

a mental disorder. The second perspective is the perspective of healing or getting out of a "fairytale" story/script by changing an incoherent life narrative into an alternative coherent narrative. The aim of this pilot case studies approach was to use a narrative approach based on stories and fairy tales in order to promote psychological growth, meaning in life, resilience, self-realization and improved well-being and highlight the dialectic of recovery, an interplay of acceptance and change. With properly applied creative, person-centered narrative psychopharmacotherapy, the patient is capable of changing their beliefs in order to reach a new meaning and way of life, and thus to facilitate the lowering of symptomatology, its disappearance and possibly even a cure, whatever that may mean for an individual. At the end of mental health medication treatment personal recovery is a wishful therapeutic goal. Considering its promising results, clinical implications and possible further applications are discussed.

Key words: dialectics of change - fairy tale - script - psychopharmacotherapy - personalized approach - narrative psychotherapy - healing, personal recovery - coherent life story

* * * * *

TREATMENT IN PSYCHIATRY IN A NEW CLASSIFICATION ATTIRE IN THE SHADOW OF SILENCE AND UNPROCESSED TRAUMAS FROM THE PAST: The Imperative of Perfectionism in the Present and Shame and Discomfort in the Future

Alija Sutović

*Department of Psychiatry, University Clinical Centre Tuzla, Tuzla, Bosnia and Herzegovina
School of Medicine, University of Tuzla, Tuzla, Bosnia and Herzegovina*

The new classification systems in psychiatry have dressed both patients and psychiatrists in completely new attire. One (DSM -5) is widely used and critics are hardly at peace with the psychiatry of normal living conditions and phenomena and a missed opportunity to 'save the normal'. The second attire is still standing on the mold in tailoring salon in Geneva (ICD-11) and is being ornamented by the online testing through a global network of clinical practice, now around 15,000 clinicians and mental health professionals, before it is distributed to psychiatrists worldwide.

The objective is to (be) treated better and to keep quiet. We remain silent for fear, shame and insecurity in the face of devastating tendencies in the modern world. Unprocessed traumas and mourning from the past in current global setting support various mental disorders. Trauma leaves strong emotions, so if it has not been processed and the loss has not been mourned, these charged emotions get the characteristics of emotional volcanoes or timed bombs that are easily activated. Unprocessed group trauma among political or ideological leaders can become a means of strong manipulation of the masses. And the 'masses' are immersed, globally, in the mentalization of cognitive achievement at the expense of the emotional principle.

By forcing competitiveness, perfectionism and narcissism, people try to 'be successful' at all costs. Perfectionism is a phenomenon that, under the influence of scientific and technological progress, computerization and globalization, increasingly affects the psychosocial development, functioning of the individual and society as a whole. Perfectionism is increasingly associated with anxiety and affective disorders, obsessive-compulsive disorders, eating disorders, and suicidality. Virtual reality, virtual sexuality, pornography, pervasive alienation and loneliness create a position of shame and cultural discomfort, which is so far the price of conformism. But in the Manichean prism, we might also call the new age an era of shamelessness and perversion in the broader sociocultural context leaving open the key question: "Can modern civilization avoid self-destruction?"

Key words: treatment in psychiatry - new classification - silence - unprocessed traumas - imperative of perfectionism - shame and discomfort - past - present - future

* * * * *

CREATIVE PERSON-CENTERED PSYCHOPHARMACOTHERAPY IN THE CONTEXT OF PRENATAL PSYCHIATRY - DILEMMAS AND CHALLENGES

Dina Šmigalović¹, Mevludin Hasanović^{2,3}, Izet Pajević^{2,3}, Asim Kurjak⁴,
Miro Jakovljević⁵ & Aron Mulahalilović⁶

¹*Mental Health Care Center, Public Institution „Dom zdravlja“ Kalesija, Kalesija, Bosnia and Herzegovina*

²*Department of Psychiatry, University Clinical Center Tuzla, Tuzla, Bosnia and Herzegovina*

³*School of Medicine University of Tuzla, Tuzla, Bosnia and Herzegovina*

⁴*Department of Obstetrics and Gynecology, Clinical Hospital “Sveti Duh”, Medical School
University of Zagreb, Zagreb, Croatia*

⁵*Department of Psychiatry and Psychological Medicine, University Hospital Centre Zagreb, Zagreb, Croatia*

⁶*Mental Health Care Center, Public Institution „Dom zdravlja“ Gradačac,
Gradačac, Bosnia and Herzegovina*

The authors presented a psychopharmacotherapeutic approach to the treatment of women in the prenatal period that requires a personalized, person-centered treatment plan. Treatment should include care for the mental health of women of childbearing age, pregnancy planning, during the prenatal period, and then during the postpartum period. The authors highlighted creative psychopharmacotherapy which is the foundation of holistic and integrative treatment of mental disorders. They emphasize the significant role of the mother in the emotional development of the child, which begins while the child is still in the womb. Mothers who stop taking psychotropic drugs during pregnancy have an increased risk of recurrence of the mental disorder after childbirth because the mother's psychiatric illness is not a benign event and can cause significant morbidity for both the mother and her child, therefore, discontinuation or denial of medication during pregnancy is not always the safest option. For more serious disorders, such as schizophrenia, bipolar disorder, and severe depression, medications may be needed during pregnancy and lactation, despite complex evidence based on the effects of psychotropic medications on the fetus and newborn. Perinatal mental health has become a significant focus of interest in recent years. The randomized controlled examinations provide evidence of the effectiveness of psychological and psychosocial interventions at the individual level. It is necessary to make a new conceptual shift in the approach to maintaining the mental health of pregnant women and newborns, and that is to optimize the mental health of pregnant women, and not simply reduce the symptoms of mental disorders from which they suffer before conception, during pregnancy and after childbirth. Dilemmas and challenges of psychopharmacotherapeutic treatment in the prenatal period are intensified by the knowledge that the psychological difficulties of mothers can significantly affect the integrity of the safe relationship between mother and child, which is essential for the emotional, cognitive, and behavioral development of the child. Often, these problems existed before pregnancy or occurred during pregnancy, and they are often the deterioration of the mental state due to discontinuation of pharmacotherapy during this period.

The quality of the biopsychosocial milieu in the fetal period and childhood during the early neuroplastic development phase is one of the determinants of risk for diseases during the life cycle. For this reason, the mental health of pregnant women and mothers must be optimized. For many of these women, health is optimized with pharmacotherapy.

Key words: creative person-centered psychopharmacotherapy - prenatal psychiatry - mental disorders

* * * * *

INTEGRATING THE CONCEPT OF CREATIVE PSYCHOPHARMACOTHERAPY AND GROUP PSYCHOTHERAPY IN CLINICAL PRACTICE

Esmina Avdibegović^{1,2}, Maja Brkić¹ & Mevludin Hasanović^{1,2}

¹*Department of Psychiatry, University Clinical Center Tuzla, Tuzla, Bosnia and Herzegovina*

²*School of Medicine, University in Tuzla, Tuzla, Bosnia and Herzegovina*

Modern psychiatric treatment is largely dictated by national and international guidelines rested on evidence-based data, including psychopharmacotherapy and psychotherapy. An alternative to the rigid application of official guidelines and criterion for the standards of treatment in psychiatric practice is the concept of creative psychopharmacotherapy. It is a concept based on the integration of different