



**COMMON LANGUAGE for PSYCHOTHERAPY (clp) PROCEDURES**  
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**PLACEBO THERAPY**

**Stefania BORGIO**, Centro per la Ricerca in Psicoterapia, Roma, Italy, [www.crpitalia.eu](http://www.crpitalia.eu)

Definition: Any therapy or part of it yielding positive effects which are unrelated to its “active” components and are attributed to non-specific factors. The opposite (negative) effect is called “nocebo”.

Elements:

1. Calming effect of the patient-therapist relationship or of just being in a safe context (therapy)
2. The therapist's description of potentially effective treatment may lead the patient to expect a positive outcome;
3. The description of a good outcome may afford hope of relief;
4. Past exposure to helpful treatments may induce expectancies of similar effects for a new treatment.

Related procedures: *Autogenic training, cognitive restructuring, guided imagery, hypnosis, classical conditioning.*

Application: “Placebo” effects should be identified and used to maximize therapy efficacy and find the therapy's specific components.

1st use? “Placebo therapy” was introduced by Fish (1973).

References:

1. Enck P, Benedetti F, Schedlowski M (2008). New insights into the placebo and nocebo responses, *Neuron*, 59, 195-206.
2. Fish JM (1973). *Placebo Therapy*. San Francisco: Jossey-Bass.
3. Malizia E, Borgo S (2006). *Le Droghe (Psychotropic Drugs)*, Roma: Newton & Compton.
4. Walrond-Skinner S (1986). Placebo. *Dictionary of Psychotherapy*, pp.163-164, London: Routledge & Kegan Paul.

Case illustration 1. (Borgio, unpublished)

Anna, a teacher aged about 45, phoned for an appointment; the therapist was abroad, so the secretary offered one for 2 weeks later. When the therapist met Anna, Anna said that for the 1st time her panics - the main reason she'd sought treatment - had disappeared soon after she was given the appointment time. Panics had not been the only complaint and after therapy for the other problems began panics were never reported again during treatment or subsequently .

Case illustration 2. (Borgio, unpublished)

A young mother asked advice for her son Carlo aged 8, who after a painful operation for penile phimosis, allowed nobody, not even himself, to touch his penis, so that part of his body was not cleaned. Any attempt ended in tears and fear of pain, but the surgeon could find no medical problem. The therapist advised mother to buy vaseline oil at a pharmacy, and, before applying it, to tell Carlo that it was a powerful analgesic. At the next session mother said the `therapy' had worked well: after the oil was 1st applied the

problem was over and moreover, when Carlo's friends were hurt he immediately gave them the 'holy oil' to treat themselves.

Case illustration 3. (Borgo, unpublished)

When the son of Giorgio, a young professional, was a few months old Giorgio asked for treatment after his wife, a medical doctor, found that he took cocaine about once a month. She warned him about the risks of cocaine and urged him to seek treatment.

Giorgio had been adopted when very young and bonded strongly with his adoptive parents, being their only son. As an adolescent, at peer parties he had inhaled cocaine, but stopped this a few years later. When Giorgio was 30 his father became progressively and severely ill. Giorgio called these years a "calvary" and began to ease this burden by sniffing cocaine increasingly often. His father eventually died painfully. Giorgio tried to control his drug habit and succeeded almost completely after his son was born.

The placebo therapy focused on Giorgio's drug use after an initial four 45min.sessions of stress management to spot internal and external stressors which might lead him to use cocaine. Giorgio was advised - when he felt the next craving - to not inhale cocaine but instead to use a nasal decongestant spray (oxymetazoline hcl) for cold obtainable in a drug store without a prescription: one spray per nostril while inhaling deeply. The nasal spray tastes very bitter and, being a vasoconstrictor, induces nasal sensations like those of cocaine. After 2 weeks Giorgio returned having had a good experience: the nasal spray's effect felt even better than that of sniffed cocaine, stopping him feeling his former guilt linked to putting himself at risk, not controlling himself, deceiving his wife, and aiding the cocaine seller's criminal activities. The therapist advised Giorgio that his use of the nasal spray should not exceed the dose and frequency of his former cocaine use - one spray per nostril per month - lest its effect might wane. For any problem Giorgio could see the therapist again at any time. He phoned back 10 days later saying the solution was satisfactory. He never called again.