

Medication or Psychotherapy

By

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As a Jungian psychoanalyst, many of my patients initially make a common inquiry; “Do I ever use psychiatric medications or just use psychotherapy and psychoanalysis in my treatment?” As a physician, a psychiatrist and a psychoanalyst, this inquiry continues to intrigue me every time. The question is simple and relevant enough, so why does it continue to fascinate me? While a detailed response to this legitimate inquiry is beyond the scope of this brief article, I will share my preliminary reflections on the matter.

The obvious response is that any practitioner of psychiatry will use either or both modalities as clinically appropriate. However, the reality may be not that simple. The medications certainly help us put the fire out in the psyche, but they do not plug the gas leak in our soul. The gas leak has to be attended to using the various modes of psychotherapy including Jung’s approach of Analytical psychology. The gas leak in the psyche is both a source of danger and energy; it all depends on how we tap it. The shadow of our personality is also a hidden source of our

unlived potential, if only we master the skills to harvest its potential with the help of depth psychotherapy.

While medication may reset the neurochemical imbalance in our Nervous system, burgeoning research on psychotherapy has shown that therapy as well as other contemplative and meditative practices have the capacity to transform the structure, function, anatomy, physiology, connectivity and the adaptive capacity of our psyche subsumed under the rubric of Neuroplasticity. While medications may be palliative while we use them, depth psychotherapy may enhance Neuroplasticity of the mind on an enduring basis without the side effects of the medication.

Of course for a substantial proportion of psychiatric illness, medication is life saving and enhances the quality of life and is often necessary for a long term or even lifelong basis. This does not detract from the concocurrent psychotherapy with its benefits. In another subgroup of individuals, we may be able to use medications for acute and crisis management while psychotherapy helps with long term resolution by modifying underlying personality structures which lead to adaptation and mastery over life's challenges. But there is a group of individuals who do well with psychotherapy alone. The key is a thorough assessment by a competent therapist in triaging what is the best course of action.

As a Jungian psychoanalyst, I have a spiritually informed paradigm of using psychopharmacology to compliment depth psychotherapy where appropriate. A detailed discussion of the Kundalini system based psychopharmacology

intervention is not intended here. I wish to give my readers a glimpse into this system. In this system, one of the basic tenants is that there is an imbalance between the masculine and feminine channels or Nadis in our nervous system. When these two systems are out of balance, it results in the physical and psychiatric symptoms and personality and relationship problems. The numerous classes of psychiatric medications available to us may help balance these systems while psychotherapy may help consolidate these changes in a Neuroplasticity matrix of transformation of our psyche.

This interface of spiritually and dynamically informed psychopharmacology is an intriguing subject which needs further investigation. Carl Jung's last unfinished masterpiece – the *Mysterium Coniunctionis* has much wisdom that may shed considerable light on this interface in the fluid continuum between the body and psyche and mind and matter. I plan to explore these ideas in great detail in my upcoming publications. When these concepts are creatively integrated with traditional allopathic psychiatric and medical treatments, we may have the capacity for Strategic and Smart therapy exponentially enhancing the benefits of these approaches.

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Dr. Bedi specializes in treatment of adults with emotional, relational, addiction and psychiatric problems. He uses a Jungian analytical psychotherapy and psychoanalytical treatment models, focusing not only on treating the symptoms, but also the underlying psychological and spiritual issues that feed these problems. Medications are used when appropriate but I believe one must also attend to the underlying issues in psychotherapy & psychoanalysis.

