

gna attendere un anno per vedere affiorare lievi differenze fra il gruppo di soggetti che partecipano a sedute frequenti e quelli che seguono un ritmo più lento; anche se tutti mostrano una netta diminuzione dell'ansietà manifesta, della gravità dei sintomi, un aumento della forza dell'io e un miglioramento delle relazioni interprofessionali, i soggetti del gruppo preso in psicoterapia più intensiva finiscono per rivelarsi più indipendenti, più positivi ecc... Gli autori quindi concludono che il periodo durante il quale il malato è trattato sembra dunque giocare, nell'insieme, un ruolo più importante della frequenza delle sedute.

Tali contraddittori risultati degli autori, relativi alla durata della terapia ed alla sua frequenza, non sono fatti per meravigliarci.

In pratica, MALAN, nel suo studio sulle psicoterapie brevi (d'ispirazione psicoanalitica) non limita esageratamente il numero delle sedute, che fluttua da dieci a quaranta, in funzione dell'evoluzione dello stato del paziente.

La pratica psichiatrica quotidiana familiarizza tutti i terapeuti con le differenze di « regime terapeutico » che essi cercano di adattare il più adeguatamente possibile a ciascun caso particolare.

Nondimeno, dagli studi della letteratura sembra venir fuori qualche principio generale che è bene ricordare a mò di sintesi:

1) sembra che trattamenti della durata di un anno diano risultati superiori rispetto a terapie terminate dopo periodi più brevi;

2) in generale, la frequenza settimanale delle sedute sembrerebbe particolarmente propizia a creare un buon rapporto medico-malato e ad aumentare le motivazioni dell'uno e dell'altro. Se la terapia dura come minimo un anno, il ritmo di una seduta per settimana finisce per rivelarsi vantaggioso rispetto ad una frequenza minore;

3) pertanto sembra che sia importante fissare preventivamente, di comune accordo, la durata globale della terapia (per es.: un anno) e la frequenza delle sedute (per es.: una volta alla settimana) per ottenere un rendimento terapeutico ottimale;

4) se si crede a CAPPON occorrono sei mesi di trattamento, da 15 a 35 sedute (a condizione di rispettare la frequenza ideale di una volta la settimana) per vedere sparire un sintomo, e almeno sette mesi per assistere alla scomparsa del sintomo principale.

(segue)

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