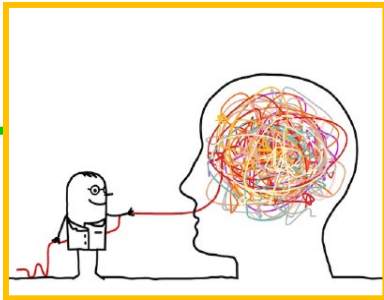


Andrea Ferrero

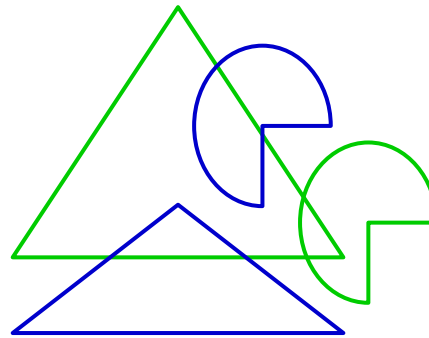


Trattamento dei Disturbi di Personalità Gravi (DPG): Psicoterapie a confronto

Scuola di Specializzazione in Psichiatria,
Dipartimento di Neuroscienze - Università di Torino
AOU Città della Salute e della Scienza di Torino
Società Italiana di Psicoterapia Medica
sez. Piemonte e Valle d'Aosta

1 - 2 dicembre 2017

**Aula Magna A. M. Dogliotti
AOU Città della Salute e della Scienza
Presidio Molinette
Corso Bramante 88 Torino**



Adlerian Psychodynamic Psychotherapies

SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY

Andrea Ferrero: SB-APP

PREMESSE



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY



FATTORI COMUNI DI EFFICACIA DELLE PSICOTERAPIE

SPECIAL ARTICLE

How important are the common factors in psychotherapy? An update

BRUCE E. WAMPOLD

Department of Counseling Psychology, University of Wisconsin, Madison, WI, USA; Modum Bad Psychiatric Center, Vikersund, N

The common factors have a long history in the field of psychotherapy theory, research and practice. To understand them as important therapeutic elements, the contextual model of psychotherapy is outlined. Then the evidence analyses, is presented for particular common factors, including alliance, empathy, expectations, cultural adaptations. Then the evidence for four factors related to specificity, including treatment differences, specific ingredients, is presented. The evidence supports the conclusion that the common factors are important for producing the

Key words: Common factors, contextual model, psychotherapy, alliance, empathy, expectations, cultural adaptations, specific ingredients

(*World Psychiatry* 2015;14:270-277)

Psychotherapy Research, 2014

<http://dx.doi.org/10.1080/10503307.2014.954153>

EMPIRICAL PAPER

The working alliance: Where have we been, where are we going?

JENNIFER M. DORAN

Department of Psychology, The New School for Social Research, New York, NY, USA

(Received 1 February 2014; revised 16 June 2014; accepted 6 August 2014)

Psychotherapy Research, 2015

<http://dx.doi.org/10.1080/10503307.2015.1090038>



EMPIRICAL PAPER

Empathy from the client's perspective: A grounded theory analysis

PETER MACFARLANE, TIMOTHY ANDERSON, & ANDREW S. MCCLINTOCK

Department of Psychology, Ohio University, Athens, OH, USA

(Received 29 May 2015; revised 28 July 2015; accepted 20 August 2015)



Psychodynamic Psychotherapy and Research Evidence

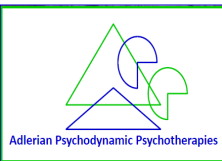
Bambi Survives Godzilla?

Richard M. Glass, MD

IN A NOW CLASSIC 1982 ARTICLE,¹ PARLOFF SURVEYED THE results of psychotherapy research evidence and its relevance for policy makers and treatment reimbursement decisions, characterizing that encounter as "Bambi meets Godzilla." He concluded that although research evidence in psychotherapy outcome at that time was "exten-

ter of concern, particularly in the era of evidence-based medicine. In this issue of *JAMA*, Leichsenring and Rabung⁹ present the results of a meta-analysis that speaks directly to this concern.

The continuing interest in and attraction of psychodynamic psychotherapy are likely due to the considerable intuitive appeal of the underlying concept that facilitated self-understanding can lead to improvement of mental disorders.



Andrea Ferrero: SB-APP

EFFICACIA: FATTORI COMUNI E TECNICHE SPECIFICHE

Fluctuations in alliance and use of techniques over time: A bidirectional relation between use of “common factors” techniques and the development of the working alliance

Nili Solomonov¹ | Kevin S. McCarthy^{2,3} | John R. Keefe³ | Bernard S. Gorman¹ |
Mark Blanchard¹ | Jacques P. Barber¹ 

Clin. Psychol. Psychother., 2017: 1-10

¹Derner School of Psychology, Adelphi University, Garden City, NY, USA

²Department of Psychology, Chestnut Hill College, Philadelphia, PA, USA

³Department of Psychology, University of

Objective: The aim of this study was twofold: (a) Investigate whether therapists are consistent in their use of therapeutic techniques throughout supportive–expressive therapy (SET) and (b) Examine the bi-directional relation between therapists' use of therapeutic techniques and the working alliance over the course of SET.

