The Impact of Logotherapy on psychosomatic symptoms

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Abstract

This study was aimed to investigate the impact of Logotherapy on Psychosomatic symptoms. Out of the sample of 66 (women) were randomly selected from the college students who showed psychosomatic symptoms, 36 were assigned to experimental group and the other 32 to control group. Data was collected by researcher-initiated questionnaire. The questionnaire consisted of 31 questions about psychosomatic signs. Cornbach's Alpha was 0.951. All participants completed the questionnaire at baseline and again after 6 weeks logotherapy to analyse the data, the paired sample t-test and the analysis of covariance were applied. The t-test and analysis of covariance demonstrated there is a significant (p < 0.05) support of the effectiveness of Logotherapy on Psychosomatic symptoms.

Keywords: Logotherapy, Psychosomatic symptoms

Introduction

Logotherapy

Logotherapy is usually called the "third school of Viennese psychotherapy." To get a better understanding of logotherapy it would be beneficial to compare it against the first school. The first school was Freud's psychoanalysis, which relied on the identification of inherited (usually sexual) mechanisms that had been socially altered. Freud's theory held that all neuroses could be linked back to the warring parts of the self he called the id, ego, and superego. Logotherapy, is a type of psychotherapy that was first developed by Viktor Frankl in 1937. The therapy asks therapists to be aware of their client's spiritual self, as well as the baser instincts first identified.
by Freud and reinterpreted by Adler. Logotherapy also holds on to existentialism as one of its core tenets, yet at the same time also embraces religion (Logotherapy). Frankl felt that man's search for meaning was a primary response, not a rationalization as Freud and others would claim. To Frankl the search for meaning held a deep significance. If meaning was just a reaction he felt it would be terrible: "I would not be willing to live merely for the sake of my 'defence mechanisms,' nor would I be willing to die merely for the sake of my 'reaction formations' (Man's Search 114)."

What is Logotherapy? The "logo" in logotherapy means "meaning" in Greek. Frankl chose logo because it was his feeling that man's search for meaning in his life was his sole purpose (Man's Search 114).

Logotherapy is a person focused therapy that focuses on the future, and is truly a modern therapeutic model for a modern audience (Man's Search 114). Today many people do not need to worry about the basics of life such as food or shelter. In fact more people are successful at their chosen vocation than ever before, yet there is still a hidden despair (Cry for Meaning 21). Frankl felt that his patients were not really depressed or anxiety prone because of a feeling of worthlessness, but rather, because they felt life had let them down. As Frankl himself, put it. Some people may have better choices (cosmetically) than others; however, the choice is there just the same. The most important part of logotherapy, once a patient understands existential choice, is the understanding of how each of us has an existential burden. When a patient goes too far over to one side, Frankl wrote, the neo dynamic falls apart. One of the key ideas in Frankl's therapy is that the world is always changing and every individual has the opportunity to change with it, or remain the same. Frankl argues that through out our lives we are always on our journey of meaning and each of the different developmental stages a different kind of meaning is needed. It is this great search for meaning throughout life that logotherapy is primarily concerned with. If a person can successfully find meaning in each of odd tool for a therapist to utilize in treatment these stages than they are functioning well Those who stall at a point would be good candidates for logotherapeutic therapy Logotherapy struggles to understand the complete person, spiritually as well as psychologically. This allowed therapists to treat spiritual issues rather than just to treat them as another layer of the person to be broken down and analysed

**Psychosomatic symptoms**

Psychosomatic symptoms are pertaining to the interrelation of mind and body, having bodily symptoms of psychic, emotional, or mental origin. psychosomatic disorder (psychosomatic illness) a disorder in which the physical symptoms are caused or exacerbated by psychological factors, such as migraine headache, lower back pain, or irritable bowel syndrome. It is now recognized that emotional factors play a role in the development of nearly all organic illnesses
and that the physical symptoms experienced by the patient are related to many interdependent factors, including psychological and cultural. The physical manifestations of an illness, unless caused by mechanical trauma, cannot be divorced from a person's emotional life. Each person responds in a unique way to stress; emotions affect one's sensitivity to trauma and to irritating elements in the environment, susceptibility to infection, and ability to recover from the effects of illness. Physical conditions to which psychological factors are shown to be contributory are currently classified as *psychological factors affecting medical condition*. Any physical condition can be so classified but the most frequently included are Asthma, Peptic ulcer, bowel disorders, cardiovascular disorders, Arthritis, Allergy, Headache, and certain endocrine disorders. In recent years there has been some success in using behaviour therapy to treat these and other illnesses whose symptoms are related to the autonomic nervous system. Clients are taught new ways of coping with stress and new patterns of behaviour. When a condition is psychosomatic, that means that it involves both the mind and the body. A psychosomatic illness originates with emotional stress or damaging thought patterns, and progresses with physical symptoms, usually when a person's immune system is compromised due to stress. A common misconception is that a psychosomatic condition is imaginary, or "all in someone's mind".

**Method:**

Out of the sample of 66 (women) were randomly selected from the college students who showed psychosomatic symptoms, 36 were assigned to experimental group and the other 30 to control group. Data was collected by researcher- initiated questionnaire. The questionnaire consisted of 31 questions about psychosomatic signs. Cornbach's Alpha was 0.70. All participants completed the questionnaire at baseline and again after 6 weeks logotherapy.

