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EV1127

Cultural reflections in practicing exposure therapy for social anxiety

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Evidence-based practice of exposure therapy has long been adopted as an effective therapy for treating anxiety disorders including social anxiety. In many situations, it is the chosen therapy for such a debilitating disease. Due to its proven efficacy and readiness applicability, it has proven to be the 1st choice of therapy for social anxiety across different life spans from adolescents to geriatrics. Yet, cross-cultural differences have seldom been considered in the approach towards managing social anxiety. Many differences lie between populations and countries in defining what is accepted and what is not with regard to social interactions. Even across the one country, many differences may color the perception of appropriate social communication. Hence, no one-size-fits all can be adopted here. Some interactions are accepted and encouraged while others are basically banned. Thus, during the application of exposure therapy, therapists should modify the conceptual framework while still trying to abide with the fundamental notion of therapy of exposure experiments. In doing this, many therapists may be challenged in their work. While still lacking a strong body of research, clinical experience can provide us with some helpful innovations for successful practice. Our aim is to provide therapists and psychiatrists across the Arab world with tools for applying successful therapy for social anxiety. A series of case studies are discussed to present some innovations in applying Cognitive Behavior Therapy for patients suffering from social inhibitions. Moreover, essentials of past research are reviewed and needs for further research directions in the field are discussed.

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Therapeutic approach to complicated grief—An example of group psychotherapy in psychiatric patients

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Introduction Complicated Grief (CG) affects 7–10% of the grieving individuals in the general population. However, the incidence is much higher in psychiatric patients, reaching 70% in most samples. These individuals present many risk factors for such condition, demanding a particular attention and treatment approach. Most studies have shown that pharmacological treatment may help relieving depressive and anxiety symptoms, although they do not promote a consistent improvement of the grieving scenario. Several meta-analyses have recognized different psychological interventions as effective in dealing with the loss, decreasing psychological suffering and promoting adaptation. It is accepted that the benefits of the intervention overcome any possible harm.

Objectives To evaluate the impact of a group intervention (12 sessions) in pharmacologically stabilized psychiatric patients presenting with CG.

Methods Patient selection was performed through a clinical interview and the fulfilment of the following psychometric tests: Complicated Grief Inventory; the Impact of Events Scale; Beck Depression Inventory; Social Support Scale. These assessment tools were also used to evaluate the impact of the intervention performed.

Results After the psychotherapeutic intervention, there were significant differences in the levels of depressive and post-traumatic stress symptoms.

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Conclusion Group intervention in CG has proven effective in this population, specially regarding depression and post-traumatic stress levels.

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Trait mindfulness at baseline predicts increases in telomerase activity over

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Introduction Preliminary investigations of cross-sectional samples have linked trait mindfulness with measures related to the hypothalamic-pituitary-adrenal (HPA)-mediated stress response and to the inflammatory system, suggesting that this is one potential pathway linking mindfulness based interventions and health. However, no previous studies explored the association between the trait mindfulness construct and markers of cellular ageing.

Methods In the current study we examined in a sample of healthy mothers (n=92) of a child with Autism Spectrum Disorder (i.e. women showing high levels of chronic psychological stress) the prospective associations between a multidimensional scale of trait mindfulness, the Five Facet Mindfulness Questionnaire (FFMQ), and telomerase activity (TA), a marker of cellular ageing and telomere homeostasis. Participants' trait mindfulness and TA were assessed at baseline as well as 9 and 18 month follow-up.

Results Analysis showed that higher levels of baseline mindfulness on FFMQ observation and describe subscales were related to increase in TA from baseline to 9 month (r=0.27, P=0.03 and r=0.24, P=.04, respectively). Additionally, the FFMQ Describe subscale was related to increase in TA from baseline to 18 month (r=.30, P=.02). Results are reported following covariate adjustment of age, BMI, ethnicity, and education.

Discussion Our results showed that higher levels of baseline mindfulness are associated with higher increases in TA after 9 months and 18 months, with increased TA reportedly being associated with decreased oxidative damage, increased telomere length and overall more functional cellular physiology. These findings support a role of mindfulness-related interventions to increase general and mental health.

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The role of psychotherapy in improving the quality of life and social rehabilitation of patients with Psoriasis

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Introduction Psychotherapy can ease physical symptoms of patients with skin pathology.

Objectives To study features of social and psychological maladaptation and quality of life in patients with psoriasis.

Aim To study psychotherapy role in quality of life improvement and social rehabilitation of patients with psoriasis and their family members for the period 2000–2015 in the Belarusian population. Methods One hundred and twenty four patients with cutaneous psoriasis, 12 patients with psoriatic arthritis and 42 healthy persons were studied. Quality of life, types of attitude towards the disease, level of social frustration, depression, level of social maladaptation, psychological defense mechanisms and patients attitudes towards psychotherapy were assessed.

Results There were detected among patients with psoriasis (especially with arthropathy form): social maladaptation, higher level of social frustration and depression (P<0.05), decrease in quality of life (P<0.001), the wider range of psychological defense mechanisms (negation, regression, substitution, reactive formation, P<0.05). Maladaptive types of attitude towards the disease were presented in 24% patients with psoriasis and almost in 41% patients with arthropathy.

Conclusions Psychotherapy can have a high potential for social rehabilitation and quality of life improvement for patients with psoriasis. Obtained data in social maladaptation indicate family therapy as an important therapeutic part for patients with psoriasis. Moreover, knowledge about patients psychological defense mechanisms can help to choose a direction and methods of individual psychotherapy of social maladaptation. This research shows also that psychotherapeutic approach and family psychotherapy remains underestimated in Belarus.

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The evolution of cognitive behavioural therapy – The third generation and its effectiveness

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Introduction First wave cognitive behavioural therapy (CBT) focuses essentially on classical conditioning and operant learning and second wave on information processing. They are based on the premise that certain cognitions, emotions and physiological states lead to dysfunctional behaviour and so, by eliminating the first ones, changes in behaviour will take place. Third wave CBT appeared in an attempt to increase the effectiveness of first and second wave by emphasizing contextual and experiential change strategies.

Objectives/Aims To make a review on the actual state of the art of third wave CBT, focusing on MBSR (Mindfulness-Based Stress Reduction), MCBT (Mindfulness-based Cognitive Behavioural Therapy), DBT (Dialectical Behaviour Therapy), ACT (Acceptance and Commitment Therapy) and CFT (Compassion Focused Therapy).

Methods Research on PubMed using the terms "third wave cognitive behavioural therapy".

Results Methods and targets differ between MBSR, MCBT, DBT, ACT and CFT. Depression, anxiety and borderline personality disorders are some of those targets. However, a transdiagnostic approach is the hallmark of all third wave therapies: mental processes or emotions transversal to many psychiatric disorders such as shame, self-criticism, experiential avoidance or cognitive fusion are the main focus, emphasizing the context and human experience over any categorical diagnosis.