

**“Our difficult job is to take a unified
view of the patient.....”**

Winnicott’s Arbeit

**“Psycho-somatic illness in its positive and negative
aspects“**

(Int. Journal of Psycho-Analysis, 47:510-516, 1966)

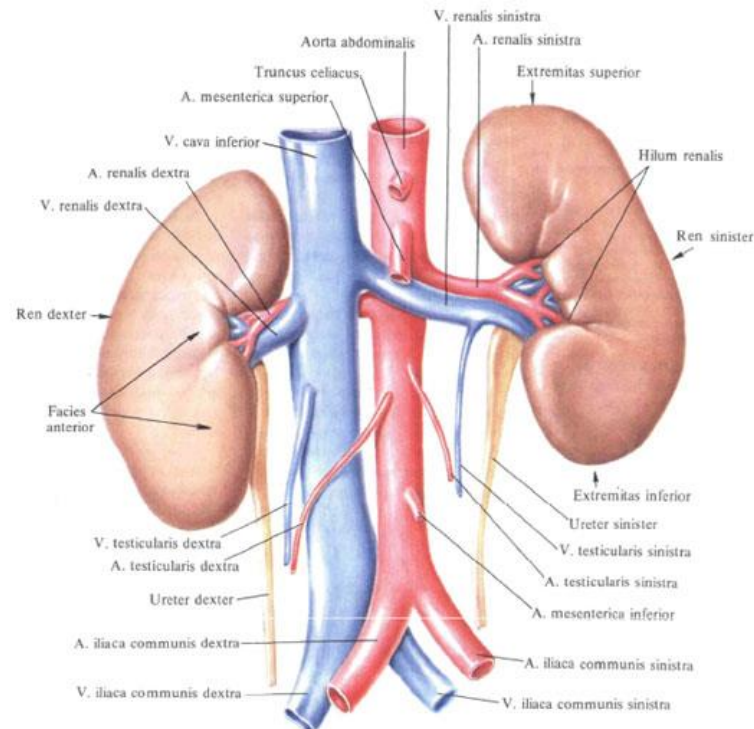
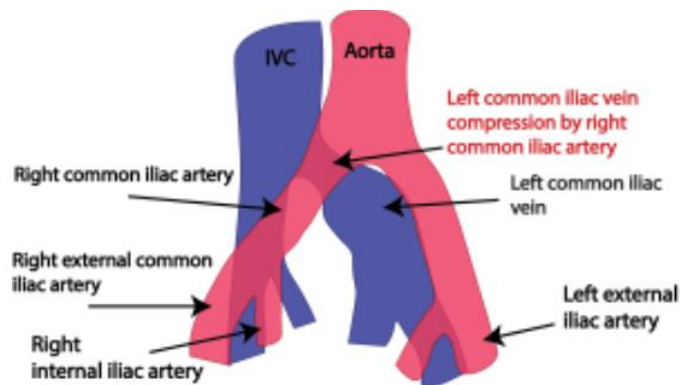
**Wiedergelesen von Kai von Klitzing anlässlich des runden
Geburtstages von Dieter Bürgin**

**“The psycho-somatist prides himself on his capacity to ride two horses, one foot on each of the two saddles, with both reins in his deft hands”
(p. 510)**



Fall 1: Georg, 13 Jahre

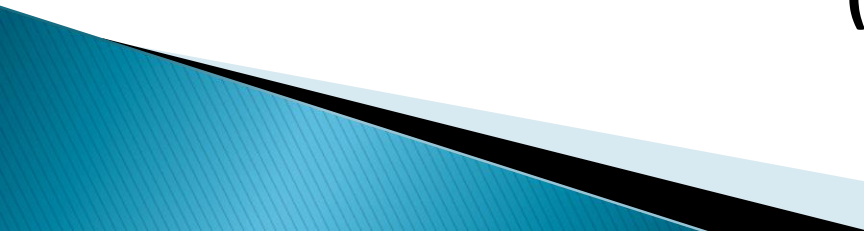
Symptome: Übelkeit, Schwindel, Bauchschmerzen
seit einem Jahr



