How to Deal With Premature Termination in Patients Who Are Expected to Be Retained in Psychotherapy?

Afaf Mansour[1], Khalid Saad[2] and Tarek Molokhia[1].

[1]Faculty of Medicine, Alexandria University, Alexandria, Egypt, [2]Faculty of Medicine, Mansura University, Mansura, Egypt.

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Background: Premature termination has been considered a major problem in psychotherapy. It is defined as the patient's unilateral withdrawn from treatment before therapeutic goals are achieved. So, the authors aimed to identify factors which lead to premature termination in a sample of adult patients who expected to be adherent to treatment and illustrate possible suggestions for preventing this phenomenon.
Methods: seventy psychiatric patients of both sexes whom referred to psychotherapy clinics engaged in the study. They were identified as provisionally Remianers based on the score of the Terminator-Remainer scale. Those who unexpectedly dropped out after receiving the third session were conducted to illustrate reasons for termination to find proper solutions.
Results: After follow-up, 44 patients (62.9%) prematurely terminated the therapy. They had significantly low level of education, high level of anxiety disorder and personality disorders. They treated mainly by behavioral therapy.
Conclusion: Premature termination of psychotherapy could be due to low level of education, high level of anxiety, personality disorders, receiving behavioral therapy and irregularly attending therapy. This data may aid and guide the treatment planning.

Keywords: Premature termination, Drop-out, Terminator, Remainer, Psychotherapy.

Abbreviations:
SD: Standard deviation
OCD: Obsessive compulsive disorder
PD: Personality disorder

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INTRODUCTION

Premature termination, also known as dropout has been considered as a major problem in psychotherapy (Hillis, et al. 1993; Rainer and Campbell, 2001). It is defined as the patient's unilateral withdrawn from treatment before therapeutic goals are achieved (Tehrani, et al. 1996; Rainer and Campbell, 2001). However, post-treatment perspectives on reasons for premature termination are rarely sought (Stevens, et al. 2006). One solution that appears workable is to focus on doing what is necessary to increase the probability of keeping a particular individual in the treatment enterprise. There is evidence that the longer the patient stays in treatment the more likely they are to benefit from (Kelly, et al. 1992; Baruch, et al. 1998).

Rates of patient-initiated premature termination in different forms of psychotherapy are consistently high. It is recognized as a significant obstacle to the effective and efficient use of psychotherapy. The literature describes many strategies for preventing premature termination, but lacks integration (Ogrodniczuk, et al. 2005; Perry, et al. 2007).

The interest for this study developed for many reasons. First, there is a lack of local research on premature termination from psychotherapy. Second, those who drop out do not receive needed clinical services and have poorest outcomes as proved by Rainer and Campbell, (2001) and clinics have invested great deal of staff time in the treatment. Third, this phenomenon represents a significant problem for both the patients and the therapeutic team as reported by Gossling, et al. (2001) and they still represent a high demand on health and social services as found by Minnix, et al. (2005).

The purpose of this study was to identify factors which lead to premature termination in a prospective sample of adult patients who referred to psychotherapy clinic and expected to be adherent to treatment. Also, try to illustrate possible suggestions which would be helpful for preventing or minimizing this phenomenon.

METHODS

After approval of the hospital research committee and informed patient consent, seventy psychiatric patients of both sexes whom referred to psychotherapy clinics were enrolled in this descriptive study. Patients with active psychosis, organic brain disorders, or significant current substance abuse were excluded from the study.

Patient engagement in the study was based on a sum of the score of the Terminator-Remainer scale filled out by patients before treatment. This scale is self