

Chemo- or Psycho- therapy? Both

Diego Liberati*

Research Director, National Research Council, Italy

***Corresponding Author:** *Diego Liberati*, Research Director, National Research Council, Italy.
Email: *diego.liberati@gmail.com*

EDITORIAL

An old debate among psychiatry and psychology amounts to magnificate or demonize the effects of pharma drugs versus behavioural therapies in mental health. As usual, probably no one is correct alone, one complementing the other.

Willing or not, we are, or at least appear, as body and soul (or psyche if preferred). It pertains to metaphysics to debate if they are just two aspects of the same reality, if one determines the others, and so on.

For us, the important think is that they at least heavily interact. Thus, intervening on one side could influence the other side, and moreover intervening on both may speed and refine the desired effect.

The big apparent difference is that drugs seem to require just the appropriate diagnosis, while behavioural therapy implies a longer follow up. But this is true only until a certain point.

Every drug acts in a slightly different way on each patient at a different dose and even often different times when assumed. Thus the tuning of a pharma therapy both in acute and in chronic is not really a one shot action, but implies a closed loop of tight interaction among physician and patient.

On the other hand, behavioural improvement is of course a question of teaching, but also of regular excercising, thus limiting the need of the instructor to less than the total therapy time. In both case thus the precious time of the physician is requested and not wasted if properly administrated.

Sinergy among the two therapies is sought in order to maximize effects whilst minimizing efforts, as well as among the two or more phisicians if the administrator of both is not the same individual.

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