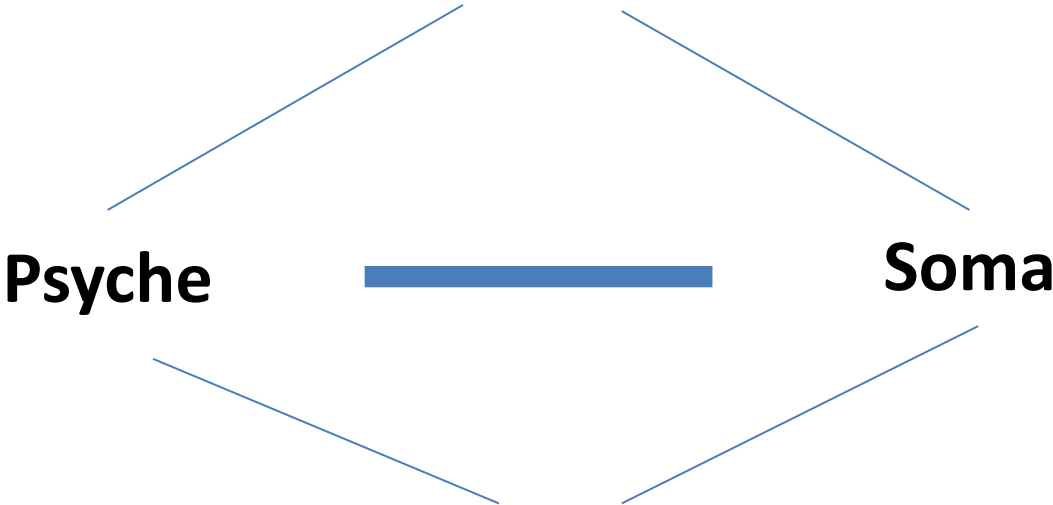
“The illness in psycho-somatic disorder is not the clinical state expressed in terms of somatic pathology (....). It is the persistence of a split in the patient’s ego-organization, or of multiple dissociation , that constitutes the true illness.”

“Many patients do not split their medical care into two; the split is into many fragments, and as doctors we find ourselves acting in the role of one of these fragments.”

**“Scatter of responsible agents”
(p. 510)**



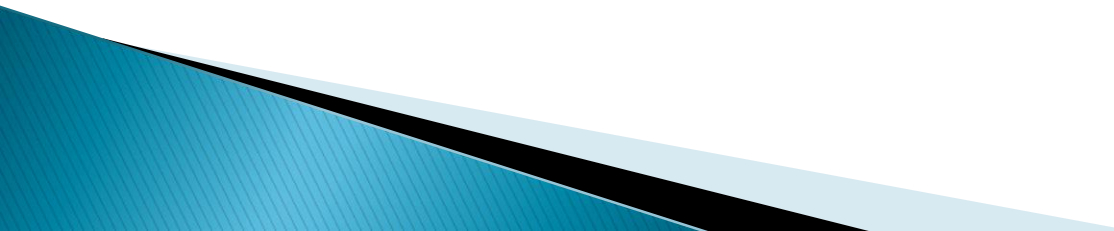
**Dissociation in the
patient's ego
organisation**



**Scatter of
responsible agents**

Psycho- Somatic: Two or More Sides of a Fence

“.... some patients have to keep the doctors on two sides of a fence, because of an inner need; (...) this need is part of a highly organized and powerfully maintained defensive system, the defences being against the dangers that arise out of integration and out of the achievement of a unified personality. These patients need us to be split up (yet essentially united in the far background that they cannot allow themselves to know about).” p. 514



