

## Minutes

Friday, June 11, 1943 -- 8:30 p.m. 512 N. Rossmore

### Scientific Meeting

Dr. May Romm: Psychoanalytic Psychotherapy in Clinical Patients.

Dr. Romm stresses the urgent need to treat more patients in shorter times than classical psychoanalysis is able to do, and shows that it actually is possible to satisfy this need. The psychotherapeutic approach described by Dr. Romm is a psychoanalytic one insofar as psychoanalytic understanding of the dynamic structure of the patient is gained first, and this knowledge is then used for applying to him a planned treatment, partly with analytic, partly with non-analytic means. Among the non-analytic means are a systematic use of the transference, suggestion, and reassurances, and even active alterations of the patient's external situation and surroundings. Dr. Romm presents two cases as examples. The first one was a conversion hysteria who had been incorrectly diagnosed as schizophrenia. Her neurosis was based on a fantasy of an oral pregnancy; the patient reacted to an objective enlightenment extremely favorably. The second case was a borderline case with severe depersonalizations, who, after two years of treatment, (with one or two sessions weekly) is largely improved. The success was achieved partly by analysis, partly by positive transference gratifications, which gave to the patient what her real mother had not given her.

The discussion concerned first the diagnosis and dynamic structure of the second patient; then the general problems of a psychoanalytically oriented psychotherapy. Dr. Newhouse comments on technical difficulties of such psychotherapies, especially on questions of frequency and distribution of the sessions. Dr. Simmel shows the differences between "psychotherapy on psychoanalytic principles" and psychoanalysis. The treatment is more comparable to child analysis, and is looked upon by the patient as a gift given to him by the doctor. Besides, Drs. Brunswick, Fenichel and Timme participated in the discussion.

Fenichel