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ADVANCES IN PSYCHOSOMATICS: FOLLOWING THE FOOTSTEPS OF LUCA IANI

Proposer

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Abstract

The visionary work of the Professor Luca Iani has paved the way to new trends in psychosomatics. In general, he was interested in how Positive Psychology can be used in Clinical Psychology interventions. Specifically, he worked to explore the role of positive psychological resources (e.g., dispositional mindfulness, illness acceptance, spirituality, positive emotion regulation) in promoting health-related quality of life and psychological well-being as well as reducing distress in patients with chronic diseases, psychiatric disorders, and terminal illness. The aim of this Symposium is to present current researches that are in line with the work of Luca Iani and focused on the role of some biopsychosocial factors in the illness experience of patients with chronic and psychiatric diseases. In the first contribution, De Vincenzo and colleagues examine the role of dispositional mindfulness, self-compassion, anxiety, depression, peaceful acceptance and struggle with illness in predicting body image satisfaction in terminally ill patients. The second presentation by Castelli and colleagues examines traumatic experiences, dissociative symptoms and psychological distress in women with fibromyalgia. The third contribution by Conti and colleagues describes the results of a pilot open trial with a guided-self-help and concurrent biofeedback intervention on emotional, behavioral, and psychophysiological dysregulation in patients with eating disorders. The final contribution by Tossani and Grandi examines the effectiveness of an ACT-based telepsychology intervention on depression, anxiety, and distress in parents of chronically ill patients.



Traumatic experiences, personality and dissociation in women with fibromyalgia

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Abstract

Introduction: The results of two studies will be presented. In the first study we aimed at investigating prevalence of traumatic events and psychoform and somatoform dissociation in patients with Fibromyalgia Syndrome (FM). In the second study personality traits and defence mechanisms were assessed. In both studies we compared FM patients with healthy controls (HC). *Methods:* The first study investigated traumatic experiences, dissociative symptoms and psychological distress in 99 consecutive FM patients. The effects of these variables on FM symptom were assessed too. As far as the second study is concerned, temperament and character traits, alexithymia, defense mechanism and psychological distress were assessed in 54 FM patients. *Results:* Globally, results revealed that FM patients displayed higher levels of both somatoform and psychoform dissociation, alexithymia, harm avoidance, and psychological distress, higher use of maladaptive defence style, lower self-directedness and persistence, compared to HC. Moreover, severity of FM symptoms was significantly predicted by the presence of depressive symptoms, somatoform dissociation, and cumulative trauma. Also, alexithymia, harm avoidance and maladaptive defence style were significant predictors of psychological distress in FM patients. *Discussion:* Results of these two studies suggest that multiple traumas as well as dissociations are more frequent in FM patients than in HC. Diagnostic and psychological interventions should address these aspects along with the assessment of anxiety and depressive psychopathology.