Title page

Psychotherapeutic analysis

The film “Awakenings” (1990) is based on liver Sack’s memoir of 1973. Leonard Lowe is the main character of the film who is being treated by a drug. Dr. Sayer treats the patients with a drug who appears to be catatonic with the aim of giving them a new life. Leonard with other patients develops tolerance after taking the drug but the result starts to diminish with time. Catatonia is a neurological disorder in which patients undergo neurological motor immobility. This lethargic epidemic exhibits comma like state in which patients are unable to respond. The worldwide stigmas depicts that the patients who develop catatonia can never live a life like normal human beings. Dr. Sayer took the initiative of helping these patients to recover from catatonic disorder. He administered L-Dopa drug that improved the functioning of the patients and they also exhibited enhanced tolerance. The film reveals the significance of therapeutic relationship between the doctor and Leonard. Effective therapeutic relationship between the doctor and the patient remains makes chaotic environment less disturbing for Leonard. Dynamic relationship depicts that care and dedication from the doctor remains one of the crucial factor for helping patients with complex neurological disease.

DSM-V defines catatonia as “a clinical syndrome characterized by a distinct constellation of psychomotor disturbances”. It can be further categorized as; “retarded and excited. Catatonia of the retarded type is associated with signs reflecting a paucity of movement, including immobility, staring, mutism, rigidity, withdrawal and refusal to eat, along with more bizarre features such as posturing, grimacing, negativism, waxy flexibility, echolalia or echopraxia, stereotypy, verbigeration, and automatic obedience” (Rasmussen, Mazurek, & Rosebush, 2016). Character’s diagnosis of Leonard in terms of DSM-V depicts that before receiving treatment he faced difficulty in responding to the situations. He was in his comma like state and lacked the freedom of doing anything.

Etiology of Leonard

Leonard was undergoing retardation and excitement. The assessment of Dr. Sayer depicts that Leonard wanted to wake up from his years of sleep and enjoy the joys of life. He wanted to have the freedom of doing things like walking, eating, dancing and much more. He asks the doctor, “why do we not see the positive side in life but dwell on the negative part of life?” The feelings of the patient indicates that he wanted to do things with his free choice, without clinical staff’s supervision. He was full of positivity and wanted to see the good side of life and the world (Allan, 2007). The behavioral analysis reflected that the inability of walking freely or outside the hospital promoted negative feelings of anger and hopelessness in Leonardo. He felt that without freedom he is unable to attain his goals. The moods of the patient shows that he was always willing to do things of excitement (Allan, 2007).

At a young age Leonard was diagnosed with encephalitic sleeping sickness. After 30 years he was treated with a drug that eventually failed. He went back to coma after living some time in consciousness. DSM-V states that the early diagnosis of catatonia is possible that prevent the patients from developing more complex psychiatric conditions such as schizophrenia. Immobility and mutism are two common factors that confirm presence of catatonia. Acooording to DSM-V the charcateristics of this disorder include, “catalepsy, waxy flexibility, stupor, agitation, mutism, negativism, posturing, mannerisms, stereotypies, grimacing, echolalia, and echopraxia” (Rasmussen, Mazurek, & Rosebush, 2016). Stupor and inertia are two common characteristics of the diseases.

Dr. Sayers used his experience of human subjects for studying the complications of patients with catatonic conditions in the hospital settings. Psychoanalytical assessment of Leonard depicts that he had the desire of taking active part in life and related activities. However his condition prevented him from enjoying the life. His views exchanged with the doctor indicates that he is still struggling with his unconscious desires of living a normal life. Dr. Sayer used psychoanalytical approach for studying the mind and behavior of the patient. He focused on uncovering the unconscious thoughts of Leonard (Burley, Randy Stinnett, Barrera, & Dobson, 2015). Assessment of Leonard and other patients reflected that they had undergone encephalitis lethargica in the past. Leonard was fully conscious when he was awaken.

