What psychiatrists might be missing in treatment resistent disorders: A quest for meaning

Despite rapid advances in the field of neuroscience, disorders characterized by existential distress such as major depressive disorder and general anxiety are on the rise. Clinical efficacy in treating these disorders has remained largely the same. Lingering feelings of emptiness or purposelessness despite improving scores on depression symptom checklists are frequently captured as 'treatment-resistant residual symptoms'. Using the concept of treatment resistance in psychiatry as a clinical example, this essay explores how the narrow view of biochemical models can obscure underlying existential drivers of psychopathology. It advocates for a broader framework that can give clinicians access to an integrating language that explains why symptom remission is not always equivalent to healing. Drawing on Victor Frankl's empirical observations on meaning as a necessity for psychological survival, logotherapy (healing through meaning) and existential philosophers such as Kierkegaard and Yalom, this piece proposes an alternative view to treatment resistance and possible treatment strategies. Lastly, it aims to summarize existing literature on strategies that try to bridge the integration gap between contemporary neuroscience and meaning (neuro-existential architecture system models), with a specific focus on the role of language..

Literature:

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