Tecniche specifiche interferiscono positivamente o negativamente con i fattori comuni di efficacia (es.: alleanza terapeutica)

UNA PSICOTERAPIA «SEMI-MANUALIZZATA»

Psychotherapy Research, 2017
Vol. 27, No. 1, 1–13, <http://dx.doi.org/10.1080/10503307.2015.1076202>

Routledge
Taylor & Francis Group

PRESIDENTIAL ADDRESS

Improving the yield of psychotherapy research

GEORGE SILBERSCHATZ

Department of Psychiatry, University of California San Francisco, San Francisco, CA, USA

**Homogeneity Assumptions are a Major
Impediment to Progress**



La funzione di un manuale della tecnica va intesa:

- in chiave descrittiva (per orientare e fare il punto sulle scelte del terapeuta)
- non in chiave prescrittiva (flow chart) come richiesto per evitare che ogni esercizio del giudizio clinico costituisca una minaccia alla validità interna degli RCT

(Westen et al. 2004)

Andrea Ferrero: SB-APP

MODELLO TEORICO



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY



Andrea Ferrero: SB-APP

SB-APP E PSICOLOGIA INDIVIDUALE ADLERIANA



Metodo analitico (A. Adler 1910; cit. da H. Ansbacher, 1987)

L'identificazione del materiale avviene attraverso
l'arte del terapeuta di:

- relativizzare il corso delle proprie emozioni e convinzioni
- farsi guidare dalla vita psicoaffettiva del paziente
(continuità- aspetti inconsci)

RELATIVIZZARE IL VISSUTO DEL TERAPEUTA

- Attenta ricognizione del controtransfert all'interno del processo interpersonale della terapia (Günther 2004)
- Particolare considerazione per i vissuti di idealizzazione, impotenza, incoerenza (Presslich Titscher 1997), intrusione, allarme, abbandono (Matschiner-Zollner 2004; White 2007)
- Consapevolezza dei fattori di acting-out (Presslich Titscher 2004) ed atteggiamenti forzosi (Gilbert 2009) da parte del terapeuta



Per essere **terapeuti abilitati APPs** (art. 7 punto b dello Statuto dell'Associazione APPs-TR) sono richiesti i seguenti pre-requisiti: essere psicoterapeuti, l'aver effettuato e concluso un percorso di **formazione APPs di primo e secondo livello**, aver effettuato e concluso un training analitico

LE RISPOSTE EMOTIVE DEI TERAPEUTI

Patient Personality and Therapist Response: An Empirical Investigation

Antonello Colli, Ph.D.

Annalisa Tanzilli, Ph.D.

Giancarlo Dimaggio, M.D.

Vittorio Lingiardi, M.D.

Objective: The aim of this study was to examine the relationship between therapists' emotional responses and patients' personality disorders and level of psychological functioning.

Method: A random national sample of psychiatrists and clinical psychologists (N=203) completed the Therapist Response Questionnaire to identify patterns of therapists' emotional response, and the Shedler-Westen Assessment Procedure-200 to assess personality disorders and level of psychological functioning in a randomly selected patient currently in their care and with whom they had worked for a minimum of eight sessions and a maximum of 6 months (one session per week).

Results: There were several significant relationships between therapists' responses and patients' personality pathology. Paranoid and antisocial personality disorders

inadequate, overwhelmed/disorganized, and special/overinvolved countertransference. Disengaged countertransference was associated with schizotypal and narcissistic personality disorders and negatively associated with dependent and histrionic personality disorders. Schizoid personality disorder was associated with helpless/inadequate responses. Positive countertransference was associated with avoidant personality disorder, which was also related to both parental/protective and special/overinvolved therapist responses. Obsessive-compulsive personality disorder was negatively associated with special/overinvolved therapist responses. In general, therapists' responses were characterized by stronger negative feelings when working with lower-functioning patients.

Conclusions: Patients' specific personality pathologies are associated with consistent

Psychotherapy
2015, Vol. 52, No. 2, 238–246

© 2015 American Psychological Association
0033-3204/15/\$12.00 http://dx.doi.org/10.1037/a0038799

Clinicians' Emotional Responses and *Psychodynamic Diagnostic Manual* Adult Personality Disorders: A Clinically Relevant Empirical Investigation

Francesco Gazzillo and Vittorio Lingiardi
Sapienza University of Rome

Federica Genova
Sapienza University of Rome

Robert M. Gordon
Allentown, Pennsylvania

Franco Del Corno
Milan, Italy

Robert F. Bornstein
Derner Institute, Adelphi University

Nancy McWilliams
Graduate School for Applied and Professional Psychology,
Rutgers University

La qualità delle risposte del terapeuta

➤ correla colla patologia (funzionamento relazionale e livello di funzionamento psicopatologico più che sintomi)

(Dahl et al. 2012; Westra et al. 2012; Dahl et al. 2014; Ferrero et al. 2017, dati n.p.)

➤ non correla con l'orientamento tecnico

(Colli et al. 2014)



ORIENTARE L'ATTENZIONE SUL VISSUTO DEL PAZIENTE

The Model of Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP): Specific Features in the Treatment of Borderline Personality Disorder

Andrea Ferrero¹ 

Abstract. Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP) is a time-limited (40 weekly sessions) psychotherapy for a wide range of psychic disorders, delivered in sequential and repeatable module (in each module a different therapist is involved). Its specific features in the treatment of Borderline Personality Disorder (BPD) are presented, concerning setting, technique and therapist's emotional attitude. Four Personality Functioning Levels (PFLs) are focused, in order to provide targeted interventions for more homogeneous subsets of BPD patients. PFLs are assessed by evaluating symptoms, quality of interpersonal relationships, overall social behaviours, cognitive and emotional patterns, and defense mechanisms. Two clinical vignettes describe how SB-APP strategies vary according to patient's PFLs, also with respect to the predetermined treatment end. Preliminary reports of SB-APP effectiveness in the treatment of BPD are summarized and discussed.

