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Attachment theory and the psychiatrist-patient relationship

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When subject to stress, threat or illness, humans seek an older wiser figure or 'secure base'. The patient comes to the psychiatrist in a state of arousal. An empathic response on the part of the doctor, with accurate verbal identification of emotion, produces assuagement of attachment behaviours, triggering 'vitality affects' and the beginnings of 'companionable exploration' – the reasons for coming and history of presenting symptoms. People with insecure attachment histories find this process problematic, typically 'deactivating' or 'hyperactivating' affect, or producing incoherence. Psychiatrists need to identify and understand this sequence of relational expectations and behaviours in themselves and their clients

The British Journal of Psychiatry (2008) 193, 377. doi: 10.1192/bjp.193.5.377