**Results:**

To analyse the data, the paired sample t-test and the analysis of covariance were applied. The t-test and analysis of covariance demonstrated there is a significant (p < 0.05) support of the effectiveness of Logotherapy on Psychosomatic symptoms.

**Table 1: Paired Samples Statistics**

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>N</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1</td>
<td>pretest</td>
<td>36</td>
<td>3.4736</td>
<td>0.5689</td>
</tr>
<tr>
<td></td>
<td>posttest</td>
<td>36</td>
<td>6.5656</td>
<td>1.1342</td>
</tr>
</tbody>
</table>
As it is understood from Table 1, the Mean and Standard Deviation for pre-test are (Mean: 156.6611) and (Std. Deviation, 3.46361). The Mean and Standard Deviation for post-test are (Mean, 123.4166), (Std. Deviation, 6.56561). As a result of Pair samples statistics there is a significant difference between the pre-test and post test scores.

<table>
<thead>
<tr>
<th>Pair</th>
<th>pretest - posttest</th>
<th>Paired Differences</th>
<th>t</th>
<th>df</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>Std. Deviation</td>
<td>Std. Error Mean</td>
<td>95% Confidence Interval Mean</td>
</tr>
<tr>
<td></td>
<td></td>
<td>34.44444</td>
<td>6.14453</td>
<td>1.16413</td>
<td>32.16132</td>
</tr>
</tbody>
</table>

Table 4: Paired Samples test

It is understood from Table, 4, the Mean and Standard Deviation for pre-test – post-test are (Mean, 34.44444), (Std. Deviation, 6.14453). As a result of Pair samples statistics (t: 23.336 and Sig. (2-tailed).111) there is a significant difference between the pre-test and post-test scores.

Table 5: Levene’s Test of Equality of Error Variances(a)

<table>
<thead>
<tr>
<th></th>
<th>F</th>
<th>df(1)</th>
<th>df(2)</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>49.14</td>
<td>1</td>
<td>66</td>
<td>.111</td>
</tr>
</tbody>
</table>

Tests the null hypothesis that the error variance of the dependent variable is equal across groups.

a. Design: Intercept+group+pretest

Table 6: Tests of Between-Subjects Effects

<table>
<thead>
<tr>
<th>Source</th>
<th>Type III Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
<th>Partial Eta Squared</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corrected Model</td>
<td>119434.814(a)</td>
<td>7</td>
<td>17062.802</td>
<td>213.59</td>
<td>.000</td>
<td>.577</td>
</tr>
<tr>
<td>Intercept</td>
<td>14.49</td>
<td>1</td>
<td>14.49</td>
<td>2.086</td>
<td>.113</td>
<td>.138</td>
</tr>
<tr>
<td>group</td>
<td>310.824</td>
<td>1</td>
<td>310.824</td>
<td>4.637</td>
<td>.038</td>
<td>.038</td>
</tr>
<tr>
<td>pretest</td>
<td>310.824</td>
<td>1</td>
<td>310.824</td>
<td>4.637</td>
<td>.038</td>
<td>.038</td>
</tr>
<tr>
<td>Error</td>
<td>483.861</td>
<td>66</td>
<td>7.428</td>
<td>1.000</td>
<td>.111</td>
<td>.111</td>
</tr>
<tr>
<td>Total</td>
<td>1348491.125</td>
<td>66</td>
<td>20862.691</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Corrected Total</td>
<td>244173.311</td>
<td>64</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
a.

b. \[ R^2 = .\text{Adjusted } R^2 = .\] The result of Table \(6\) shows (pretest = Sig.\(\ldots\)) is meaningful.

**Figure 1**: The mean of pre-test and post-test in psychosomatic symptoms

The Result of Figure 1 shows there is a meaningful significant between pre-test and post-test.

**Conclusion**

This study was aimed to investigate the impact of Logotherapy on Psychosomatic symptoms the paired sample t-test and the analysis of covariance were applied.\(\text{sig. } \ldots\). The t-test and analysis of covariance demonstrated there is a significant \((p < \ldots)\) support of the effectiveness of Logotherapy on Psychosomatic symptoms.

**Discussion**: This study demonstrated the effectiveness of logotherapy on psychosomatic symptoms. It is well known that the mind can cause physical symptoms. For example, when people are afraid or anxious they may develop a fast heart rate, palpitations, feeling sick, shaking (tremor), sweating, dry mouth, chest pain, headaches, a knot in the stomach, and fast breathing. These physical symptoms are due to increased activity of nervous impulses sent from the brain to various parts of the body, and to the release of adrenaline into the blood stream when people are anxious. The way that the mind can cause certain other symptoms is not clear. Also, how the mind can affect actual physical diseases (rashes, blood pressure, etc) is not clear. It may have something to do with nervous impulses going to the body, which we do not fully understand. There is also some evidence that the brain may be able to affect certain cells of the immune system, which is involved in various physical diseases. This research demonstrated logotherapy can control the effect of mind on body.
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