

PARANOIA

From a Dimension of Personality
To a Florid Psychotic Illness:
Theory and Psychotherapy

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THE PARANOID PROCESS IN PATIENTS WITHOUT DIAGNOSED PSYCHOSIS: IMPLICATIONS FOR THERAPY

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What is paranoia?

- ❑ Not simply suspiciousness and distrust
- ❑ Not simply unrealistic fear

- ❑ Emil Kraepelin identified several paranoid syndromes involving mistaken thinking
- ❑ Freud (1896): paranoia as reliance on projection of what is disavowed in the self
- ❑ Sullivan: a pathology of trust
- ❑ Panksepp: activation of the FEAR system

ON DIMENSIONALITY: WHY DO WE CONSIDER ONLY SOME SYNDROMES AS “CRAZY”?

The recent dominance of descriptive,
categorical psychiatry over dimensional,
contextual, inferential understandings of
mental suffering
Implications for empathy?

Implications of a dimensional view: The moral assumptive basis of psychotherapy

- ❑ Terence (163 BCE): “Nothing human is alien to me.”
- ❑ Sullivan (1965): “We are all more simply human than otherwise.”

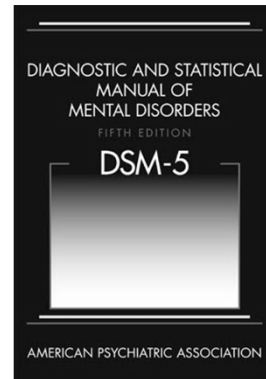
Primary goals of contemporary descriptive psychiatric diagnosis e.g., DSM, ICD

- ❑ Summarize core symptoms without assumptions about etiology or function

- ❑ Identify patients for research

Primary goals of inferential, dimensional, contextual diagnosis, e.g., PDM, OPD

- ❑ Delineate key themes and dynamics
- ❑ Understand the person's overall psychology
- ❑ Understand the person's suffering in context
- ❑ Set the stage for effective treatment



What Should Have Been



What Actually Occurred



Psychodynamic Diagnostic Manual (PDM)

A collaborative effort of the
American Psychoanalytic Association
International Psychoanalytical Association
Division of Psychoanalysis (DPA) of the
American Psychological Association
American Academy of Psychoanalysis and Dynamic Psychiatry
National Membership Committee on Psychoanalysis in Clinical Social Work

Psychosis as a level of mental functioning

Some examples of psychologies other than schizophrenia, schizoaffective, and psychotic mood disorders that can extend into the psychotic range:

- ❑ Eating disorders (e.g., severe anorexia)
- ❑ Compulsive disorders (e.g., hoarding)
- ❑ Dissociative and posttraumatic disorders
- ❑ Hysterical and factitious disorders
- ❑ Paraphilias

PARANOIA =

An internal experience that cannot be tolerated, usually because of a sense of humiliation, and that is consequently experienced as coming from outside

Paranoid syndromes

- ❑ Persecutory paranoia
- ❑ Paranoid hatred
- ❑ Erotomania (stalking)
- ❑ Paranoid jealousy
- ❑ Megalomania
- ❑ Projection of intent (Klein)

Etiologies

- ❑ Constitutional sensitivity
- ❑ Humiliation and disconfirmation of the child's emotional reality ("soul murder")
- ❑ Teasing, taunting, and bullying
- ❑ Caregivers who need a bad object and involve the child in their own paranoid dynamics
- ❑ Thwarting of normal efforts to separate
- ❑ Family atmosphere of distrust of the outside

The excruciating paranoid dilemma

- ❑ Closeness with others activates the conviction that relationships are destructive to the self or dangerous to the other, but
- ❑ Distance creates annihilation anxiety because the separateness of the self has not been supported.

Two dreams of a paranoid patient

(1) I had to go on a quest, some kind of test of my courage, and it involved going into a dense, dark jungle to meet with a powerful oracle or prophetess. As I was starting to make my way into the jungle, I realized that many other men had gone before me on this quest, and none of them had emerged from the jungle alive! I became terrified.

and

(2) From the back of a large room, I was watching some kind of cult ritual, in which various activities were happening up at an altar. The cult leaders asked for someone from the audience to come up. A young woman from the crowd volunteered and was heading for the altar, looking optimistic and trusting. I knew that she was going to be stripped, tortured, and murdered, and I woke up in a panic, feeling I had to warn her about what was going to happen.

