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Neurofeedback therapy is a method allowing for a change of the bio-electrical functioning of the brain. By using the mechanism of instrumental conditioning, it changes the amplitude of selected brain waves. It allows for suppressing the waves of a too high amplitude and amplify the waves of a too low amplitude, with correlates with psychological and neurological disorders. In the described cases primarily a global training was applied, than it was changed for a specific one, influencing the parts of the brain critical for the given disorder. The first case is a male aged 21 with an organic disorder of the CNS. In the childhood he was suspected of microcephaly. In that period a little retardation of his psychomotor development was observed. In the neurological examination signs of a vegetative dysregulation were found without focal dysfunctions of the CNS. Based on the interview, neuroimaging and psychological assessment he was diagnosed organic personality disorders. The therapy significantly improved the functioning of attention, and visual memory, increased the patients' self-esteem, and reduced anxiety. The second case a male aged 52 male suffering from cyclothymia. In the clinical picture sleep disorders were dominant, accompanied by deficits of memory and attention. The therapy reduced the anxiety level, improved his sleep, and enhanced cognitive functioning. The third case is a female aged 29, suffering from paranoid schizophrenia. The therapy significantly improved the functioning of attention and visual working memory. The cognitive changes reduced her autistic symptoms allowing for better social contacts, and reduced anxiety.

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Unresolved grief in boy depression in young man

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Background and aims: An unfinished process of grief can disrupt further growth and development especially if the loss of close person happens in childhood. The objective of this case report is to point out the importance of grief resolving as one of frequent causes of depression.

Method: Case Report

Result and Conclusion: The case shown is one of young man, occurring due to depressive symptoms. During the interview it was found that the patient had lost a brother 20 years before, and has neither ever cried over him after his death, nor has the subject ever been talked about in his family. In the integrative psychotherapeutic approach, the inclusion and emphatic bonding are followed by the gradual grief resolving process through re-experiencing the pain, the formation and transfer of memories and adjustment to the environment without the beloved person. After the grief resolving has been completed, the symptoms of depression subside. The patient remains in psychotherapeutic treatment with a goal to study further relationship and relating to other people.

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Cognitive behaviour therapy for autism spectrum disorders: Modifications and applicability

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Background and aims: Nowadays worldwide Cognitive Behaviour Therapy (CBT) is considered the therapy of choice for many psychiatric disorders. Its effectiveness has been noteworthy particularly for anxiety disorders and depression however due to the nature of Autism Spectrum Disorders (ASD) it has not been considered appropriate. The aim of the presentation will be to stress the importance of applying CBT with High Functioning Autism and Aspergers syndrome in adolescents and adults and to suggest ways that it can be modified to suit the needs of this population.

Methods: A comparison will be made of the main methods and techniques that are used in CBT programs for anxiety and mood disorders with state of the art methods for ASD and what modifications one might make particularly in terms of psychoeducation and cognitive restructuring.

Results: The available evidence from current research will be reviewed particularly for comorbid cases of Aspergers and Obsessive Compulsive Disorder.

Conclusions: A discussion of the potential benefits and limitations of modifying CBT treatments as well as training psychiatrists and Clinical Psychologists on issues surrounding ASD will be discussed.

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Influence of the group psychodynamic psychotherapy on negative affect, somatization and general psychological distress

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Background: Negative affect and somatization are closely linked to symptoms of neurotic disorders. Negative affect consist of different negative emotions e.g. anxiety and hostility.

Method: The study included a total of 52 inpatients of the day care clinic, 13 men and 39 women, aged 20-56 years. They suffered from neurotic, somatoform and personality disorders. All the patients participated in the group psychodynamic psychotherapy. The therapy lasted 12 weeks, there were 2 sessions of 1.5 hour every working day. The patients were examined before, immediately after and 3 months after the therapy. Negative affect, somatization and general psychological distress were assessed with SCL-90-R, GHQ-30 and PSE (a part of SCAN 2.0) questionnaires.

Results: Mean values of anxiety and depressive symptoms, somatic symptoms and general psychological distress changed in like manner. They dropped of about 1/3 of initial value during the therapy and then stayed stable for 3 months after the therapy. Differences between first and second as well as third assessment were statistically significant whereas between second and third assessment were not. A pattern of change in hostility (SCL-90-R subscale) was different. Mean value of hostility did not change significantly during the therapy and then dropped significantly 3 months later.

Conclusions: Anxiety and hostility could be triggered separately and it is important to assess them both in terms of improvement. Short psychodynamic group psychotherapy is effective in reducing symptoms of anxiety, depression and somatization, but not effective in reducing hostility assessed 3 months afterwards.

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Empathy in psychiatric setting. the contribution of self psychology

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