

**The review of the Italian association of psycho-neuro-endocrine-immunology**  
edited by Francesco Bottaccioli

# PNEINEWS

The new knowledge of health

## When the doctor is a woman

Until a few decades ago, this professional figure was regarded with suspicion and irony but recent studies say that the fact of being a woman is an added benefit in the treatment of patients.

50 years after his death

## JUNG. SCIENCE, WISDOM SPECIAL SUPPLEMENT

**PNEI – bimonthly review - nr. 5 - 6 - year IV – November-December 2010**

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## Editorial

### Sharing knowledge, developing competence

*David Lazzari – PNEI President*

Sipnei is a multidisciplinary and multiprofessional scientific society. This is how we often use to describe it, yet this concept requires further discussions. We have recently overcome difficulties to achieve the accreditation in the CME system for our basic course which is meant to provide a frame-reference point to the new members. The structure of the course encourages the participation of professionals from different medical fields. This fact seems to have been quite shocking for some people.

This proves how far we still are from a culture which favours in concrete terms integration in the domains of health. Thanks also to cross-pollination areas such as PNEI, these last years revealed an increase in the evidences showing interdependencies and correlations among processes and phenomena that we are used to study separately in different disciplinary fields, each of them with its own specific logic and languages. Inevitably each science involves somehow a certain degree of reductionism. Although if we want to catch the challenges and the opportunities offered by the complexity that belongs to reality, we need to remind ourselves that every area of the knowledge is just a point of view (the study of an aspect may be very important but it still remains the study of one “aspect”, one dimension, one level) without neglecting the ability to place our “point of view” in the broader horizon “where everything is contained”.

Once this integration of ideas was a “no man’s land” and the one who ventured in it risked attacks from all the concerned parties. Today, thanks to the growing importance of links, this once hazardous and inhospitable region is becoming a borderland, a place of exchanges and opportunities. This is not a fairy tale but a true story. As it happens in all true stories, each opportunity involves some risks: in our particular case the risk is blending everything together namely offhandedly considering different knowledges and competences equivalent to each other, believing that all can take care of everything making integration sound like confusion.

True integration comes from a double movement of reciprocity: sharing and acknowledgement. Sharing fields of knowledge (namely those specific fields of knowledge of a science that help composing the whole picture) and acknowledgement of competence (that particular “know how” that distinguishes the different sciences and professions). Sharing knowledge does not authorize anybody to feel allmighty and hence the repository of all knowledge.

In another occasion I have developed this concept into what I have called the “criterion of knowledge/competence” considered as the condition to develop a sinergic integration among roles and professions in health systems<sup>1</sup>. This is an essential requirement in order to shift from the logic of health services to the ones of health objectives which instead requires sharing and teamwork capabilities.

The aim of SIPNEI is therefore to share the knowledge and develop competence which is quite different than promoting confusing approaches which disregard specificities and roles. Between order (everybody stays where they belong) and chaos (everybody does everything), we chose a balance between the two because – as we all know - it is in the balance that well-being is possible, it is there that life exists and creates complexity.

I believe that it is in such a way that multi-professionality and multi-disciplinarity can live together as a system, as added value, avoiding mere juxtapositions or overlapping. To allow this to happen we need a common language so we can understand each other and that language can be no other than science methodology, evidence based proofs. Sometimes it seems that this “science dress” is too tight and we feel a certain intolerance but without this dress the burning stakes would have been and would still be many more! The desire of knowledge and perhaps of spirituality leads us often towards paths where the scientific methods have not ventured yet or they have just begun to. Each of us is free to walk through these paths, also our members. There is full respect on this point as SIPNEI history proves. Although the association as such and its members when they talk on its behalf (and therefore on everybody’s behalf) must distinguish between evidences (which are true until proven invalid) and their personal opinions and convictions. Even more so when health is involved: adhering to the strict scientific methodology allows us to ask for the replacement of old logics when they are ineffective and not humane. On its behalf we can denounce who sells diseases (see last PNEI news issue) and if we want to be coherent, this can not exempt us by not distancing ourselves from whomever sells any form of illusion.

What were we talking about at the beginning? Oh yes, SIPNEI is a multidisciplinary and multiprofessional scientific society exactly.

1 Lazzari D., Marini C. (2007) Il Modello conoscenze-competenze, *AUPI Notizie* 3; Lazzari D. *Psicologia Sanitaria e Malattia Cronica. Disease management ed interventi evidence-based*. Pacini Editore, Pisa (in stampa)

## Special supplement:

### JUNG SCIENCE AND WISDOM

On the 20<sup>th</sup> November a study day devoted to Jung was held at a very crowded big hall at “Casa internazionale delle donne” in Rome.

The administration office had to stop accepting registrations already one month prior to the event since the 140 available seats had already been booked. Psychologists, doctors and many young people came from all parts of Italy in order to listen and participate actively to a full day conference held by speakers invited from our scientific society and from the “Istituto Mediterraneo per la psicologia archetipica” (Mediterranean Institute for archetypal psychology).

It was an enjoyable exchange with some exciting moments due to the interesting content such as the well documented material on Jung’s life and his teachings. Remarkable were also the relationships among the participants who proved to be in an attitude of open dialogue and exchange of points of view which were only apparently far from each others.

The leaders of the jungian associations who participated to the event were pleasantly surprised to find out that our initiative was not an advertisement move in order to be accredited in the psychology world but the result of a genuine interest towards the study of the eclectic jungian thought with the aim to organize not a commemorative event but to find solutions to the problems of contemporary medicine and psychology.

The pages of this supplement collect the reports presented and discussed during that day.

As already affirmed by David Lazzari, the President of Sipnei, in his concluding intervention, we would like to continue this exchange by focusing it on one side to more specific themes and on the other side by expanding it to other branches of the psychological sciences in order to stimulate a more general movement of debate and alignment to which we participate with passion and conviction.