Teoria causale dell'evento clinico

LA COMPrensIONE
DEL PAZIENTE

(Psicopatologia dinamica–
Teoria della clinica)

Teoria del cambiamento dell'evento clinico

LE CONDIZIONI DEL TRATTAMENTO
(Teoria della tecnica:
il setting)

LA TECNICA DEL TRATTAMENTO
(Teoria della tecnica:
le risposte del terapeuta)

LE STRATEGIE DEL TRATTAMENTO
(Teoria della tecnica:
le scelte del terapeuta)

Andrea Ferrero: SB-APP

LA COMPRENSIONE DEL PAZIENTE



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY



Andrea Ferrero: SB-APP

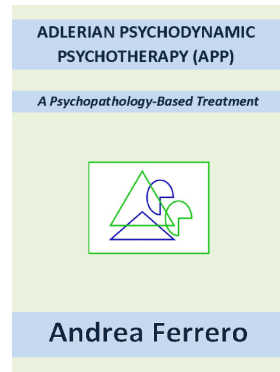
EZIOPATOGENESI DEI DISTURBI DI PERSONALITA'

VEP – PM Vulnerability, Events, Personality - Psychopathological Model

Riferimenti teorici

Adler 1907, 1912, 1920; Bolterauer 1982; Rovera 1982, 1992; Schmidt 1985;
Ansbacher 1987; Fassino 1988, 2002; Presslich Titscher 1997;
Tenbrink, 1997; Ferrero 2000, 2004; Datler & Freilinger 2006; Fassino, Abbate Daga
& Leombruni 2007; Morbach 2007; Ferrero 2012, 2014, 2016

Zubin & Spring 1977; Ciompi 1982; Cloninger et al. 1997; Shedler & Westen 1998;
Siegel, 1999; Gorton 2000; Svrakić et al. 2002; Dewan et al. 2004; Gabbard, 2005;
Livesley 2008; Svrakić et al. 2009; Paris 2011





EZIOPATOGENESI DEI DISTURBI DI PERSONALITA'





Andrea Ferrero: SB-APP

VULNERABILITA' GENETICA NEI DISTURBI DI PERSONALITA'

Clinical research

The genetic epidemiology of personality disorders

Ted Reichborn-Kjennerud, MD, PhD

ASPD: 0.38, BPD: 0.35, HPD: 0.31, NPD: 0.24

(Kendler et al. 2006, 2008; Reichborn-Kjennerud et al. 2007;
Torgesen et al. 2008; Reichborn-Kjennerud 2010)

BPD, ASPD (Siever & Weinstein 2009)

(↑ *amigdala*; ↓ *controllo corteccia prefrontale, 5HT*):

↑ *aggressività – impulsività*



VULNERABILITA' PSICOSOCIALE NEI DISTURBI DI PERSONALITA'

Comparison of Attachment Types in the Traditions of Developmental Versus Social Psychology

Attachment in infancy/childhood—developmental tradition^{*}

Secure (autonomous)[†]
 Open communication of positive and negative affects with the caregiver
 Insecure
 Avoidant (dismissing)[‡]
 Restricted communication of vulnerable affects and deactivated attention to attachment needs
 Ambivalent (preoccupied)[‡]
 Exaggerated communication of vulnerable affects and hyperactivated attention to attachment concerns
 Disorganized/disoriented (unresolved)[‡]
 Contradictory, apprehensive, aimless, or conflicted behaviors in response to attachment needs

Attachment between adults—social psychological tradition[‡]

Secure
 Positive self-image and a sense of being worthy of love, combined with a positive expectation that others will be generally accepting and responsive
 Insecure
 Dismissing/avoidant
 Positive self-image and a sense of lovability, combined with a negative expectation of significant others as demanding, clingy, and dependent
 Anxious/preoccupied
 Negative self-image and a sense of unlovability, combined with a positive evaluation of others (in terms of their strength and independence)
 Fearful/avoidant
 Negative self-image combined with a skepticism that significant others can be trusted to be loving and available

^{*} Ainsworth et al. (1978),¹⁸ Main & Solomon (1990).¹⁹

[†] Fraley et al. (1998).²⁰

(Agrawal HR, Gunderson J, Holmes BM, Lyons-Ruth K 2004)

[‡] The parenthetical expression is the equivalent term (for adults rather than infants/children) that is used in the Adult Attachment Interview.

I legami tra madre (genitori) e bambino costituiscono la base:

- dell'identità dell'individuo
- delle sue capacità di adattamento



Andrea Ferrero: SB-APP

VULNERABILITA' COMPLESSIVA NEI DISTURBI DI PERSONALITA'

La vulnerabilità genetica e psicosociale interagiscono

[Psychol Med.](#) 2015 Sep 21:1-18. [Epub ahead of print]

Early life trauma, depression and the glucocorticoid receptor gene - an epigenetic perspective.

[Smart C](#), [Strathdee G](#), [Watson S](#), [Murgatroyd C](#), [McAllister-Williams RH](#).

Glucocorticoid receptor (GR) gene (NR3C1) has been found to be susceptible to **epigenetic modification**, specifically DNA methylation, in the context of environmental stress such as **early life trauma**, which is an established risk for borderline personality disorder (and depression) later in life.

