



DSPP BULLETIN  
Dallas Society for Psychoanalytic Psychology  
*Exploring and promoting the psychoanalytic perspective*

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**JANUARY MEETING PREVIEW**

**LARRY THORNTON, MD**

presenting on

***Psychosis/Severe Personality Disorders***

Hinshelwood describes the 'Scientific' attitude that those treating difficult patients often fall into. Such an attitude might be professional, helpful or even a blind spot. Regardless, it is important to trace those attitudes, their causes and their consequences. Our examination of Hinshelwood's work ends with Dr. Larry Thornton, M.D. presenting on working with difficult patients. Dr. Thornton is a graduate of the Dallas Psychoanalytic Institute, the Medical Director of Psychiatry at Zale Lipshy University Hospital, and on Faculty at UT Southwestern Medical Center.

patient. First person accounts by patients in successful recovery almost invariably include the presence of travel companions who are abidingly there through recovery. Those people must be "traveling companions, not travel agents", traveling along with the patient probably through multiple treatment episodes.

The strong treatment unit of patient and therapist and a consistent and available treatment setting may be the most important predictors of treatment success through multiple treatment episodes because they may help the patient return to that familiar and trusted setting when relapse begins. Of course, patients with serious mental illnesses often lack insight, i.e., they may not know that something is wrong. Therefore, the treatment program needs to have something to offer that they know they want. As Dr. Feiner observed, "If a typical staff member is asked what the patient needs, the response will be medications, case management, group therapy, activities of daily living. If the patient is asked what is needed, the response will be coffee, cigarettes, money, friends, a place to stay." An obvious conclusion is that the treatment setting needs to be able to supply things the patient thinks are needed.

**JANUARY MONTHLY MEETING**

<b>Date:</b>	<b>Wednesday, January 15, 2003</b>
<b>Social Time:</b>	<b>7:00 PM</b>
<b>Presentation:</b>	<b>7:30 PM</b>
<b>Location:</b>	<b>Pecan Creek Office Park 8340 Meadow Road Dallas, Texas</b>
<b>Speaker:</b>	<b>Larry Thornton, MD</b>
<b>Topic:</b>	<b>Psychosis/Severe Personality Disorders</b>

In the Mental Health Connections Program, the staff was meticulous about the use of language. Clients were called consumers not patients. When completing the program, the consumer went through graduation not discharge. Former consumers were graduates and invited to call and visit with good news as well as bad. Graduates formed an alumni association. The treatment team eschewed the use of the term "continuity of care" because it really means "continuity of records." Instead, "continuity of relationships" was emphasized or at least "continuity of team." This continuity was facilitated by parties, events, holiday celebrations, home visits, going out for coffee, etc., activities which were available to consumers after as well as before graduation.

**NOVEMBER MEETING REVIEW**

***"Alienation and its Assumptions"***

WITH

**JOEL FEINER, MD**

Reported by

**PATRICIA WOOD, PHD**

Dr. Joel Feiner presented his paper: "Alienation and Its Assumptions" at DSPP's monthly meeting in November, 2002. Dr. Feiner holds a B.A. from Yale and an M.D. from the Albert Einstein College of Medicine where he was also a professor. He has been at U.T. Southwestern Medical Center at Dallas for the last ten years. He talked with us about his work as Director of the Mental Health Connections Program, a comprehensive program for the treatment of patients with serious mental illness.

Serious mental illnesses are comparable to chronic not acute medical conditions and, as such, deserve quality restoration over time and treatment episodes. As Dr. Feiner said, "Every healing system restores morale. It engages a person and enlarges their capacity to experience life - one person at a time." As you can see from the quotations in this report, Dr. Feiner has a wonderful capacity to avoid psychological jargon and to talk about mental health issues in plain but memorable terms, which reflect his prowess as a master community psychiatrist. The discussion, which followed the presentation, became a lively consultation session with audience members talking with Dr. Feiner about their satisfactions and difficulties in working with seriously mentally ill consumers in recovery.

Emphasizing that "the relationship is the treatment", Dr. Feiner pointed out that despite wonderful medications for serious mental illness, something else is required to "grease the wheels from the prescription to the brain." That is, something has to enable the patient to participate in treatment and that something is a treatment team truly involved with the

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