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*Department of Psychology
University of Turin, Italy*

SYMPOSIUM SESSION

conditions, the cases discussed in the current paper seem to suggest a different clinical meaning of AN symptoms in adolescence when gender identity issues are involved. In particular, pathological eating behaviors (food avoidance and weight loss) could be assessed as a dysfunctional coping strategy adopted to gain control over a body developing in an unwanted direction and to block the irreversible pubertal physical changes. Puberty in GD adolescents is in fact described as a dramatic moment where psychological problems tend either to arise or intensify. Furthermore, data within a year follow up are reported and discussed, showing how an early medical intervention with gonadotropin-releasing analogs (GnRHa) is associated with both psychological and social functioning improvement. Mental health professionals should therefore always perform a specific and detailed assessment on sexual identity and gender identity within the evaluation of apparent eating disorders in adolescents. AN symptoms may in fact underline a GD diagnosis.

THE KEY ROLE OF CLINICAL PSYCHOLOGY FOR MEDICAL CONDITIONS

Proposer: Castelli Lorys (1)

(1) Department of Psychology, University of Turin

Discussant: Castelnuovo Gianluca (2,3)

(2) Department of Psychology, Catholic University of the Sacred Heart, Milan

(3) Psychology Research Laboratory, Istituto Auxologico Italiano IRCCS, Piancavallo, Italy

The symposia aimed at highlighting the relevance of clinical psychology and its main concepts for the diagnosis and treatment of patients affected by

medical conditions. Overturning the usual causal direction body-mind, the studies depicted in the present symposia exemplify how an accurate assessment of the psychological level could contribute to better understand the somatic level, i.e. somatic symptoms. This is all the more so true when we have to face complex and heterogeneous medical conditions such as functional somatic symptoms/syndromes. Irritable bowel syndrome (IBS), Fibromyalgia (FM), as well as pain experience following surgery are clear and distinct examples of this. Three different studies focusing on how psychopathological aspects (such as depression, anxiety, rumination, alexithymia) impact on somatic symptoms, especially on pain, will be presented. A final presentation will provide an updated overview of the scientific evidence on emotional and cognitive aspects implicated in pain experience.

PSYCHOLOGICAL PREDICTORS OF PERIOPERATIVE PAIN IN PATIENTS UNDERGOING ORTHOPAEDIC SURGERY

Giusti Emanuele Maria (1), Manzoni Gian Mauro (2,3), Molinari Enrico (1,3)

(1) Department of Psychology, Catholic University of the Sacred Heart, Milan

(2) E-Campus University, Novedrate, Italy

(3) Psychology Research Laboratory, Istituto Auxologico Italiano IRCCS, Piancavallo, Italy

Acute postoperative pain is the most frequent and unpleasant symptom reported by patients undergoing orthopaedic surgery. Pain in general is a complex and multidimensional experience involving sensory, affective and cognitive components and several studies addressed the role of the biopsychosocial predictors of its intensity both before and after surgery. The aim of the present longitudinal study was to explore the impact of these

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