Due possibili esiti della vulnerabilità:

- Identità instabile: mancanza di coesione di differenti aspetti del sé
 - Conflitti non risolti: tensioni persistenti che turbano il mondo interiore e relazionale del soggetto (Tenbrink 1998)

TRAUMI ED EVENTI DI VITA NEI DISTURBI DI PERSONALITA'

frontiers in
BEHAVIORAL NEUROSCIENCE

ORIGINAL RESEARCH ARTICLE

published: 15 January 2009
doi: 10.3389/neuro.08.005.2008



Stress effects on working memory, explicit memory, and implicit memory for neutral and emotional stimuli in healthy men

Mathias Luethi¹, Beat Meier^{1} and Carmen Sandi²*

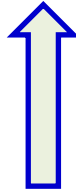
La gravità degli eventi di vita non è legata solo all'impatto esistenziale oggettivo (come nel caso dei traumi), ma al loro significato simbolico e al fatto che impongono uno spazio all'interno delle strutture mentali preesistenti, e ne disturbano realmente (dissociazione) e/o simbolicamente

la continuità

la coerenza

EVENTI DI VITA COME ATTIVATORI ALLA VULNERABILITA'

IDENTITA' INSTABILE



CONFLITTI NON RISOLTI



COMPITI VITALI – EVENTI DI VITA (TRAUMATICI)



ORGANIZZAZIONE DINAMICA DELLA PERSONALITA'



SINTOMI

ADLERIAN PSYCHODYNAMIC
PSYCHOTHERAPY (APP)

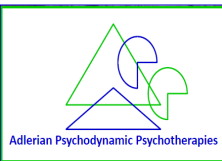
A Psychopathology-Based Treatment



Andrea Ferrero

ORGANIZZAZIONE DI PERSONALITA' E VULNERABILITA'





QUALITA' DELLE DIFESE NEI DISTURBI DI PERSONALITA'

Empirical Studies of Defense Style: Relationships with Psychopathology and Change

Michael Bond, MD

The Defense Style Questionnaire (DSQ) is a widely used self-report measure of empirically derived groupings of defense mechanisms ranked on an adaptive hierarchy. A review of published studies indicates strong evidence that adaptiveness of defense style correlates with mental health and that some diagnoses are correlated with specific defense patterns—for example, borderline personality disorder with greater use of both maladaptive and image-distorting defenses and less use of adaptive defenses. For other diagnoses, the pattern of defenses is less clear but often reinforces theoretical formulations.

Defense styles become more adaptive with improvement in symptoms, but intermediate defenses tend to be stable (traitlike) over time. Defenses are sometimes predictive of the quality of the therapeutic alliance. Although one might speculate that assessment of defenses can be useful in planning treatment, there are no studies supporting this hypothesis. (HARV REV PSYCHIATRY 2004;12:263–278.)

Organizzazione nevrotica di Personalità (es.: rimozione)

Gli aspetti cognitivi ed emozionali contraddittori del vissuto possono essere percepiti, ma alcuni d'essi sono mal tollerati
(soggetti iper-ambivalenti)

QUALITA' DELLE DIFESE NEI DISTURBI DI PERSONALITA'

Psychiatry 76(1) Spring 2013

32

Defense Mechanisms in Schizotypal, Borderline, Antisocial, and Narcissistic Personality Disorders

J. Christopher Perry, Michelle D. Presniak, and Trevor R. Olson

Organizzazione borderline di Personalità (es.: scissione)

La personalità è organizzata in funzione di evitare al soggetto di percepire allo stesso tempo le qualità positive e negative di sé o degli altri → ogni aspetto parziale di una situazione contraddittoria la rappresenta temporaneamente per intero (OPD -4)
(soggetti anti-ambivalenti)

LA GRAVITA' DEI DISTURBI DI PERSONALITA' SECONDO I LIVELLI DI FUNZIONAMENTO PSICOPATOLOGICO

Nello stesso paziente si possono riscontrare livelli di funzionamento e registri difensivi multipli, che possono attivarsi differentemente in vari contesti esistenziali

Ferrero et al. *BMC Psychiatry* (2016) 16:253
DOI 10.1186/s12888-016-0940-4



BMC Psychiatry

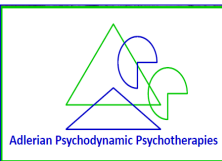
RESEARCH ARTICLE

Open Access

Psychopathological Functioning Levels (PFLs) and their possible relevance in psychiatric treatments: a qualitative research project



Andrea Ferrero^{1,3}, Barbara Simonelli^{1,3}, Simona Fassina^{1,3}, Elisabetta Cairo³, Giovanni Abbate-Daga²,
Enrica Marzola² and Secondo Fassino^{2*}



PSYCHOPATHOLOGICAL FUNCTIONING LEVELS - RATING SCALE

Methods: The Psychopathological Functioning Level - Research and Training Committee (PFL-RTC) has been established in Turin since 2002 including psychiatrists and clinical psychologists with extensive clinical and research experience. Our research was grounded on the Qualitative Research Criteria (QRC) 1-7 and conducted with subsequent steps in order to identify those core psychopathological dysfunctions to be rated by this tool.

Results: From 2002 until 2014, 316 outpatients were administered the clinical interview on at least two different occasions. Diagnoses were mixed and included: Schizophrenic and Psychotic Disorders, Depressive Disorders, Anxiety Disorders, Obsessive-Compulsive Disorder, Post-Traumatic Stress Disorder, Somatic Symptoms Disorders, Eating Disorders and Personality Disorders. Focus groups were conducted to identify those psychopathological dysfunctions which needed to be rated, according to two Phenomenological Selection Criteria (PhSC) and four Etiopathogenetic Selection Criteria (EtSC). As a result, five dysfunctional areas emerged: Identity (ID); Comprehension (CO); Negative Emotions (NE); Action-Regulation (AR); Social Skills (SS). After checking such dimensions for consistency with the existing instruments, 7 levels of severity were identified for each area. Finally, a provisional Italian schedule of Psychopathological Functioning Levels – Rating Scale (PFL-RS) was obtained and checked for semantic comprehension and then administered gathering preliminary data.

