



A bi-monthly broadcast of interesting and helpful ideas in local clinical psychology to support your practice.

Editor's Message

Dear colleague,

This newsletter is designed to add value to your practice by giving you access to useful information about the interface of psychology and general practice medicine. Each newsletter includes (a) a summary of an article from the psychological literature that is of high interest to GPs, (b) a serialised article on how a doctor can positively influence the behaviour of their patient to get better health outcomes, (c) an inspirational quote of the week and (d) an interview with a clinical psychologist.

Have a read and contact us for more information:

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News

Our new website has been launched and contains resources to support you and your practice.

www.bastenpsychology.com.au

Basten & Associates

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Literature Digest: Article of the Month

How to treat PTSD – Reassuring confirmation

Clinical Researchers in Sweden and England have extended knowledge about the role of exposure in the treatment of PTSD. * It is already well-documented that a particular version of cognitive behaviour therapy (CBT) is the most effective way of resolving the worst symptoms of PTSD. This version of CBT includes deliberate and prolonged exposure to the memory of the trauma. Deliberate, prolonged exposure to any feared stimulus leads to (a) habituation of the physiological fear response and (b) a change in dysfunctional beliefs and assumptions about that object. When the 'object' that we repeatedly expose ourselves to is a memory, the results are just the same. That is, we react to it much less, it is easier to tolerate it, and our confidence that we can manage it increases. These researchers asked teenagers who had been sexually assaulted to use prolonged exposure to the memory of their assault as the mainstay of their treatment and got good results compared to supportive counselling therapy and drop-out rates were acceptably low. It is reassuring that we can apply known, effective treatments to a population that we otherwise might consider too fragile to do such treatment.

For information about PTSD and its treatment, you can download free info sheets (for patients) and an assessment tool (for GPs) from our website: www.bastenpsychology.com.au/resources. Also read the interview with Emily, who is a trauma specialist at the practice, in this newsletter.

* **Prolonged Exposure Therapy for PTSD in Sexually Abused Adolescents.**
JAMA. 2013;310(24):2619-2620. doi:10.1001/jama.2013.283944.

Interview with a Basten Psychologist

EMILY GELSTHORPE (B.A. *hons.*; M.Psychol)

Q: Before this practice, where did you work?

A: As a part of my clinical psychology training I conducted research on the effectiveness of CBT for posttraumatic stress in a post-traumatic stress clinic in Adelaide. After graduation, I worked for an acute mental health team before moving to Sydney, where I found a role in another community mental health team that I still hold part time.

Q: What area of clinical work do you like the most?

A: I enjoy a variety of different areas. If I had to choose I would say working psychologically with individuals with Bipolar Affective Disorder and those suffering from posttraumatic stress reactions. Working with people who have gone through trauma is incredibly rewarding as the treatment is very effective at getting them back into their lives. They often feel lost and don't understand what is happening to them. Sometimes just educating them about trauma responses can lead to some relief.

Q: What inspires you as a clinician?

A: I have a lot of respect for the work my clients do in therapy. Therapy is not easy. People who have gone through trauma often spend a lot of time avoiding reminders of the incident, including talking about it. The work I do with them is actually to help them face the things that they are afraid of. This is done in a particular way to prevent re-traumatisation, however it is understandably very distressing for them. It takes a lot of courage. I respect them for that.

Q: What are your own mental health tips – what keeps your stress levels low?

A: I find that maintaining a healthy work-life balance, regular exercise and having a laugh with my family and friends helps me the most.





*“Success is not final,
failure is not fatal: it is
the courage to continue
that counts.”*

- Winston Churchill

Basten & Associates

Basten and Associates is a practice of clinical psychologists devoted to enhancing mental care in our community.

We have been providing psychological treatments since 1998 and have three locations in Sydney – Sydney CBD, Chatswood and Westmead.

We are passionate about making a special contribution to mental health and emotional wellbeing. We differ from other practices in several ways:

1. We are all clinical psychologists with post-graduate clinical training.
2. We have enough specialists for different conditions, so you will find the right psychologist to work with your patients.
3. Our clinicians are committed to staying up to date with research into the causes and treatments of common conditions.
4. We only use treatments that have a known basis of evidence showing them to be effective and then adapt and tailor these treatments to each individual after a thorough assessment.

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Series on Motivating Patients

Motivating patients to change their behaviour.

Introduction

As health professionals, we try to help people improve their health. One of the greatest obstacles to that is our patients following good general advice or adhering to prescribed treatments.

Some examples well known to all of us include patients acting on referrals and treatment directions, quitting smoking, reducing alcohol intake, exercising more, dietary changes, physical therapy exercises, taking medications exactly as prescribed or attending follow-up appointments.

In this series of articles (one part in each newsletter), Chris Basten offers you a summary of the better known and more effective ways to increase your patients' motivation to engage in health behaviours that they struggle to make.

There are broad categories of motivational enhancement interventions that any health professional can use. They are (a) Information provision, (b) Behavioural suggestions, (c) using your relationship with them patient and (d) 'motivational interviewing'. In this series, Chris provides bite-size ideas on how you can get better adherence and better behaviour change from within your patients.

For each strategy mentioned in this series, two case examples are used.

“Rob” is 48 and has Type 2 diabetes. He is overweight. He does not always test his BSLs reliably; he has not yet lost any weight, as recommended; and he can't recall what he has for lunch or dinner when asked. His BSL range is 3 to 17. He has stated that he is too busy with his own book-keeping business to attend courses or hospital clinics on diabetes education.

“Karen” is 60 and has chronic obstructive pulmonary disease. Her adult son is

often in trouble, needing her help with money, accommodation and baby-sitting for his children when he has custody but can't meet their needs due to his chaotic lifestyle. She gets frequent chest infections (for which she requests antibiotics) and keeps relapsing into cigarette smoking because that is the only way she feels she can deal with the stress.

Motivating Patients Part 1: Information Provision

Carefully worded and selected information alone can alter a patient's behaviour for the better. Take time to spell out exactly what you are thinking in terms of (a) the rationale for the treatment, (b) the likely benefits to the patient if they adhere to the advice and (c) the likely consequences if they do not.

For a man like Rob, who has Type-II diabetes, it is easy to assume that he knows all there is to know. However, Rob has mentioned that he is too busy with work to go to any diabetic education seminars or clinics, let alone read a whole book on the topic. So, mention all the obvious consequences of good (and bad) self-management that might grab his attention. Ask some gentle questions to see if he knows about (a) the more concerning consequences of running high BSLs and (b) if he knows how to keep them at a better level. Offer a sheet of written information. Ask what would enable him to get the info that he needs to make a difference to his health.

For Karen (who has COPD) think about the information that she needs to know that could motivate her to manage her health better. This could include steps that a person can take to prevent respiratory infection, information about poor recovery from each episode of infection, the likely progression of her illness and the likely benefits if she were to stop smoking now.

Next article in October:
On how monitoring can change behaviour.

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