

Editorial

## **Psychiatry in the 21<sup>st</sup> century: integrating concepts**

Just a few days ago, from July 13<sup>th</sup> to July 16<sup>th</sup>, we had the opportunity to participate in the *VII Jornada Gaúcha de Psiquiatria* organized by our Society, which this year comprised discussions on “Psychiatry in the 21<sup>st</sup> century: integrating concepts.” The fructiferous and thrilling discussions carried out about the need of defining, separating and integrating concepts, with the goal of fostering an effective contemporaneous psychiatry, are now approached in the present editorial.

The relationship between mind and brain has always been the object of continuous discussion and controversy between scientists. The use of terms like “mind” and “brain” in psychiatry is often associated to a polarization of concepts, as if they were separate entities. Concepts such as environment, psychosocial and psychotherapy tend to be associated with the “mind”, while genetics, biology and medication are often associated with the “brain.” The terms “biomedical” and “psychosocial” define two paradigms, a separation that has been producing a paralyzing effect on the development of the science dedicated to the mental health. Such a dichotomy and polarization is out of date and constraining. Psychiatrists from the post-Cartesian age tend to understand the mind as a brain activity: mind and brain are inextricably connected. The discussion on the terms “mind” and “brain” in the contemporaneous psychiatry reflects that they represent, today, different forms of thinking about patients and treatments.

During the first half of the 20<sup>th</sup> century, psychoanalysis made a revolution on our understanding of the mental life, aggregating new knowledge on unconscious processes. In the second half, such progresses had a smaller impact. Psychiatry experienced a period of psychoanalytic reductionism in the 1960's and 1970's, not taking into account the complexity of the neurochemical etiopathogeny. Later on, it was threatened by the biologic reductionism, which left

the emotional experiences, and interpersonal meanings and processes aside, focusing on molecular genetics and neurotransmitters. The 1990's can be considered the "decade of neuroscience," because important advances were made. As a result, this start of the 21<sup>st</sup> century seems to be ready for integration between concepts and knowledge.

If we do not strive for the integration of concepts, psychiatry is at risk of being polarized, as a science of "mind" and "brain". Obviously mind and brain are inseparable in the clinical practice, but we separate them only for discussion reasons. Mental phenomena take place in the brain, but the emotional experience also affects it, as well as the environment. Neither the brain nor the genetic expression of an individual is static; both are constantly influenced by the environment and vice-versa.

Part of the polarization between mind and brain is related to an old point of view, which considers psychotherapy as a treatment for "psychological" disorders, while the "biologic" ones must be managed with medication. The integration of the psychosocial with the biologic is the core of psychiatry: psychotherapy can change the way the brain works, and psycho drugs can reduce symptoms, thus benefiting the therapy as well. This integration is a constant challenge. Drugs are very important and necessary in many psychopathologies, they can really reach symptoms, but they do not produce the emotional understanding necessary to the individual's well being.

Psychotherapies are very important in the understanding of the human mind, but find some limitations in the relief of severe symptoms. In practice, the integration of concepts and the combination of treatments can provide mutual benefits to the approach of a psychopathology.

Lack of experience and plurality of some professionals contribute to dissociation between mind and brain. One of our challenges is to provide strength to psychiatry, taking into account the specificity and efficacy of each subject that compose it. Psychiatry must search a better integration and dialogue with different fields of knowledge, and must be aware of the real requirements of each patient. Scientific publications are somehow responsible for such task.

Research that use empirical and/or qualitative methods are in general more adequate to investigations carried out in psychotherapy and psychoanalysis. They must be as stimulated and published as those that use quantitative methods in neuroscience, clinical psychiatry and other areas. The integration between concepts and knowledge, as well as the respect for differences and specificities, can assess and validate the results, efficacy, changes and technical limitations of every therapeutic modality.

The psychiatrist of the globalization age is now facing new types of disorders: traumatized patients, illnesses related to “emptiness”, eating disorders and many others. We also have patients who do not have time to think and reflect, and who look for immediate gratifications, mediated by the excessive consumption and narcissistic cultures. Will this be a product of a new era?

Concluding, the psychiatrist of the 21<sup>st</sup> century must avoid the dichotomy mind-brain and, inexorably, recognize the new trends of the contemporaneous psychiatry, in which the environment affects genetics, the psychosocial produces biologic changes in the brain, and medication and psychotherapy work together in brain changes. Moreover, psychiatrists will have to recognize that the “brain” and “mind” languages are necessary in many therapeutic modalities, as in major depression, in traumatized patients, in borderline personality disorder patients and many others. This integration is a great challenge for psychiatry in this new century.

These are some of the reasons why the *Revista de Psiquiatria do Rio Grande do Sul* highlights, in the present editorial, one of its main goals: the responsible and careful publication of the scientific knowledge with a plural and integrative line of thought, essential to the contemporaneous psychiatrist.

Enjoy your reading.

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*Editors*