7 LIVELLI FUNZIONALI

DI ORGANIZZAZIONE DI PERSONALITA'...

(PFL I) Organizzazione Psicotica di Personalità

(PFL II, III, IV) Organizzazione Borderline di Personalità

(PFL V,VI) Organizzazione Nevrotica di Personalità

(PFL VII) Organizzazione Adattiva di Personalità

PSYCHOPATHOLOGICAL FUNCTIONING LEVELS - RATING SCALE

Three data coders coded the data according to the coding scheme provided by the authors. The Statistical Package for Social Sciences 21.0 (SPSS, SPSS Inc., Chicago, IL) was used for analysing the data. Concerning internal consistency, all PFL-RS subscales correlate strongly to each other. For example, Pearson's correlation coefficient between internal and external perspectives of ID is $r = .904$, of CO is $r = .901$, NE is $r = .922$, AR is $r = .614$, SS is $r = .892$. Moreover, HA on the TCI correlates positively with ID, CO, NE, and AR; finally, correlations have been also found between PFL-RS subscales and measures of depressive symptoms, anxiety, and anger. With more detail, AR_e was inversely correlated with BDI ($r = -.319$, $p = .024$), STAI-trait ($r = -.296$, $p = .035$), and STAXI ($r = -.396$, $p = .004$). Also AR_i was negatively correlated with STAI-trait ($r = -.457$, $p = .001$) and STAXI ($r = -.431$, $p = .002$). ID_e was found to negatively correlate with STAXI ($r = -.309$, $p = .029$) as well as NE_e ($r = -.291$, $p = .040$).

Finally, given the clinical use of this instrument considering each psychopathological areas and its global dimension, Cronbach's alpha was .971. However, exhaustive

...PER COME SI MANIFESTANO IN 5 AREE CHIAVE:

- Identità, Comprensione, Emozioni negative
- Azione – Regolazione dei comportamenti
- Competenze sociali

SPECIFICITA' NEGLI ADOLESCENTI

Specificità della patologia borderline in adolescenza e possibili riflessi sulle strategie di comunicazione-relazione nel trattamento con la *Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP)*

ANDREA FERRERO

Sono adeguati all'età:



- un valido rapporto con la realtà, anche in presenza di progettualità indeterminata
- riconoscimento e integrazione di rappresentazioni e affetti, pur con limiti di capacità narrativa
 - un'immagine di sé coesa, anche se sono presenti aspetti proiettivi idealizzati
- l'utilizzo degli altri (in particolare del gruppo dei coetanei) come fonte temporanea di nuovi modelli identitari

Andrea Ferrero: SB-APP

LE CONDIZIONI DEL TRATTAMENTO



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY

Andrea Ferrero: SB-APP

ARTICOLAZIONE DELLA PRESA IN CARICO



Centro DPAA, Settimo T.se, ASL TO4

Preso in carico/diagnosi/progetto terapeutico (a lungo termine)
(case manager/équipe multiprofessionale)



Psicoterapia



SPDC
Residenzialità

PROGETTO CLINICO MULTIDISCIPLINARE

I pazienti devono conoscere
competenze e limiti dei terapeuti per:

- ✓ psicoterapia
- ✓ necessità cliniche (un piano per la crisi)
- ✓ supporto alle famiglie
- ✓ bisogni concreti

sinergia con TF

compliance a TF

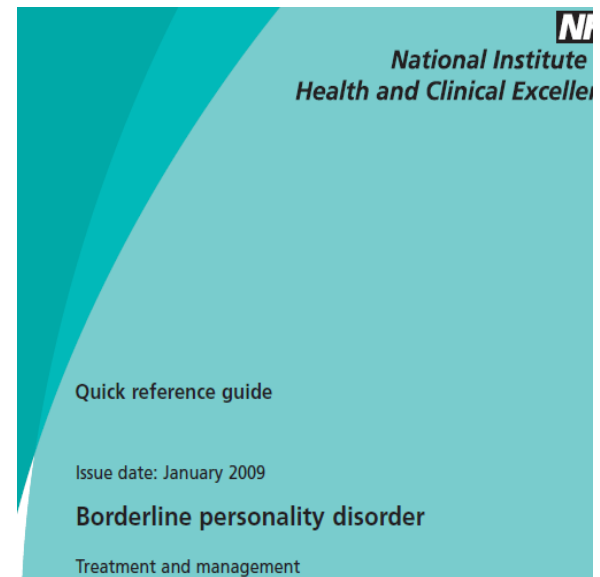


PSICOTERAPIA (effetti specifici)



sinergia con RIA

riduzione H e RES





Andrea Ferrero: SB-APP

SB-APP: IL SETTING

Research in Psychotherapy: Psychopathology, Process and Outcome
2012, Vol. 15, No. 1, 32-45

© 2012 Italian Area Group of the Society for Psychotherapy Research
ISSN 2239-8031

Rev Psiquiatr Salud Ment (Barc.). 2013;6(1):17-25



Revista de Psiquiatria
y Salud Mental

www.elsevier.es/saludmental



The Model of Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP): Specific Features in the Treatment of Borderline Personality Disorder

