

# BRIDGING THE GAP

A biopsychosocial newsletter for healthcare professionals

Reprinted from the online newsletter, *Bridging the Gap*. Subscribe to receive the entire eNewsletter every other month. Online at

PsychCorp.com

or call 888.627.7271.

**“It’s so helpful when you can go over the test results and say, ‘Gee, the results indicate that you really are putting a lot of your stress into physical symptoms’”**

Feature Article, March 2010

## Psychology in black and white: How one practice uses test results to break through to its patients

Back in the 1970s, Cathie O’Connell had earned her PhD in physiological psychology and behavioral biology and found herself at the beginning of an apparently fulfilling career in academia. After a slight detour for some post-doc work in clinical and neuropsychology, she planned on going back to the classroom to train clinicians—but she never made it. “I got hooked on the clinical thing and here I am, 30-odd years later,” she says.

Dr. O’Connell now has a private practice called Desert Psychological Associates in Phoenix ([www.desertpsych.net](http://www.desertpsych.net)). She and three other psychologists specialize in neuropsychology, medical psychology and chronic pain. They also do forensic psychology (“when you do neuropsychology and pain, you wind up in court”). The psychologists give expert testimony in both civil and criminal cases.

Most of Desert Psychological’s therapy patients come in for medical and neuropsychology related problems, such as chronic pain, head injuries and chronic illness. Not coincidentally, the group performs a lot of pre-surgical psychological evaluations for pain-related procedures as well as bariatric surgery.

Dr. O’Connell relies on a number of Pearson assessments, in particular the MMPI®-2 and the MMPI-2-RF®. “That’s the cornerstone of a lot of our evaluations,” she says. “Given the opportunity, I will include an MMPI in most every test battery that I do. If I’m not sure what’s going on with a patient, then I’m going to do an MMPI to help me figure it out.”

For bariatric patients, she favors the MBMD™ (Millon™ Behavioral Medicine Diagnostic). “I like it because there are bariatric norms, and that’s helpful.” She also appreciates the P-3® (Pain Patient Profile) because it’s normed on chronic pain patients. “It’s nice to have tests that are normed on the particular patient population that you’re dealing with as well as a general assessment of personality functioning. And the P-3 is relatively short and easy to do, so if you need to track progress of how someone’s doing down the line in treatment, it’s a good tool to use.”

But the main reason she turns to the assessments so often is because of what they show the patient. “It’s a good tool for me to understand the patients better, but it can also be a good tool for the patient to understand the patient better,” she says.

“There are some inhibitions that come up in psychotherapy and there are some things that people don’t want to hear. They may not want to hear that emotional factors are adding to their pain problems or creating their physical problems. They may not want to hear they’re depressed.

“It’s so helpful when you can go over the test results and say, ‘Gee, the results indicate that you really are putting a lot of your stress into physical symptoms, so let’s talk about how we can deal with that.’ Or, ‘Our assessments indicate that you’re feeling pretty depressed.’ The patient will say ‘I’m not depressed.’ I’ll say, ‘Well, look at these numbers,

PEARSON

 PsychCorp  
a PEARSON brand

or look at what the graph looks like.' And it's a nice way of getting into areas that patients don't deal with, without you as the therapist having to challenge them. The test says it."

Seeing data about themselves in black and white carries a lot of credibility with patients. "You're not saying it, so they're not needing to defend against you," says Dr. O'Connell. "It's a more objective measure, so it allows you to start dealing with these issues that patients might be resistant to, without your having to push too hard on what you're saying or what you're seeing. I think it's a lot easier to establish therapeutic rapport around those areas when you're using the test."

Dr. O'Connell recalls one patient whose emotions went into creating physical symptoms. When they went over the test results, the woman was able to acknowledge what was going on "and then begin to work on those emotional issues rather than just continuing to go to the doctor to try to get more medicine for things that medicine wasn't going to help." The woman's overall pain level improved, along with her level of functionality, and she wasn't going to see her doctor as often.

Another of Dr. O'Connell's patients, who was being evaluated for bariatric surgery, was dealing with trauma from his childhood, which was reflected in his assessments. "He hadn't really told me about being abused as a child, so this gave me an opening to question him a little more closely and find out what had been going on. It turned out he was not a good candidate for the bariatric surgery because he was using food to deal with his emotional issues, so he was not going to be successful." The man eventually worked through his problems and ended up losing a lot of weight through therapy.

Business has been booming for Desert Psychological. She says referrals come from a marketing strategy of being responsive to referring physicians and staying visible. "The assessments are one of the things that allow us to quickly get back to doctors with concise reports supported by objective data," she says. "My marketing is largely face-to-face—maintaining phone contacts, sitting down and talking to them when you have the chance. If people don't see you, they forget you exist."

And what's among the biggest changes she's seen since turning from academia to clinical psychology more than 30 years ago? "We have more options in terms of psychological assessment tools and we have better ways of getting more information about the patients. When we know more, we're in a better position to treat them more effectively."

=====

**"The assessments are one of the things that allow us to quickly get back to doctors with concise reports supported by objective data"**



**Clinical Assessment**  
19500 Bulverde Road  
San Antonio, TX 78259  
PsychCorp.com  
888.627.7271