



COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES
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EXPOSURE, LIVE (IN-VIVO, LIVE DESENSITIZATION)

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Definition: Systematic repeated exposure to real live situations that cause distress until the resultant discomfort subsides.

Elements: Patients are asked to work out whichever cues usually evoke undue fear from the least to the most frightening. They are then persuaded to gradually expose themselves to those real situations repeatedly, usually for up to an hour or more at a time, to experience ensuing feelings and thoughts to the full without escape, to continue exposure until the discomfort starts to subside, and to do exposure homework preferably daily or as often as possible. If patients so wish, they can start with intense exposure to very frightening situations. Exposure may be with or without a therapist and/or guided by appropriate self-help books or computer systems.

Related procedures: Exposure, habituation, extinction, confrontation, contact desensitization, *systematic desensitization* (done with relaxation), graded modelling, guided mastery (participation), programmed practice, cue-controlled relaxation, applied relaxation, imaginal (fantasy) desensitization, *flooding* (intense exposure – *implosion* if imagined), *interoceptive exposure*, *arugamama* in *Morita therapy*, *behavioral experiment*, *paradoxical intention*, *narrative exposure*, *prolonged exposure counterconditioning*, *virtual reality exposure*, *CAVE (computer-aided vicarious exposure)*, rehearsal relief, *cognitive restructuring*, homework

1st Use? Garfield et al. (1967)

References:

1. Alpers GW, Wilhelm FH, Roth WT (2005). Psychophysiological assessment during exposure in driving phobic patients. *Journal of Abnormal Psychology*, 114, 126-139.
2. Garfield ZH, Darwin PL, Singer BA, McBrearty JF (1967). Effect of "in vivo" training on experimental desensitization of a phobia. *Psychological Reports*, 20, 515-519.
3. Malleon N (1959) Panic and phobia: a possible method of treatment. *Lancet*, 31, 225-227.
4. Watson JP, Gaid R, Marks IM (1971) Prolonged exposure: a rapid treatment for phobias. *British Medical Journal*, 1, 13-15.

Case Illustration

Jen age 35 consulted a therapist for her severely handicapping and inexplicable fear of spiders. She had never really liked spiders and her fear had intensified over the years. Whenever she saw a spider she panicked helplessly, couldn't move, her heart raced, her palms sweated, and she felt embarrassed at depending on other people then. She avoided walking across a lawn or going into her basement or garage lest she encountered spiders there. Having unsuccessfully tried to prevent spiders entering her home she was about to move elsewhere. Jen was told her symptoms were typical of a phobia and that she could endure them for long enough to get used to whatever was

frightening her. Even the mere thought of looking at a spider evoked extreme fear and disgust so she learned to open a book with pictures of spiders at the therapist's office. She took the book home and brought herself to touch the pictures with her fingers. Next she looked at a spider in an empty glass jar for at least 30 min. without her usual attempt to remove it or turn away from it. Jen was encouraged to do exposure without her usual subtle avoidances that stopped her experiencing the fear fully and getting used to it. Thus she looked at the spider and her own reactions in detail, and was fascinated at not being overwhelmed by fear. Her distress decreased during each exposure session and across repeated such sessions. She became more confident exposing herself to spiders at home. After 12 50-minute weekly sessions and several hours of practice at home she touched a large spider and let it crawl across her palm. Jen then cleaned out her garage, kept a spider in a jar in her kitchen and went to bed without checking for spiders. Improvement continued at follow up 8 weeks later.