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Psychotherapy for Medically Unexplained Pain: A randomized clinical trial comparing intensive short-term dynamic psychotherapy and cognitive behavior therapy

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ABSTRACT

Background: The efficacy of intensive short-term dynamic psychotherapy (ISTDP) for medically unexplained pain (MUP) remains open to debate because of a paucity of high-quality studies. Aims: This study evaluates ISTDP as a treatment for MUP outpatients by comparing it to the established evidence-based treatment cognitive behavioral therapy (CBT) in a randomized clinical trial.

Methods: A total of 341 adults with MUP were randomly assigned to 16 sessions of individual manualized CBT (N = 164) or ISTDP (N = 177). The groups were assessed at baseline, after 16 weeks of treatment, and at the three-month follow-up. The primary outcome was perceived pain assessed using the Numeric Pain Rating Scale (NPRS). The secondary outcomes were psychological distress, depression, and catastrophic thinking, and also increases in the use of relaxation as a coping strategy. The cognitive variables included self-efficacy, catastrophizing, and coping strategies.

Results: In the intention-to-treat analysis, the ISTDP and CBT groups both showed improvement in the primary outcome after treatment. Pain symptoms in both conditions were significantly reduced. Both ISTDP and CBT groups demonstrated reductions in psychological distress, depression and catastrophic thinking, and also increases in the use of relaxation as a coping strategy. The CBT group showed an improvement in self-efficacy that was not obtained in the ISTDP group. Also, significant differences were not observed in the primary and secondary outcomes at the three-month follow-up compared to post-treatment. Overall, both treatments were equally effective at the three-month follow-up.

Conclusion: Our results suggest that ISTDP may provide an effective alternative therapy for medically unexplained somatic symptoms of pain.
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