Therapeutic Implications: What not to do

- ❑ Do not encourage regression
- ❑ Do not be too sympathetic
- ❑ Do not try to demonstrate personal goodness
- ❑ Do not be conventionally “neutral”

Therapeutic implications: What to do

- ❑ Be engaged, conversational, and self-disclosing, with humor toward self
- ❑ Exemplify respect
- ❑ Strike a balance between an attitude of authority and deep moral egalitarianism
- ❑ Be ruthlessly honest
- ❑ Normalize
- ❑ Invite normal grief

Classic psychoanalytic resources on treating paranoid states

- ❑ Anthony, E. J. (1981). The paranoid adolescent as viewed through psychoanalysis. *Journal of the American Psychoanalytic Association, 29*, 745-787.
- ❑ Aronson, T. A. (1989). Paranoia and narcissism in psychoanalytic theory: Contributions of Self Psychology to the theory and therapy of paranoid disorders. *Psychoanalytic Review, 76*, 329-351.
- ❑ Blum, H. P. (1981). Object inconstancy and paranoid conspiracy. *Journal of the American Psychoanalytic Association, 29*, 789-813.
- ❑ Josephs, L., & Josephs, L. (1986). Pursuing the kernel of truth in the psychotherapy of schizophrenia. *Psychoanalytic Psychology, 3*, 105-119.

More classic resources

- ❑ Karon, B. P. (1989). On the formation of delusions. *Psychoanalytic Psychology, 6*, 169-185.
- ❑ McWilliams, N. (1994). *Psychoanalytic diagnosis: Understanding personality structure in the clinical process*. New York: Guilford.
- ❑ Meissner, W. W. (1978). *The paranoid process*. New York: Aronson.
- ❑ Meissner, W. W. (1979). Narcissism and paranoia: A comment on “paranoid psychodynamics.” *Contemporary Psychoanalysis, 15*, 527-538.
- ❑ Meloy, J. R. (1989). Unrequited love and the wish to kill: Diagnosis and treatment of borderline erotomania. *Bulletin of the Menninger Clinic, 53*, 477-492.

Still more

- ❑ Oldham, J. M., & Bone, S. (1997). *Paranoia: New psychoanalytic perspectives*. Madison, CT: International Universities Press.
- ❑ Orion, D. (1997). *I know you really love me: A psychiatrist's journal of erotomania, stalking, and obsessive love*. New York: Macmillan.
- ❑ PDM Task Force. (2006, 2016 in press). *Psychodynamic Diagnostic Manual*. Silver Spring, MD: Alliance of Psychoanalytic Organizations. Sections on paranoid personality.
- ❑ Shapiro, D. (1965). *Neurotic styles*. New York: Basic Books. Chapter on paranoid personality.
- ❑ Steiner, J. (1993). *Psychic retreats: Pathological organizations in psychotic, neurotic, and borderline patients*. New York: Routledge.
- ❑ Waelder, R. (1951). The structure of paranoid ideas. *International Journal of Psycho-Analysis, 32*, 167-177.

Treating paranoid patients in the psychotic range: Newer resources

- Atwood, G. E. (2011). *The abyss of madness*. New York: Routledge.
- McWilliams, N. (2015). More simply human: On the universality of madness. *Psychosis, 7*, 63-71.
- Garrett, M., & Turkington, D. (2011). CBT for psychosis in a psychoanalytic frame. *Psychosis, 3*, 2-13.
- Garrett, M. (in press). Psychotherapy for schizophrenia. In Sadock, B. J. & Sadock, V. A. (Eds.). *Kaplan and Sadock's Comprehensive Textbook of Psychiatry*, 10th ed.
- Marcus, E. R. (2003). *Psychosis and near psychosis: Ego functions, symbol structure, treatment*. Madison, CT: International Universities Press.
- Saks, E. R. (2008). *The center cannot hold: My journey through madness*. New York: Hyperion Press.
- Lauveng, A. (2012). *A road back from schizophrenia: A memoir*. New York: Skyhorse.

Thank you!

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