



## 德中心理治疗研究院

### DEUTSCH-CHINESISCHE AKADEMIE FÜR PSYCHOTHERAPIE

Department of Psychosomatic Medicine and Psychotherapy, University Hospital Freiburg  
(Prof. Dr. med. Michael Wirsching, Prof. Dr. med. Kurt Fritzsche)

#### Current Projects:

1. BMBF: Developing of transcultural research studies in psychosomatic medicine and psychotherapy in China and Vietnam
2. DAAD: Masterdegree program in psychosomatic medicine and psychotherapy in Shanghai/China
3. Sino-German Center for the promotion of research in Beijing: Patients with somatoform disorders/functional symptoms in China
4. Development of Balint groups in China in cooperation with the German Balint Society
5. Beijing Cancer Hospital: Communication skills training for medical doctors.

#### Project 1. BMBF: Psychosomatic Medicine and Psychotherapy: Development through East-West Exchange (China and Vietnam)

**Partner: Vietnam** - Hanoi Medical University, Dr. Ngyuen Kim Viet / Hue College of Medicine and Pharmacy, Dr. Vo Van Thang, Ngyuen Huu Cat / University of Medicine and Pharmacy Ho Chi Minh City, Dr. Ngo Tich Linh

**China** - Shanghai, Tongji University, Prof. Wenyuan Wu, Prof. Xudong Zhao / Peking, Union Hospital, Prof. Dr. Jing Wei / Peking, Cancer Hospital, Peking University, Prof. Dr. Lili Tang

**Australia** - Queensland University of Technology, Prof. Michael Dunne

Psychic and psychosomatic disorders are increasing worldwide and cause a substantially large part of economical and social expenses in the public health sector. Many Asian countries are especially affected by this negative development due to the great cultural and social changes in the modern society. Researchers from Germany, China, and Vietnam carry out transcultural research studies to combine the strength of the western psychosomatic medicine and psychotherapy with the advantage of the eastern medicine. In this way, we can gain more knowledge and open new perspectives in the treatment of psychosocial diseases.

#### **Scientific Background**

Psychic and psychosomatic disorders such as depression, anxiety, and somatoform disorders become the most frequent nonlethal diseases. Studies show a very high prevalence of psychic diseases. In China, for example, the prevalence rates lie between 30 and 50 percent

for all patients visiting a hospital. Early diagnosis and effective treatment are therefore of great importance. The Medical Center of University Freiburg Germany (Prof. Wirsching, Prof. Fritzsche) is well-experienced in treating such diseases as well as in qualifying medical professionals in this field with an internationally proved training curriculum. The prior research studies in cooperation with Chinese and Vietnamese partners have shown a number of important cultural similarities or differences in, for example, the doctor-patient-communication, the concept of diseases, the diagnosis, treatment approaches, etc.. The integration of the eastern medicine such as the Chinese traditional medicine will provide new, important impulses for the research development, for example, in the treatment of somatoform disorders and pain.

### **Project and Objectives**

*In this project we will conduct transcultural research studies and train the medical professionals in China and Vietnam in the field of psychosomatic medicine and psychotherapy. The research focuses mainly on epidemiology, concept of the disease, psychological factors for diseases, and the comparison of various treatment methods. This project aims to establish a German-Asian research network and to develop integrative, multimodal treatment methods for psychosocial diseases. Besides the enhancement of the psychosomatic medicine and psychotherapy, this project may also contribute to the improvement of the public health system in countries where the rapid cultural and social transformations are taking place.*

### **Shanghai, Tongji hospital and Beijing, Union hospital: Advanced training in Psychosomatic Medicine and Psychotherapy (2 years)**

#### **Funding:**

German Federal Ministry of Education and Research (BMBF)

Duration: 01 July 2010 - 30 June 2012

#### **Contact:**

Dr. Jie Song

Medical Center, University Freiburg, Germany

Department of Psychosomatic Medicine and Psychotherapy

jie.song@uniklinik-freiburg.de

### **Project 2. DAAD Project - Master's program in Psychosomatic Medicine and Psychotherapy in China**

To meet the demands of recent cultural, social and scientific developments in mental health promotion in China, this project aims to establish a course of study in Psychosomatic Medicine and Psychotherapy in China. Albert-Ludwigs-University in Freiburg, Germany (Freiburg University Medical Center), will develop and implement a curriculum for the Master's Degree Program in Psychosomatic Medicine and Psychotherapy at the Tongji-University in Shanghai, China. The curriculum offered by both universities will contain, as a core requirement, extensive studies in psychosomatic basic care, advanced integrative psychotherapy and psychosomatics for various mental disorders. After completing a 4-

semester course, Chinese participants in this program will receive the degree, “Master of Psychosomatic Medicine and Psychotherapy” from Tongji-University and the “Certificate of Advanced Studies in Psychosomatic Medicine and Psychotherapy” from the Freiburg University Medical Center, Albert-Ludwigs-University Freiburg.