ORIGINAL ARTICLE

**Personality dimensions and Working Alliance in subjects
with Borderline Personality Disorder[☆]**

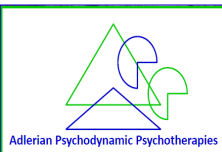
Andrea Pierò^{a,*}, Elisabetta Cairo^{b,c}, Andrea Ferrero^{b,c}

Moduli di 40 sedute 1v/s

Moduli ripetibili in sequenza, con un terapeuta differente

**Vengono fornite dettagliate informazioni sul setting: luogo,
durata, frequenza, assenze, compiti del terapeuta**

**Iniziando un nuovo modulo sequenziale della SB-APP,
si lavorare sul distacco dal terapeuta precedente,
valutando eventuali idealizzazioni o svalutazioni**



Andrea Ferrero: SB-APP

PSICOTERAPIE PER I DPG E SETTING A TEMPO LIMITATO

The NEW ENGLAND JOURNAL of MEDICINE

CLINICAL PRACTICE

Borderline Personality Disorder

John G. Gunderson, M.D.

Fattori negativi

minore intensità del trattamento

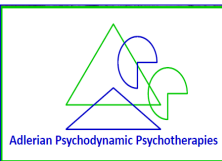
(Leichsenring et al., 2005)

decostruzione alleanza terapeutica

(Gunderson, 2011)

rischio di abbandono traumatico

(Leibovich et al., 1981-83; Koekkoek et al., 2009)



PSICOTERAPIE PER I DPG E SETTING A TEMPO LIMITATO

Curr Psychiatry Rep (2010) 12:56–60
DOI 10.1007/s11920-009-0083-0

Effectiveness of Different Psychotherapy Approaches in the Treatment of Borderline Personality Disorder

Joel Paris

Fattori positivi

↑ strutturazione confini interni
impegno definito

intellettualizzazione della separazione

(Leibovich, 1981-83; Nurnberg e Suh, 1982; Sledge et al., 1990; Paris 2010)

interruzione e sequenzialità favoriscono assimilazione/
prevedono momenti di crisi

(Silver D 1983-85; Perry, 1987; Mc Glashan, 1993; Choi-Kain 2010)

Andrea Ferrero: SB-APP

TECNICA E STRATEGIE DEL TRATTAMENTO



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY

FOCALIZZAZIONE E CONCLUSIONE

Research in Psychotherapy: Psychopathology, Process and Outcome
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The Model of Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP): Specific Features in the Treatment of Borderline Personality Disorder

Andrea Ferrero¹✉

ORIGINAL ARTICLE

Personality dimensions and Working Alliance in subjects
with Borderline Personality Disorder[☆]

Andrea Pierò^{a,*}, Elisabetta Cairo^{b,c}, Andrea Ferrero^{b,c}

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Abstract. Sequential Brief-Adlerian Psychodynamic Psychotherapy (SB-APP) is a time-

- Focus sul “qui ed ora”
- Elaborazione del distacco in vista della fine del trattamento
 - Restituzione del lavoro svolto
- Esplicitazione del significato di eventuali ulteriori trattamenti

STRUMENTI DELLA TECNICA (TIs)

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- TIs esplorativi: connessioni del vissuto cosciente ad elementi dinamicamente inconsci (interpretazione), subconsci (confrontazione) o già consapevoli (chiarificazione)
- TIs validanti: riconoscimento ed importanza di determinati vissuti, situazioni o comportamenti (convalidazione empatica, consigli ed elogi, conferma e prescrizione)
- L'incoraggiamento ad elaborare, che comprende talora il silenzio del terapeuta, al centro del continuum



UTILIZZO STRATEGICO DEGLI STRUMENTI DELLA TECNICA

Journal of Personality Disorders, 27(3), 320-336, 2013
© 2013 The Guilford Press

LEVELS OF PERSONALITY FUNCTIONING AND THEIR ASSOCIATION WITH CLINICAL FEATURES AND INTERPERSONAL FUNCTIONING IN PATIENTS WITH PERSONALITY DISORDERS

Benedicte Lowyck, PhD, Patrick Luyten, PhD,
Yannic Verhaest, MA, Bart Vandeneede, MA,
and Rudi Vermote, MD, PhD

Recently, the DSM-5 Personality and Personality Disorders Work Group has proposed a multiple level approach toward the classification and diagnosis of personality disorders (PDs), with the first level entailing a rating of impairments in levels of personality functioning. Although a number of measures that assess levels of personality functioning have been validated, given its prominent status in the DSM-5 proposal and contemporary theories of personality pathology, the Work Group has called for more research in this area (e.g., Bender, Morey, & Skodol, 2011). In response to this call, this study investigates the relationship

Rev Psiquiatr Salud Ment. (Barc.). 2012;xxx(xx):xxx-xxx



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ORIGINAL

Dimensiones de la personalidad y alianza terapéutica
en individuos con trastorno límite de la personalidad

Andrea Pierò^{a,+}, Elisabetta Cairo^b y Andrea Ferrero^{a,b,c}

- Le tecniche delle PT vanno utilizzate in modo diversificato rispetto al funzionamento di personalità (Zanarini 2009, Paris 2010, Lowyck et al 2013, Fonagy 2014)
- La Working Alliance correla con: temperamento (Pierò et al. 2013), qualità delle rappresentazioni di sé e dell'altro (Piper et al. 1991), difese (Hersoug et al 2002, Bond & Perry 2004), qualità delle relazioni interpersonali recenti (Markowitz et al 2006)



Adlerian Psychodynamic Psychotherapies

Andrea Ferrero: SB-APP

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Asse delle strategie relazionali

