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## INVITED EDITORIAL

### **Psychiatry in the next 50 years: the contribution of psychoanalysis**

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The temptation to make predictions about the future, distant or immediate, has been a characteristic of humankind since immemorial times. Inside our mind, attempts of using the data available in the present, examine what we know from the past and establish predictions that we intend to be objective coexist with the desires we have on how we would like such future to be. It is a possible way of dealing with unpredictability and with the real impossibility of establishing objective predictions.

This fact also shows us, since now, the presence of a psychoanalytical form of thinking: coexistence of antagonistic tendencies inside the mind, omnipotence of desires and fantasies and a whole series of defensive unconscious procedures, used both under normal and pathological situations. Therefore, I believe it is possible to imagine a future psychiatry that does not use these and so many other insights offered by psychoanalysis. Anyhow, to put the data in order, I will examine some dimensions in which I imagine (and naturally desire) that psychoanalysis will be present in future

psychiatry. As I visualize psychoanalysis as a work being constructed,<sup>1</sup> I will stress the areas in which a joint construction may be mutually beneficial.

Psychoanalysis has been one of the basic sciences of psychiatry, i.e., one of the disciplines that serve as basis for the understanding of normal psychic functioning, of different expressions of psychopathology and of the means by which the therapeutic action of our varied interventions can have positive, innocuous or iatrogenic effects.

Specifically with regard to the relationship we establish with our patients, psychoanalysis has offered and will possibly continue to offer and increase understanding of the plots of "vast emotions and imperfect thoughts" that occur at each therapeutic pair, or at situations of institutions – through its concepts of transference, countertransference, analytical field, intersubjectivity and expanding mind. One can assume that this and other related concepts could be even more deepened with the growing mass of clinical experience.

Concerning psychoanalytic treatments per se, as more severe patients are analyzed and there is the presence of new pathological expressions, or also the presence of children and adolescents, on the one hand, and elderly and middle-aged, on the other hand, we may predict that the analytical technique will be refined to approach such situations, so we can acquire more knowledge of the psychic functioning of these patients.

As to psychoanalysis-based psychotherapies, it is predictable that more patients will be benefited by them, and that university and public services will increase their offer of such approaches, increasing the number of patients that will receive care.

Considering psychoanalytic theory(ies), one can imagine that different theoretical models are even more developed and deepened, and that, at the same time, it is increasingly more possible to establish real controversies, as proposed by Bernardi,<sup>2</sup> in which the presuppositions of each approach are made explicit and that consistent arguments are aimed at, reducing personal dimensions and narcissism of small differences, described by Freud.<sup>3</sup>

Similarly, psychoanalytic formation, which now has at least three different recognized models (Eitingon's, French and Uruguayan) should evolve to larger studies on their essential elements and to the search for better comparative knowledge between them, as well as to the establishment of more objective criteria to examine a psychoanalyst's competence.

Therefore, psychoanalysis has been acting as a basic science in the formation of new psychiatrists, besides establishing a physician-patient relationship in which different conscious and unconscious meanings are understood and used. It will also be used in the treatment of diseases that have multidetermined etiology, allowing integrated and synergic approaches.

Psychoanalytic institutions, with their role of guardians of a solid formation and stimulating a continuous education, will possibly widen their areas of interest and application of psychoanalysis for relevant social and educational psychoanalysis, besides increasing their ability to dialogue with other areas and other psychoanalytic institutions of varied orientations.

Research on psychoanalysis and analytical psychotherapy in its different forms and approaches will possibly increase its presence in graduate courses and in psychoanalytic societies, contributing to a methodological refinement and to a better knowledge of treatment processes and effectiveness, as well as to increase the knowledge of the multiple areas of development and pathology.

In all those dimensions, conflicts will certainly not be absent, opposing those who search hegemonic ways of thinking, teaching and researching and those who support the required integration of approaches, due to their possible ability of enhancing potentials. More or less presence of psychoanalysis in psychiatry will depend on such polarization and on the possibility of an integrating attitude being predominant. Doubtlessly, enrichment or impoverishment of both disciplines will result from that.

In which settings will the inhabitants of a world 50 years from now live?

Will globalization, which breaks frontiers and homogenizes cultures, habits and traditions increase? Will different fundamentalisms widen their influence? Will the magical thinking that guides innumerable sects that spawn in each neighborhood increase its presence, or will the scientific, critical and independent thinking manage to impose at least part of its strength and possibility of working with arguments and evidence? Will brutal economic differences be even more radical and will sensible actions result in a better distribution of wealth? Will the destruction of the planet continue or will energetic measures manage to preserve it?

Whatever the setting, whenever patients who have varied forms of diseases and psychic suffering search for a reduction in mental pain, increase their ability of thinking and signifying their thoughts and actions, and whenever psychiatrists wish to establish deeper and transforming therapeutic relationships, psychoanalysis and its applications will be present, in a mutual fertilization with psychiatry in its several dimensions.

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