A panoramic view of Florence, Italy, featuring the Florence Cathedral (Duomo) with its large red-tiled dome, the Campanile tower, and the city's dense red-tiled roofs, set against a backdrop of rolling hills under a cloudy sky.

Family therapy based on DMM for an  
adolescent with psychosomatic problems :  
a case report.

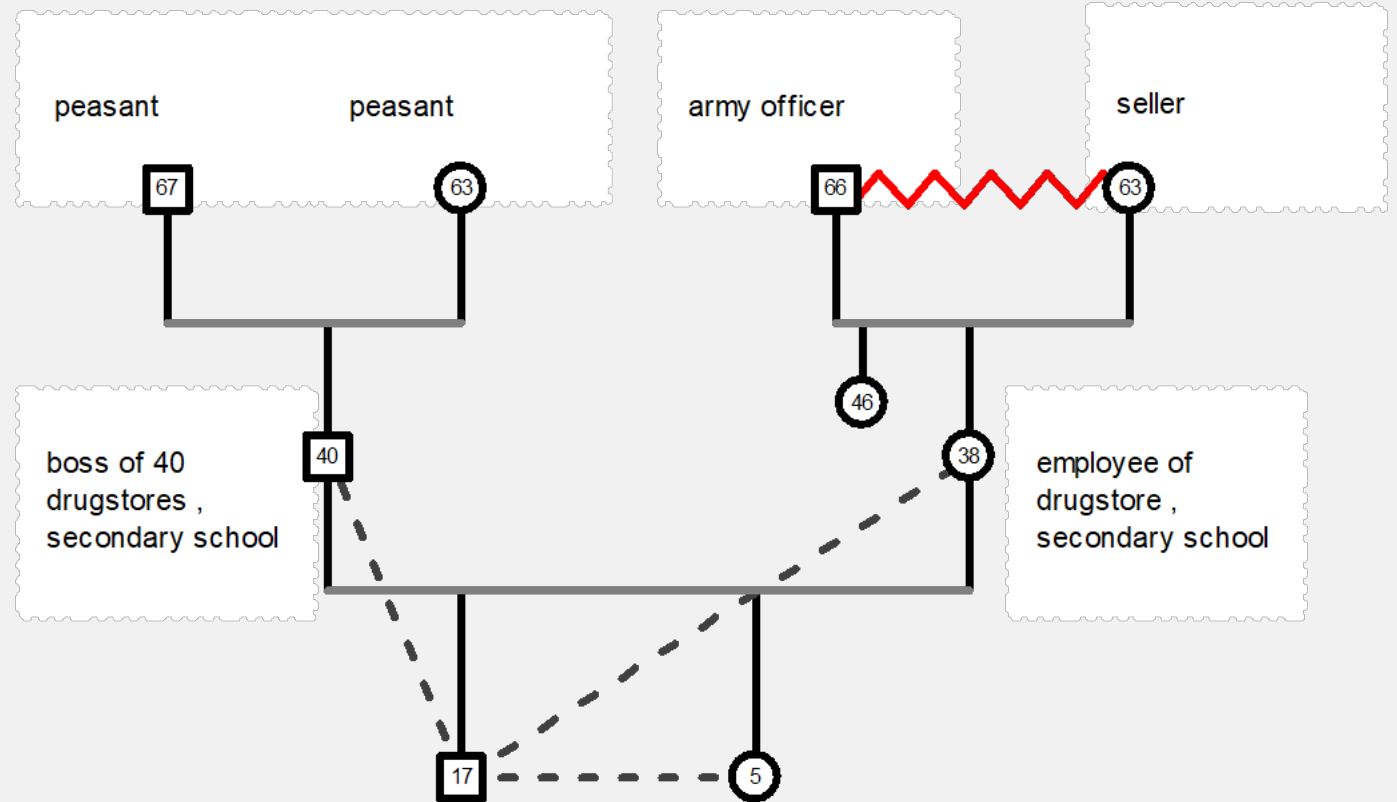
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# Introduction

- IP(the identity patient ): 17y,boy,year 11.
- The main problems: low mood, insomnia,headache and stomachache.
- Previous attempts: He had been to the general hospital to see the psychiatrist and was diagnosed depression and prescribed anti-depressants.
- Referral:As the parents refused to give medication to the boy, the doctor refers them to receive family therapy.

# Genogram

- IP lived with grandparents from 0-15 years old, and lived with parents since year 9.
- His sister was born when he was 12 years old, and his mother was diagnosed postnatal depression six months after her daughter was born.



# Process of Family Therapy

- The systemic family therapy was provided once every week, the symptom was relived after 5 weeks , then the therapy supposed to be changed to 1 session every 2 weeks.
- On the thursday of the 6th week, IP Felt his symptom getting severe, and got the appoingtment of 6th session of therapy.



# Process of Family Therapy

- During the 6th session ,he felt a severe stomache, but he refused to let his parents knew and confort him. When the therapist passed a pillow to him ,his stomache relived soon.
- The therapy resume to once a week, and the therapy change from family interview to individual interview .

# Process of Family Therapy

As the relationship between IP and parents did not improve much after 12 sessions, I discussed with my colleagues about follow hypothesis:

H1: Did the boy use type A strategy (A6?)

- the boy said he had stomachache more than 10 times every day since junior high school, but he never told parents
- During the 6th session therapy, he suffered stomachache suddenly, but refused to let the parents come in to comfort him.
- The parents said that they never saw the boy crying before .

# Process of Family Therapy

**H2:** Although the parents seems very positivly to improve the relationship to the boy, the relationship did not change so much according to my observe and the feedack from both IP and parents. Why? Did it relate to false positive affect of parents? what were the parents' strategies?

# Process of Family Therapy

H3: What made IP's symptom relieve in the first 5 sessions? Did it mostly relate to the empathy and the relationship between the therapist and the boy?

According to the 3 hypothesis, Parents Interview(PI), and Adult Attachment Interview(AAI) for both parents were provided.



# DMM

- Family interview was given based on DMM.
- Circular question was used to let them discuss the strategies by themselves.
- Individual therapy was given to the boy after that until 5 months later when the relationship between IP and parents improved significantly.

# Conclusion

- AAI for the mother let her inhibited emotion expressed and understood , and this made the basis to establish emotional bonding between mother and the boy.
- Let the family discuss their attachment strategies by themselves was the key to promote the communication mode to change.



*Bertinoro, 2008*



*Cambridge, 2010*

To download program materials, click here  
<https://www.iasa-dmm.org/iasa-conference/>



*Frankfurt, 2012*



*Miami, 2015*