

Short Communication





Transtheoretical and transdiagnostic models in the treatment of anxiety

Abstract

This text explores a comprehensive and contemporary approach to addressing anxiety, focusing on the concepts of transtheoretical diagnoses and transdiagnostic treatments. The complexity of anxiety and the need to consider multiple dimensions, such as biological, behavioral, cognitive, systemic and spiritual factors, are recognized. The importance of making a complete diagnosis that includes the patient's personal history is highlighted and the relevance of a multidimensional treatment that combines psychoeducation, relaxation techniques and verbal therapy is underlined.

Keywords: transtheoretical, transdiagnostic, clinical anxiety, integration

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Transtheory and transdiagnosis

Anxiety has become a public health problem and today comprehensive and effective therapeutic management is necessary. This requires having the ability to harmoniously integrate the different theories and practices, without leaving aside the psychological currents as well. Different schools of psychology provide an explanation that, according to their own paradigms, reveals the reasons for anxiety. It happens, however, that many of these explanations are limited to the area of expertise of that school, leaving a gap in other areas that are important to take into account. Being able to work transtheoretically requires having the ability to harmoniously integrate the different theories and practices linked to them, to be able to carry out a treatment that is multifactorial and effective.

The anxiety's clinic presents many more challenges, since it is important in this to make a good diagnosis and its hypotheses. In any case, it is transcendental that the diagnostic, therapeutic and psychoeducational phases occur simultaneously.3 Each of the different psychological currents focuses on different logical levels of modification of the person when working on anxiety: the client's problems are analyzed through six possible logical levels which are the environment, behaviour, physical symptoms, the capabilities of the consultant, their belief and value systems, their identity and their mission or meaning in life. Each of these schools proposes a hypothesis that partially explains the causes of anxiety, pointing out organic, cognitive, behavioural, systemic and spiritual factors to develop an explanation for it. The problem described corresponds to the place in which the so-called "soft sciences" develop, which is in the midst of pluralism and diversity. Even some academic sectors consider that - it is not possible for psychotherapy, or any other similar discipline, to find the truth - the paradigm of complexity is present when thinking that there is no single truth that provides all the answers regarding the anxiety.² By observing all these hypotheses from a transtheoretical approach, a psychopathological diagnosis will be generated composed of various hypotheses that arise from the analysis, which provide a more complete response to the phenomenon.3

It is important, therefore, to observe that a multidimensional treatment, which considers all these visions of the human being throughout the clinical task, will be much more effective, efficient and lasting over time. The current trend is integration since there are currently more than 500 different schools of psychotherapy. It would be very limiting to work in isolation, as if the rest did not exist.

It is for this reason that it is advisable to make proposals for both theoretical and technical integration.⁵ The above implies, rigorously, that a professional trained in the mutual exclusion of different theoretical approaches will be a person with outdated and biased information, even when he or she does not agree with integrative positions.² Once the hypotheses have been reviewed, the decision will be made as to which of them the focus will be placed on to guide the therapeutic space. In any case, work will be done in parallel with all the dimensions. When working dimensionally there are two elements that are important to take into account, the first is psychoeducation. Providing information is one of the most important clinical tools.⁶ We work in a constructivist way with the consultant, providing them with tools.7 You provide psychoeducation is to give the patient detailed information about the symptoms and what is happening to them, this is very important since people with anxiety have the tendency to misinterpret, and think catastrophically, their symptoms. 6 The second element is the practice of guided breathing, relaxation and imagery tasks. There are a wide variety of relaxation techniques for anxiety, which, although they are not the total solution to the problem, help the client reduce the symptoms, giving them a feeling of well-being that enhances the results of the therapy.^{7,8}

Conclusion

This approach recognizes that anxiety is a complex phenomenon that requires a comprehensive and flexible approach to the treatment of anxiety, encompassing multiple dimensions, theories and therapeutic techniques, resulting in more effective treatment. A multidimensional treatment is advocated that combines psychoeducation, relaxation techniques, breathing and visualization, as well as verbal therapy. It is recognized that each patient is unique, and that therapeutic strategies must be adapted to their individual needs.

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Conflicts of interest

The author declare that there are no conflicts of interest.

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