November 22, 2019

Jared Skillings, PhD ABPP, Chief of Professional Practice
Sara Martin, Editor-in-Chief, *Good Practice*
Amy Novotney, Contributor, *Good Practice*
Via email: practice@apa.org

CC: Arthur C. Evans Jr., PhD, APA Chief Executive Officer and Executive Vice President, aevans@apa.org

Rosie Phillips Davis, PhD, President, American Psychological Association, governance@apa.org

Dear Dr. Skillings, Ms. Martin and Ms. Novotney:

We are concerned that in the article "Treating Chronic Pain," (*Good Practice*, Fall 2019), coverage of the important topic of chronic pain falls short of portraying the full range of successful psychological interventions and is limited to cognitive-behavioral approaches.

This is unfortunate since CBT yields small symptom benefits in somatic conditions (see this annotated bibliography). Moreover, CBT is typically narrowly focused on *coping* with symptoms and is less effective than emotionally focused psychotherapies in randomized controlled trials. These other methods, including intensive short-term psychodynamic psychotherapy, emotional awareness and expression therapy and pain reprocessing therapy (references), aim for symptom *relief* and, often, *cure*. They accomplish this by helping clients identify and experience emotions that are linked to somatic symptoms. These models also aim for interpersonal change and functional gains in addition to symptom reduction.

The omission of these methods is a disservice to the psychology practice community, as well as the public, since it will limit awareness of and access to more effective pain treatment.

This article continues a troubling trend at APA – de-legitimizing psychoanalytic/psychodynamic theory, research, and clinical practice. Examples of this trend include:

- Articles such as this one that steer people to CBT

- Clinical Practice Guidelines that ignore research supporting depth psychological treatments
- Accreditation standards that privilege CBT training programs over psychoanalytically-focused programs
- Continuing education program standards that narrowly define “evidence based”

The CBT focus of your article raises further concerns about the APA’s development of a Clinical Practice Guideline for chronic pain. We are concerned this guideline might point to CBT as the only option for treatment and limit the goal to pain management rather than relief. This would leave the false impression that other treatments, known to have better overall outcomes, do not exist, or are less effective. Thus, we could risk prematurely narrowing patients’ options for taking charge of their own recoveries, leading to resignation should a brief course of CBT treatment fail.

As psychologists and medical professionals with decades of experience in helping people achieve enduring cures for their chronic pain, we urge you to present a range of effective psychotherapies so that those experiencing debilitating pain can make a more informed selection of treatment methods best suited to their needs. For more information, please see the website of the Psychophysiologic Disorders Association at https://ppdassociation.org.

We invite you to follow up the current article with one focused on the type of work we are doing that often *eliminates* chronic pain, rather than just “manages” it. We are available for interviews and can provide numerous examples from both research and practice.

Sincerely,

Psychophysiologic Disorders Association
ppdassociation.org
Portland, OR

Allan Abbass MD, FRCPC
Professor and Director of Centre for Emotions & Health
Faculty of Medicine, Dalhousie University
Scientific Committee Member, American Psychoanalytic Association
Member, Canadian Psychiatric Association

Frances Sommer Anderson, PhD
New York State Licensed Psychologist
Certificate in Psychoanalysis – NYU Postdoctoral Program
Member, American Psychological Association
Private Practice In New York City
Faculty, Manhattan Institute for Psychoanalysis
pathwaystopainrelief.com

Jeffrey H. Axelbank, Psy.D.
Highland Park, New Jersey
Member, American Psychological Association
Member, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Nancy Burke, PhD
Co-Chair, Psychotherapy Action Network (PsiAN)
Immediate Past President and Board Member, Chicago Center for Psychoanalysis
Associate Clinical Professor, Feinberg School of Medicine of Northwestern University
Vice President, ISPS-US
Secretary, EMHS-NFP

David D Clarke MD
President, Psychophysiologic Disorders Association (PPDA)
Assistant Director, Center for Ethics, Oregon Health & Science University, Portland, OR, USA
Clinical Assistant Professor of Gastroenterology Emeritus, OHSU
Faculty Associate, Arizona State University
Faculty Associate, Cummings Graduate Institute
Clinical Lecturer, Pacific University
Co-Chair, Special Interest Group on Medically Unexplained Symptoms of the Collaborative Family Healthcare Assn
www.ppdassociation.org

Barry Dauphin, PhD, ABPP
President, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Dennis Debiak, PsyD, ABPP
Past President, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Michael Dow, PsyD, CAC III
Program Manager, Integrated Health Home, Mental Health Partners
Boulder, CO

Linda Michaels. PsyD MBA
Co-Chair, Psychotherapy Action Network (PsiAN)
Member, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Janice Muhr, PhD
Co-Chair, Psychotherapy Action Network (PsiAN)
Member, American Psychological Association
Member, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Joseph Schaller, PsyD
President elect, Division 39, Society for Psychoanalysis and Psychoanalytic Psychology, American Psychological Association

Eric Sherman, PsyD
Clinical Psychologist and Psychoanalyst
Co-Chair: Committee on Psychoanalysis and Healthcare,
Division 39 (Psychoanalysis), American Psychological Association

John Stracks, MD
Clinical Assistant Professor of Family and Community Medicine
Northwestern University, Feinberg School of Medicine
Founder, John Stracks, MD, LLC