

REINFORCEMENT OF RISK TAKING BEHAVIOUR IN INTERPERSONAL RELATIONSHIPS IN PATIENTS WITH MS: A NEW THERAPEUTIC TOOL, POSSIBLY?

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OBJECTIVE: Hypothesis Investigation: reversal of acquired conflicting emotional patterns into beneficial social adaptation could affect disease course.

METHOD: Twelve patients with MS (PwMS) admitting possibility disease course be connected to emotional impasses, entered MS management experiment. Phase one (diagnostic): series of interviews to establish disease-specific pathology of interpersonal exchanges. Phase two (therapeutic re-education): to reinforce risk taking behavior in interpersonal exchanges undertaken by therapeutic caring group. Follow up duration 3-5 years.

RESULTS: 1. All PwMS victims of parental malpractice: diminishment of the child's free will and uniqueness, resulting in unresolved dilemmas when called to act upon own initiative.

2. All patients have same conflicting manner of interaction: want to – afraid to = fear of rejection.

3. Evolvement into obedient executive personalities, constantly suppressing unbiased contribution to minor or major exchanges.

4. Therapeutic strategy: a. offering constant supportive and sheltering monitoring, b. fostering disabled initiative, c. encouraging attempt failures at taking initiatives, possibly enhances course of disease.

5. Two PwMS remained in retraining phase. No exacerbations.

6. Concise with dilemma difficulties, ten PwMS withdrew at point of having to chose between acquired behavioural patterns and risking re-education. Disease course worsens.

CONCLUSION – PROPOSAL: Could early, rigid suppression of initiative be the pathological mechanism resulting in MS in susceptible humans? Should a thorough, methodical, supportive re-training of PwMS be part of the disease management regime?