Intensive ↔ Supportive



Asse degli strumenti tecnici



Asse delle strategie intrapsichiche

Mutative ↔ Conservative



POSSIBILI STRATEGIE RELAZIONALI

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Nelle strategie relazionali intensive prevale la rielaborazione dei vissuti da parte del paziente

involved); its specific features in the treatment of Borderline Personality Disorder (BPD) are presented, concerning setting, technique and therapist's emotional attitude. Four Personality Functioning Levels (PFLs) are focused, in order to provide targeted interventions for more homogeneous subsets of BPD patients. PFLs are assessed by evaluating symptoms, quality of interpersonal relationships, overall social behaviours, cognitive and emotional patterns, and defense mechanisms. Two clinical vignettes describe how

Sequential Brief Adlerian Psychodynamic Psychotherapy; Therapeutic alliance; Temperament; Character

Method: A sample of forty-nine BPD subjects who completed a module of Sequential Brief Adlerian Psychodynamic Psychotherapy (SB-APP) of 40 sessions has been recruited. Before the onset of psychotherapy an assessment was made with Clinical Global Impression (CGI), Global Assessment of Functioning (GAF), Symptom Checklist Revised 90 (SCL-R 90), and with Temperament and Character Inventory (TCI). At the end of their psychotherapy, patients were requested to rate the level of WA by means of the Working Alliance Inventory (WAI-S).

Results: Multiple linear regression analysis has identified three variables as independent predictors of WAI-S total score: subjects with lower Harm Avoidance (HA), older patients, and subjects with higher post-therapy levels of better WAI-S subscales.

Nelle strategie relazionali supportive prevale l'integrazione dei contributi da parte del terapeuta



POSSIBILI STRATEGIE INTRAPSICHICHE

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Le strategie intrapsichiche mutative sono volte a provocare un parziale cambiamento dell'organizzazione di personalità

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Results: Multiple linear regression analysis has identified three variables as independent predictors of WAI-5 total score: subjects with lower Harm Avoidance (HA), older patients, and

Le strategie intrapsichiche conservative sono destinate a rispettare e rinforzare la struttura difensiva del paziente



Andrea Ferrero: SB-APP

VALORE STRATEGICO DEI TIs IN RAPPORTO AI PFLs

The Impact of Level of Personality Organization on Treatment Response: A Systematic Review

Jurrijn A. Koelen, Patrick Luyten, Liesbeth H. M. Eurelings-Bontekoc, Louis Diguer, Rudi Vermote, Benedicte Lowyck, and Martina E. F. Bühring

This paper provides a systematic review of extant research concerning the association between level of personality organization (PO) and psychotherapy response. Psychotherapy studies that reported a quantifiable association between level of PO and treatment outcome were examined for eligibility. Based on stringent inclusion and exclusion criteria, we identified 18 studies from 13 original data sources. Participants in these studies had a variety of mental disorders, of which mood, anxiety, and personality disorders were the most common. The results of this systematic review converge to suggest that higher initial levels of PO are moderately to strongly associated with better treatment outcome. Some studies indicate that level of PO may interact with the type of intervention (i.e., interpretive versus supportive) in predicting treatment outcome, which suggests the importance of tailoring the level of interpretive work to the level of PO. Yet, at the same time

L'utilizzo degli stessi TIs produce effetti differenti
sull'asse delle strategie relazionale
sull'asse delle strategie intrapsichiche
secondo i Livelli Psicopatologici di Funzionamento del paziente

ESEMPIO DI UTILIZZO DEI TIs: STRATEGIE RELAZIONALI E PFLs

ADLERIAN PSYCHODYNAMIC
PSYCHOTHERAPY (APP)

A Psychopathology-Based Treatment

PFL II-III

La modalità relazionale prevalente con il terapeuta è di tipo scissionale.

Il terapeuta cerca di costruire e consolidare un'alleanza contrattuale-comportamentale e, contestualmente, affettivo-empatica con il paziente.

Molto importante è la capacità di cogliere le fluttuazioni degli stati mentali e la capacità di restituirli al paziente cosicché, di riflesso, se ne rinforzi l'identità.

→ *conferme, convalidazioni empatiche*

→ *chiarificazioni, prescrizioni*

E' talora necessario che il terapeuta si sveli e si renda percettibile come persona concreta, per rinforzare l'esame di realtà e per testimoniare che percepirsi e riconoscersi (identificarsi) non è pericoloso

→ *convalidazioni empatiche,*

→ *interpretazioni di transfert negativo*

ESEMPI DI UTILIZZO DEI Tis: STRATEGIE INTRAPSICHICHE E PFLs

ADLERIAN PSYCHODYNAMIC
PSYCHOTHERAPY (APP)

A Psychopathology-Based Treatment

PFL II-III

In relazione al mondo interiore, il terapeuta aiuta il paziente a filtrare gli stimoli intrapsichici intollerabili e ad affrontare avvenimenti gravemente stressanti

→ *conferme, convalidazioni empatiche*

In relazione al mondo socio-relazionale, il terapeuta utilizza l'esame di realtà, le spiegazioni delle conseguenze del comportamento, il riconoscimento dei vissuti che accompagnano gli avvenimenti

→ *conferme, convalidazioni empatiche*

→ *chiarificazioni, elogi pertinenti, interpretazioni di transfert negativo*

In fasi successive, il riconoscimento dello stile interpersonale avviene lavorando a partire dall'hic et nunc, anche attraverso la soluzione di problemi

