

Brief psychotherapeutic intervention in primary care university setting

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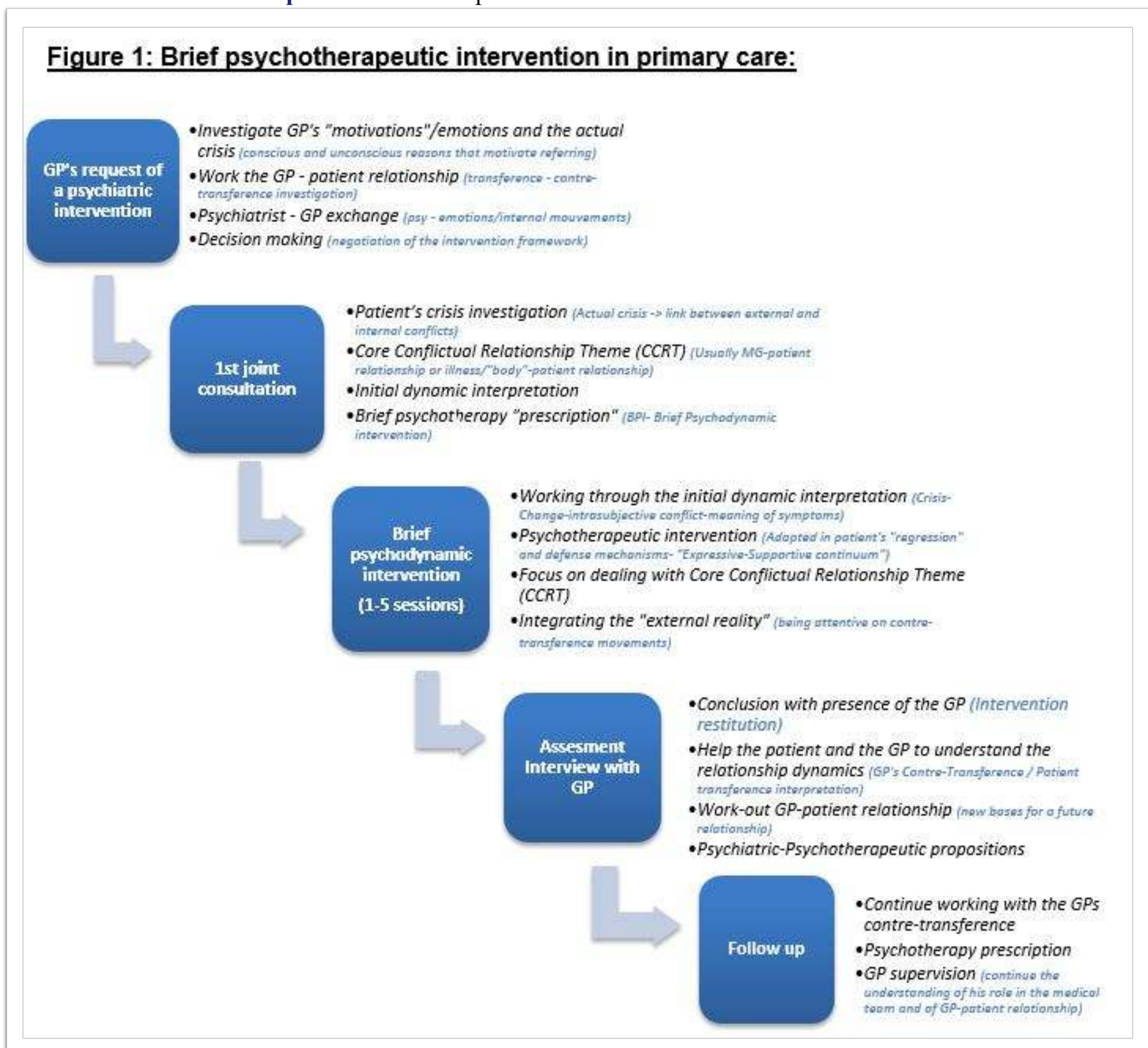
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Background: General practitioners (GPs) mostly use medication as a first line treatment of mental health problems (MHP), whereas psychotherapy has also demonstrated its effectiveness. We investigated the feasibility of a **Brief Psychodynamic Intervention in a Primary Care Setting (PCS)**.

Methods: An observational study was conducted during a year in a university outpatient PCS. Consultation-liaison (CL) psychiatrists conducted a “three step” Brief Psychodynamic Intervention, which were **adapted** to the **patients "regression" levels** and to their **defence mechanisms**, taking into account the heterogeneity of clinical presentations. GPs referred to the CL psychiatrist either when they detected a MHP or when they were confronted with **relationship difficulties**. Cooperative work was held.

Figure 1: Brief psychotherapeutic intervention in primary care:



Results: 64 patients were seen by the psychiatrist. Fifty-one (80%) of them received a **Brief Psychodynamic Intervention**. Various mental disorders were treated (mood, neurotic, somatoform, personality disorders etc.). A new **psychotropic prescription** was needed in 17 interventions (27%). GPs indicated that their expectations were fully satisfied by the proposed intervention.

Conclusion: Through **Brief Psychodynamic Interventions in a primary care setting** a “multilevel” balance is found between:

- (a) **Psychiatric** and **psychotherapeutic** interventions for the patient
- (b) The **internal** and **external reality** of the patient
- (c) An exposition of a psychiatric and a **psychotherapeutic reasoning** to **primary care clinicians**