoretically and practically addresses the psychological, social and medical dimensions of cancer," aims at: recognition of psycho-social and behavioral factors, in relation to malignancies, exploring the psychological impact of the disease, following the affective path of the patient, at each stage of the disease, the necessity of the doctor-patient relationship and the application of the psychotherapeutic knowledge and skills in the care of the oncological patients.

In this regard, the researchers correlated the cancer with a certain behavioral pattern, type C, the important personality traits being submission, tolerance accentuated in relation to the demands of others, repression of hostility, avoidance of conflicts and lack of a categorical point of view, which leads, inevitably, towards a cancerous pathology. The quality of life is degraded, so that, at this stage of the problem, three moments of major importance are highlighted: acceptance of psychotherapy, of the psychiatric material and of the psychotherapeutic situation itself. In this way, following the path described, at the base of the somatic nature disorder there can be insufficient achievement in the plan of human becoming or the feeling of guilt, problems of adaptation to the environment, frustrations, the excessive suffering being transposed from the psychic, emotional, to the physiological plane, the failure situation inevitably leading to illness. Thus, self-hypnosis is encouraged, in order to reduce the pain caused by the aggressive treatments, also approaching the supportive,

group psychotherapy, giving the patient a safe space, “the main focus is on the patient’s relationship with his cancer.

Groups are very anchored in the here and now. In such groups, borders are less rigorous, so that their members have the opportunity to interact and support each other and outside the group.” Connective psychotherapy involves the intervention of a team, consisting of the treating physician, psychologist, medical staff and family, considering, through this treatment scheme, the increase of self-esteem, the increase of personal autonomy, the fight against regression, depression and anxiety, the maintenance acceptable quality of life. At the same time, a category of patients who find themselves in the disease, suffering from severe neurotic trauma is registered. The psychodiagnostic material assumes the character of the condition, establishing the somatopsychic causes. This approach involves classical psychoanalysis, which “recommends in these cases the use of free association, the analysis of the patient’s dreams, the interpretation of his speech, as a means of exploring repressed wishes or childhood inhibitions of the patients. Subsequently, it will start from these in the action of restoring the disturbed balance”. The method of clinical interview is also adopted, which highlights recent psycho-traumatic factors that have caused psychodynamic disorders of psychic life. The psychotherapeutic situation emphasizes the environment in which the psychotherapeutic act takes place, emphasizing the space of intimacy, indispensable in the doctor’s relationship with the patient, as “an unequivocal and comprehensive attitude towards the patient must be adopted. He must feel that the doctor is permanently close to him, that he supports and encourages him. The patient’s trust in the doctor is the condition of the credit given to the healing process. Many patients with somatic disorders from psychic causes come to the psychiatrist psychiatrist, after a long time they have traveled through hospitals, consulting rooms and to doctors of different specialties, without success. They are tired, exhausted, discouraged, often resigned to the situation.” Thus, following the therapy, a relaxation of the intrapsychic tension of the patient is observed, triggering the catharsis procedure, the psychotherapeutic activity involving sustained effort from both the psychotherapist and the patient; the sessions should be stimulating for the patient, not be tiring.

A devastating impact is caused by the treatment phase of the disease, also known as Atlas syndrome, the patient being subjected to numerous efforts to adapt to a variety of aspects related to treatment, family and socio-professional life. This phase has severe biological and psychological consequences, the treatment methods adopted, often chemotherapy, radiation or surgery, altering the self-image, both physically

and psychologically, precisely because of this, psychological assistance takes various forms, adopting different techniques. relaxation and pain control, to reduce emotional reactivity and physical pain, support groups that stimulate emotional expression, guided imaging techniques, cognitive techniques that transform the perception of the disease, counseling to adopt a healthy lifestyle and resources for reintegration into socio-professional and family life, spiritual counseling and transgenerational analysis. It is imperative to recognize the trauma by the patient, in order to start the process of negotiation with the disease, for curative purpose, in order to accept and integrate it, in order to overcome the crisis situation.

The therapist-patient relationship in situations of psychosomatic suffering plays a major role, the psychotherapist doctor having the professional obligation to know the patient thoroughly and the environment in which he / she works, in order to guarantee the success of the clinical act. Thus, the therapist has the task of instilling the feeling of confidence, confidence, in order to suppress the anxiety, opposing the pathogenic emotional burden generated by it. In this context, the therapeutic relationship is seen as a process of becoming, both for the psychotherapist and for the patient, being eminently necessary a good knowledge of the self, as a precursor to the healing act, the human dimension, which is based on empathy, respect for values and options being determinants in the process of change. Therefore, the attitude in coparticipative understanding, tact, avoiding questions in the psychotherapeutic act and suggestions, builds the psychotherapeutic bridge with the patient, looking for optimal solutions of high mobility, to ensure the therapeutic success.

Bibliography

David, Daniel (2006). *Clinical Psychology and Psychotherapy*. Iasi: Polirom Publishing House.

Dumitrache, Sorina Daniela & Mirofan, Iolanda (2012). *From the backdrops of unifying experiential psychotherapy*. Bucharest: Sper Publishing House.

Enăchescu, Constantin (2003). *Treatise on psychoanalysis and psychotherapy*. Iasi: Didactic and Pedagogical Publishing House.

Shoenberg, Peter (2017). *Psychosomatics*. Bucharest: Trei Publishing House.