→ *consigli, incoraggiamento a elaborare, interpretazioni*

E' solo a PFL IV (III) che è possibile lavorare contro le difese scissionali

→ *confrontazioni*

Andrea Ferrero: SB-APP

VALUTAZIONI DI EFFICACIA



SEQUENTIAL BRIEF – ADLERIAN PSYCHODYNAMIC PSYCHOTHERAPY

PRELIMINARI PROVE DI EFFICACIA

Amianto et al. *BMC Psychiatry* 2011, **11**:181
<http://www.biomedcentral.com/1471-244X/11/181>



RESEARCH ARTICLE

Open Access

Supervised team management, with or without structured psychotherapy, in heavy users of a mental health service with borderline personality disorder: a two-year follow-up preliminary randomized study

Federico Amianto^{1†}, Andrea Ferrero^{2,3†}, Andrea Pierò⁴, Elisabetta Cairo^{2,3}, Giuseppe Rocca¹, Barbara Simonelli^{2,3}, Simona Fassina^{2,3}, Giovanni Abbate-Daga¹ and Secondo Fassino^{1*}

sion (STAXI) at T6 and T12. SB-APP treatment seemed more effective than STM on four CGI-M items at T6 and T12 (Table 3): disturbed relationships ($p < .040$), impulsivity ($p < .025$), self-damaging behaviors ($p < .019$), and chronic feelings of emptiness ($p < .009$).

months (T24). Not significant changes emerged in both treatment groups during the year after conclusion of psychotherapy.

PRELIMINARI PROVE DI EFFICACIA

Storebø OJ, Stoffers-Winterling JM, Völlm BA, Kongerslev MT, Mattivi JT, Jørgensen MS, Faltinsen E, Todorovac A, Sales CP, Callesen HE, Lieb K, Simonsen E

Psychological therapies for people with borderline personality disorder.
Cochrane Database of Systematic Reviews 2020, Issue 5. Art. No.: CD012955.
DOI: [10.1002/14651858.CD012955.pub2](https://doi.org/10.1002/14651858.CD012955.pub2).

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Relazione clinica e psicoterapia basate sui PFLs

Efficacia nel ridurre: gravità dei sintomi, tendenze suicidarie, instabilità affettiva, senso di vuoto, aspetti paranoid; nel migliorare: identità, sopportazione dell'abbandono, relazioni interpersonali (Størebo et al. 2020)

Relazione clinica e psicoterapia basate sui PFLs

“Total scores on working alliance were higher in SB.APP group”(vs. STM) “at *post-hoc* analysis (STM: 46.7 ± 8.8 and SB-APP: $53,2 \pm 6.3$; $t = -2.426$; $p < .021$ ”
(Lieb et al. 2014)

CONFRONTI E SVILUPPI DELLA RICERCA

Psychological treatments for suicidal individuals

M Chesin, A Yur'yev, 2016

Estudos clínicos em psicoterapia psicodinâmica: uma revisão do follow-up das intervenções

CP da Costa, AG Bastos, CS Padoan, 2017

SPECIAL ARTICLE

The effectiveness of psychodynamic psychotherapies: an update

World Psychiatry, 14: 137-150, 2015

PETER FONAGY

Research Department of Clinical, Educational and Health Psychology, University College London, and The Anna Freud Centre, London, UK

This paper provides a comprehensive review of outcome studies and meta-analyses of effectiveness studies of psychodynamic therapy (PDT) for the major categories of mental disorders. Comparisons with inactive controls (waitlist, treatment as usual and placebo) generally but by no means invariably show PDT to be effective for depression, some anxiety disorders, eating disorders and somatic disorders. There is little evidence to support its implementation for post-traumatic stress disorder, obsessive-compulsive disorder, bulimia nervosa, cocaine dependence or psychosis. The strongest current evidence base supports relatively long-term psychodynamic treatment of some personality disorders, particularly borderline personality disorder. Comparisons with active treatments rarely identify PDT as superior to control interventions and studies are generally not appropriately designed to provide tests of statistical equivalence. Studies that demonstrate inferiority of PDT to alternatives exist, but are small in number and often questionable in design. Reviews of the field appear to be subject to allegiance effects. The present review recommends abandoning the inherently conservative strategy of comparing heterogeneous "families" of therapies for heterogeneous diagnostic groups. Instead, it advocates using the opportunities provided by bioscience and computational psychiatry to creatively explore and assess the value of protocol-directed combinations of specific treatment components to address the key problems of individual patients.

- Valutazione delle correlazioni tra modalità contro-transferali degli psicoterapeuti, tecniche utilizzate ed esiti clinici della SB-APP, anche in termini di PFL

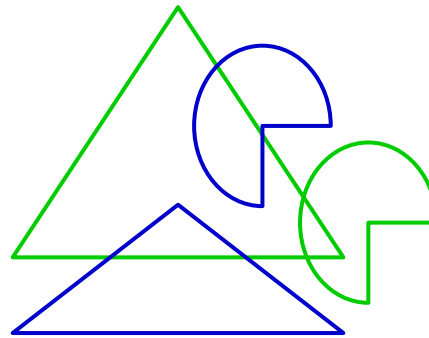
Andrea Ferrero

Trattamento dei Disturbi di Personalità Gravi (DPG): Psicoterapie a confronto

Scuola di Specializzazione in Psichiatria,
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Società Italiana di Psicoterapia Medica
sez. Piemonte e Valle d'Aosta

1 - 2 dicembre 2017

**Aula Magna A. M. Dogliotti
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Corso Bramante 88 Torino**



Adlerian Psychodynamic Psychotherapies