Fall 2: Lisa, 15 Jahre alt



Fall 3: Lara, 12 Monate

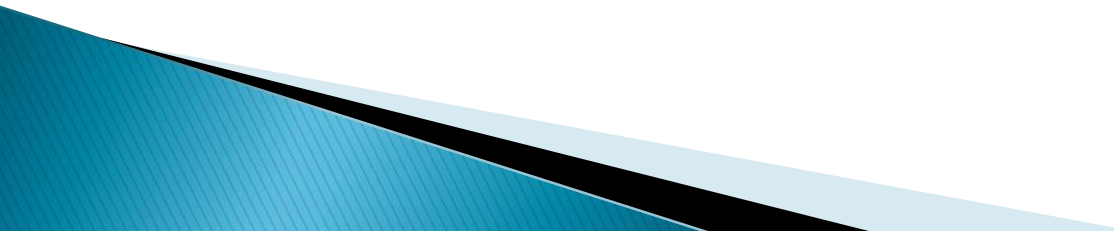
„Ich glaube, das liegt an mir, an meiner Angst. Ich habe Angst, dass sie mich beißt. Ich habe auch Angst, dass sie nicht überlebt. Meine Angst führt bei ihr zu einer Anspannung der Organe, ihre Organe ziehen sich deshalb zusammen und können meine Nahrung nicht aufnehmen.“

Positive Value of Somatic Involvement

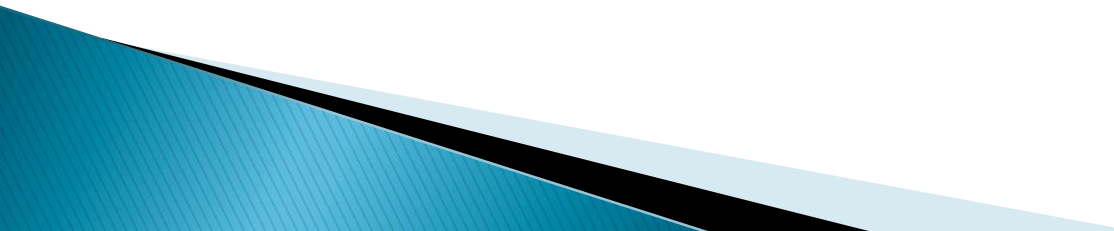
- ▶ **Defence is organized not only**
 - **In terms of splitting, which protects against annihilation**
- ▶ **but also in terms of**
 - **protection of the psyche-soma from a flight into an intellectualized or a spiritual existence (which would ignore the claims of a psyche that is built and maintained on a basis of somatic functioning)**

Split Up of Therapists

“Here there can be a return to my main idea, which is that the existence of a ‘psycho-somatic’ group of doctors depends on the patients’ need for us to split up for practical purposes, but to remain theoretically united by a common discipline and profession.” (p. 515)



Behandlungsverläufe

- ▶ **Georg: Aufspaltung der medizinischen Disziplinen**
 - ▶ **Lisa: von der Essstörung zur Depression und wieder zurück**
 - ▶ **Lara: durch Triangulierung zur Öffnung gegenüber der oralen Aufnahme**
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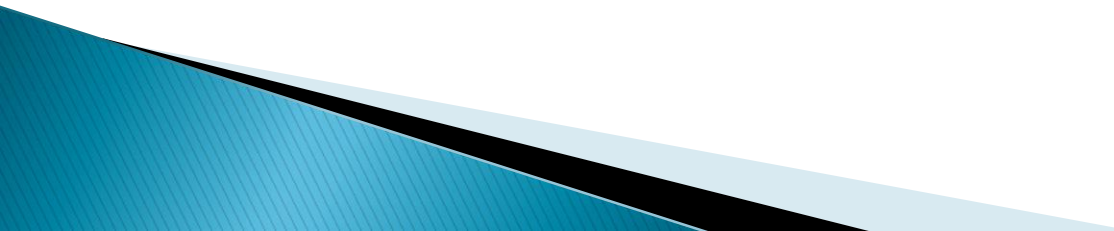
Unified View of the Patient

“Our difficult job is to take a unified view of the patient and of the illness without seeming to do so in a way that goes ahead of the patient’s ability to achieve integration to a unit.

Often, very often, we must be contented to let the patient have it, and to manipulate the symptomatology, (...) without attempting to cure the real illness, the real illness being the patient’s personality split which is organized out of ego weakness and maintained as a defence against the threat of annihilation at the moment of integration.”(p. 515)

Being in Touch with Psycho-Somatic Unity

“Psycho- somatic illness (...) has this hopeful aspect, that the patient is in touch with the possibility of psycho-somatic unity, and dependence, even though his or her clinical condition actively illustrates the opposite of this through splitting, through various dissociations, through a persistent attempt to split the medical provision, and through omnipotent self caretaking.” (p. 515)



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