Analysis of the therapeutic relationship

Two interventions adopted by Dr. Sayer for treating Leonard include building therapeutic relationship and Levodopa drug. The film depicts that the doctor has realized the severity of Leonard’s condition. His knowledge helps him in understanding that single intervention is not effective for treating the patients of catatonia. In-depth analysis of the films portrays the positive implications of strong therapeutic relationship between the doctor and the patient. Dr. Sayer played a positive role in the recovery of Leonard because he emphasized on building relationship of trust and care. Empathy remains one of the visible trait exhibited by Sayer during his interaction with Leonard. Dr. Sayer exhibited deep sense of humanity and care for his patient. He believes that the drug might not be effective in the long-term but his relationship with patient could be stronger. Despite life medical advances, healing one of the fundamental aspects for patient’s recovery. Empathy is seen as one of the visible attribute of Sayer’s personality during his interaction with Leonard. This reflects his ability of recognizing patient’s thoughts and emotions. This also indicates a person’s willingness of placing himself in other person’s state and experiencing the things (Rasmussen, Mazurek, & Rosebush, 2016). Sayer displayed composed and calm personality that allowed him to understand the emotions of Leonard. Empathy is identified as an important aspects in therapeutic relationships between the healthcare provider and the patient. Throughout the interaction of Sayer with Leonard, he also exhibited the attribute of compassion. The communication between the doctor and the patient depicts that Sayer exhibited patience, positivity and tolerance. These attributes played profound role in building close association with Leonard. Another prominent aspects of his personality was to focus on building self-worth in Leonard.

Levodopa acted as a miracle drug that awakened the patients from slumber. The later implications of the drug exhibits that it had side effects including exaggerated sensibility. Psychosocial and emotional factors had profound impacts on the patient. The treatment (Levodopa drug) had some benefits for the patient such as it helped Leonard in regaining consciousness. He wake up from thee slumber and takes part in the life. The drug is effective for controlling movement and brain retardation. The dose is based on the medical condition of the patient, and prescription of the doctor. It is also effective for controlling muscle stiffness, tremors and poor coordination of muscles (Rasmussen, Mazurek, & Rosebush, 2016). The drug has some disadvantages including dizziness, nausea, vomiting, insomnia and loss of appetite. Frequent changes in moods such as confusion, depression and hallucinations are also the side-effective of the drug. The clinical researches have proved that the drug only has short-term benefits and it is not adequate for curing the disease permanently.

Initial results of L-Dopa were positive because Leonard returned to his normal life and gained consciousness. After some time he started experiencing convulsions, paranoia and psychotic behavior. The symptoms of Parkinson begin to return. The experience of Leonard was not different from other patients. The assessment of the treatment depicts that it was effective only for a limited time. This also confirms that no permanent treatment of the disease existed (Allan, 2007).

I think the alternative approach that the doctor could use for treating the patients with catatonic disease is Gestalt Therapy. The patients like Leonard could rely on this therapy for understanding what is happening in their lives. This is a client-centered therapy and focused on helping the patients to concentrate on their present and by forgetting their past. Patients who wake from coma are more likely to regret the loss of years. Their feelings of self-blame or pity could undermine their ability of focusing on their healthy recovery. By adopting Gestalt Therapy the doctors can make the patients accept their reality of life and encourage them to more forward in lives (Burley, Randy Stinnett, Barrera, & Dobson, 2015). Self-regulated behaviors can be promoted by integrating Gestalt Therapy. Therapists can help patients to build self-awareness and help patient in understanding his current situations. Acceptance remains a biggest challenge for the patients who have undergone catatonia.

I think an appropriate intervention for dealing with Leonard would be adoption of behavior therapy. This will be an effective tool for helping patient in improving his behavior by changing his thoughts. By adopting behavioral therapy it is possible to help the patients in realizing that they must follow goals. Both therapies require building strong therapeutic relationship with the patients of catatonia. Sense of belonging and care can be effective elements for promoting positive behavior. The doctor and therapist can help patients in developing sense of self-worth that will improve their participation in normal life activities.

References

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