Synergistic Psychotherapy: Post-Eclectic Forms of Therapy for Axis II

Theodore Millon, Ph.D., D.Sc., and Roger D. Davis, Ph.D.

Today, it is economic forces that drive developments in psychotherapy. While most therapists are eclectics, eclecticism is not a theoretical orientation. However, practical eclecticism may be, the goals of science are nevertheless the development of ideas and models which integrate the discipline. Likewise, the personality construct is necessarily integrative, and thus specifically prescribes the form of therapies for the Axis II disorders, called "potentiated pairings" and "catalytic sequences." These may be constructed from any of a number of functional and structural domains (e.g., behavioral acts, interpersonal conduct, self image) which parallel traditional perspectives on personality. Despite the promise of forms of therapy addressed to the whole person, and its failure to specify comparable and comprehensive diagnostic attributes across the domains in which the personality disorders are expressed.

INTRODUCTION

Today it is economic forces, not theoretical development and empirical research, that increasingly drive the direction of developments in psychotherapy. Modern times continue to see an explosion in the aggregate number of therapies, but it is brief therapies that are in the ascendancy. These typically claim to achieve more in less time through patient selectivity and therapeutic structure and specificity, than the longer term, more inclusive therapies of the past. Moreover, these brief therapies are typically eclectic in nature, seeking to avail themselves of the tools culled from any therapeutic approach that might be helpful. On the positive side, this emphasis on efficiency may lead to the development of new therapies shorn of excess,
unpenetrable, and often tautological psychobabble of the school-oriented, 
dogmatic past. On the negative side, the patient characteristics that are 
treated exist at levels of analysis that can be afforded by economic con-
straints: What is treated is what can be treated in a handful of sessions.

Such brief, eclectic, superficial, and necessarily more behavioral and 
operational therapies run counter to the nature of personality in two ways. 
First, while the Axis I disorders are necessarily symptomatic in nature and 
therefore presumably amenable to more focal and briefer interventions, 
personality is dispositional, specifically defined as longstanding, pervasive, 
and actively resistant to outside influences. To treat a personality disorder 
is to wrangle with the ballast of a lifetime, to correct a developmental dis-
order of the entire matrix of the person, produced and perpetuated across 
years of functioning. Second, brief or manualized treatments of personality 
disorder must necessarily be based simple diagnostic patterns. Not enough 
time is available to tailor therapy to the patient’s unique history, current 
life circumstances, and particular modes of symptom perpetuation. While 
the philosophy of the DSM’s multiaxial model is geared toward under-
standing Axis I as the interaction of Axes II, III, and IV, that is, toward 
an understanding of symptoms in the context of psychological, physical, and 
social dispositions and states that regard the matrix of the total organism 
and its environment, the modern forms of therapy (brief, eclectic, manual-
ized) paradoxically propose to treat the Axis II disorders in much the same 
way as those of Axis I. Herein lies a contradiction between the level of 
analysis at psychological problems are intended to be understood and the 
level at which they are treated.

Paul Meehl (1978) has written that theories in psychology are like old 
generals. They never really die on the battlefield under experimental assa
tault, but instead slowly fade away as enthusiasm gives yields to disappoint-
ment. Meehl argued that little genuine theoretical evolution in psychopathology could occur, since most theories were never subjected to any strong threat of falsification. The current authors worry, insofar as therapies for Axis II are concerned, that we stand at the threshold of a new cycle of research and disappointment, not because our methodologies are too weak, but instead because of intrinsic philosophical contradictions between therapy as it is now practiced and the nature of personality disorders. We want to review some of those contradictions. Unlike the other papers in this special issue, this article is intended to be philosophical in nature, not empirical. The particular treatments that might be pursued with a Negativistic Personality or an Antisocial is not our focus. This article is organized into five sections. The first argues that eclectic forms of therapy are not optimal where personality disorders are concerned, because personality is integrative and cohesive, while eclecticism need not be. This ar-