

# **MEDICAL PSYCHOLOGY: CONCEPTS AND FRAMEWORK**

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# AGENDA

- DEFINITIONS of medical psychology
- LEVELS of medical psychology: individual psychological issues of the patient, patient-physician relationship, cultural and social issues
- MODELS OF illness: biomedical model, biopsychosocial model

# DEFINITIONS OF MEDICAL PSYCHOLOGY

- Medical psychology entails the attitude towards illness and the patient, attitude of the healthy and sick individuals towards healthcare systems, and also the attitude of the doctor towards the medical profession.
- The separation between clinical psychology – which is more case-related and active – and văzută ca acționistă și legată de caz - de medical psychology is artificial
- The tool used in medical psychology is the clinical method.

# ARGUMENTS IN FAVOR OF THE TERM MEDICAL PSYCHOLOGY (IONESCU G, 1995)

- By dealing with psychological issues surrounding the patient, its field is larger than the field of clinical psychology
- It synthesises facts, data and observations generated by clinical assessment, keeping in mind that it has an applied nature.
- Its core involves interpersonal relationships – which means more than direct, individualized observation.
- It has wider relationships with other fields of psychology
- It is a field of applied psychology, while clinical psychology is firmly rooted in patient assessment.

# THE RELATIONSHIP BETWEEN MEDICAL PSYCHOLOGY AND OTHER FIELDS

- MEDICAL psychology is intricated with other research fields: psychopathology, holistic psychology, antropology, psychoanalysis and dinamic psychology, cronobiology, etology, sociology, experimental psychology, neurophysiology.
- MEDICAL psychology has complex bilateral exchanges with these fields of knowledge

# MEDICAL PSYCHOLOGY AND PSYCHOLOGY

- MEDICAL psychology is connected with GENERAL psychology in the following areas:
  - ✓ Communication
  - ✓ Developmental psychology
  - ✓ Personality
- MEDICAL psychology is connected with SOCIAL psychology:
  - ✓ Patient-physician relationship – the impact of the medical profession on related professions: pharmacists, biologists, nurses etc.
  - ✓ From the biopsychosocial model of illness to patterns and models in the pharmaceutical field
  - ✓ Modern means of assessment of the therapy and medical care – quality of life

# MEDICAL PSYCHOLOGY AND MEDICINE

- The historical and methodological relationship between medical psychology and psychiatry is undoubtedly the deepest of all
- Almost all founding parents of medical psychology were PSYCHIATRISTS
- PsYCHIATRY is the main field where medical and clinical psychology draw information from, and also the field where medical and clinical psychology data and techniques are best put into practice

# POSTULATES IN MEDICAL PSYCHOLOGY

## 1. The individuality of the patient

- **„There is no illness, there are only sick people”**
- More clearly: there is no illness separated from the sick person with his/her individual characteristics and particularities
- Sometimes fighting the illness is essential for healing, some other times changing individual particularities of reaction is required
- From the viewpoint of medical psychology, these reactive particularities are physical and related to person and personality

# ***How does the individual specificity come into play?***

- There are inherited/genetic and environmental factors to be considered, as in any biological issue
- Environment is defined by:
  - Physical environment
  - Biotic environment (animals, plants, germs we interact with)
  - Social and cultural environment

# ***Environmental factors***

- Each environmental factor has a dynamic influence, according to the timing of the developmental stage (evolution or involution)
- Environmental factors mostly act through life events.
- One can state that nurture is more important in generating behavioral or somatic reactions (compared to nature – inheritance, genetics) in organisms on a higher level of phylogenetic development
- In humans, nurture (experience) is essential in shaping personality
- Illness overlaps both with nurture and nature and it often becomes a significant factor in the development of personality

# POSTULATES IN MEDICAL PSYCHOLOGY

## 2. Patient – physician relationships

- Patient-physician relationships involve contrary directions, from idealization to cynical despair
- According to the manner in which each “actor” plays the role assigned due to various expectations, either satisfying, effective relationships or suspicious, frustrating, disappointing ones are underlined
- Patients are specifically tolerant to the therapeutic limitations of medicine in a context of **respect** and **genuine communication and empathy** from doctors/medical staff.
- Doctors/medical staff deal with sick people, not clinical syndromes, and sick people bring a complex influence in the patient-physician relationship – a merge between biological factors, psychological dynamics and social context.

# Models of illness

- Under the influence of the discoveries made by Virchow (the cells) and Pasteur (microbes), medicine in the end of the 19th century and early 20th century was dominated by the strictly biological causality.
- Engel develops the ***biopsychosocial*** model of illness, underlining the overlap of specific (biological) and non-specific (psychological and social) factors
- This model is regarded as more accurate and is derived from the general theory of systems.
  - ***Biological System*** emphasizes the anatomical, structural, molecular underpinning of the illness and its impact on the biological functioning of the patient.
  - ***Psychological System*** emphasizes the impact of motivation and personality in experiencing illness and reacting to illness
  - ***Social System*** emphasizes the influence of cultural, environmental and family factors in expressing and experiencing the illness

# Models of illness

- Engel G stated that each of the aforementioned systems can influence and be influenced by the others
- The novel patterns of illness of the 20th – 21st centuries demand a complex explanation, approach and management, directed mostly in prevention through detection and change of risk factors
- The current stage of knowledge reveals that the traditional, biomedical model of explanation and management of chronic illnesses is restrictive and unilateral, because it does not take into account nonbiological variables .
- The biopsychosocial paradigm incorporates the state-of-the-art biological medicine and also psychological, behavioral, social, cultural, ecological variables, as factors related to the cause and evolution of illnesses (Matarazzo, 1980).

# Biomedical Model

- It is restraining, constrictive (takes into account only biological factors)
- It is a linear pattern of causality (from germ to illness)
- It incorporated Descartes's duality (separates body from psyche)
- It emphasizes illness as a state of being
- It disregards prevention of illness
- Focus on the sick organ, disregarding the sick *person*
- Responsibility for treating the illness is placed solely on the doctor

# Biopsychosocial Model

- **It** developed as a reaction to the biomedical one
- The causes of the illness are seen as multifactorial
- Psyche cannot be separated from body and vice-versa
- Focus on both health and illness
- Focus on both treatment and prevention
- Organ damage generates the person's distress
- Medical staff, society and the sick person are regarded as responsible for prevention, treatment and recovery

# **Patient-physician relationship from the biopsychosocial viewpoint**

- Patient-physician relationship is a key element of the biopsychosocial model.
- Any doctor should have both practical medical knowledge/skills, and knowledge about/insight into the specific psychological state of the patient.

# LEVELS OF PATIENT-PHYSICIAN RELATIONSHIP (apud Tatossian A.)

<b>LEVEL</b>	<b>OBJECTIVE</b>	<b>MEANS</b>
<b>Intellectual</b>	Understanding and explaining illness in accordance with scientific models	<b><i>Conceptualization</i></b>
<b>Affective</b>	Understanding the personality of the sick person with its subjectivity and mechanisms.	<b><i>Identification</i></b>