**Partner:** Shanghai, Tongji University, Prof. Wenyuan Wu, Prof. Xudong Zhao

### **Project 3. Sino-German Center for the promotion of research in Beijing: Patients with somatoform disorders/functional symptoms in China**

Patients with somatoform disorders/ medically unexplained physical symptoms (MUS) in China – psychological and behavioural key features, neurobiology, and treatment. A comparison between Traditional Chinese Medicine (TCM), biomedicine and psychosomatic medicine

#### **Background:**

To improve its validity for DSM-V and ICD-11 the classification of somatoform disorders is currently being revised by including psychological, neurobiological and behavioural criteria. Little is known about the key features of patients with somatoform disorders/MUS and their treatments in China

#### **Objective:**

From a biopsychosocial perspective, the study aims at achieving three objectives: 1. To evaluate the diagnostic validity and clinical utility of the psychological and behavioural key features as possible classification criteria for somatoform disorders/MUS in China. 2. To assess treatment preferences, treatment strategies and the doctor-patient relationship in the three medical settings TCM, Biomedicine und Psychosomatic Medicine. 3. To assess the neurobiological correlates of somatoform pain disorders

#### **Methods:**

In a cross-sectional design, at total of 600 patients (200 patients from each of 3 medical settings), are consecutively included in the study. Subsamples reporting high scores of somatic symptoms severity (PHQ-15  $\geq 5$ ) vs low scores (PHQ-15  $< 5$ ; control group) are defined. Using quantitative (self-rating scales) and qualitative methods (interviews) patients are questioned about psychological (*e.g.* health-related anxiety, illness perception, emotional distress, mental disorders) and behavioural criteria (*e.g.* illness behaviour). External criteria include quality of life, disability and health care utilization. In addition, therapy preferences and the quality of the doctor patient relationship are captured.

In a sub-group of 20 patients with somatoform pain disorder as compared to 20 healthy matched controls, altered cerebral activation of cortical areas related to stress and affect regulation triggered by standardized peripheral pain stimuli is examined in fMRI.

#### **Keywords:**

Somatoform disorders, Medically Unexplained Physical Symptoms (MUS), neuroimaging, illness perception, illness behaviour, treatment strategies, TCM, Psychosomatic Medicine

### **Project 4. International congress and foundation of the Chinese Balint Society in May 2012**

In recent years, Balint group work has also taken a foothold in China. Chinese doctors are particularly involved in tense and conflicted doctor-patient relationships. There is a big need to communicate, to share their own feelings of powerlessness, helplessness, frustration and anger in a safe environment and to get some relief. Accordingly, the Balint method is highly appreciated. These experiences have now been confirmed at the first Chinese Balint meeting in Beijing. All participants experienced the 2½-day meeting as very helpful. Those who did not know Balint group work before were intrigued and want to exploit this method further. More experienced participants want to establish Balint groups at their own hospitals and it led to the desire to offer a Balint group leader seminar at the next meeting.

## **Project 5. Breaking bad news in China – the dilemma of patients' rights to be informed and traditional norms.**

### **Communication skills training for Chinese oncologists and caretakers**

**Partner:** Beijing Cancer Hospital: Prof. Tang Lili

#### Objective

Current practice of breaking bad news in China involves disclosure of information first to family members who then decide, whether the patient should receive this information or not. Recently, however, patients' right to be informed has been laid down by law. This represents a dilemma for oncologists who now have to balance traditional practice with new legal requirements. A communication skills training (CST) was developed for Chinese practice. It addresses this issue and may help participants to find individual solutions within these conflicting requirements.

#### Methods

A first CST about breaking bad news took place at the Beijing Cancer Hospital, China, with 31 participants. We assessed (i) current practice, (ii) evaluated the workshop and (iii) self-assessed performance ratings about breaking bad news before and after the workshop with the help of questionnaires.

#### Results

(i) Participants stated that in most cases (78%) they inform family members first. Contrary to this practice participants think that about 75% of patients would like to be informed first, independent of family. (ii) Overall, the workshop received a very good rating (M = 1.2; scale between 1-6). (iii) After the workshop the participants rated their performance significantly higher in all areas, e.g. talking about diagnosis, prognosis and death with patient and family.

#### Conclusions

The CST showed high acceptance and led to significantly improved performance ratings of participating physicians in many areas. It helped participants to deal with conflicting demands. For future trainings, further socio-cultural adaptations are needed. Contradictions still exist and need to be resolved.

Prof. Dr. med. Kurt Fritzsche  
Abteilung für Psychosomatische Medizin und Psychotherapie  
Department of Psychosomatic Medicine and Psychotherapy

University of Freiburg  
Hauptstr. 8  
D-79104 Freiburg  
Tel. ++49 761 270 68710  
Fax ++49 761 270 68850