

Opening Speech
by dr. Henry Jablonski,
President of The International Balint Federation

Dear Romanian hosts and colleagues,

On behalf of the International Balint Federation I wish to say how pleased we are to be here. Many thanks to the members of Romanian Organising Committee for their work creating this environment for our meeting and for preparing the extensive scientific and social programme.

In these four days, people from all over the world who have gathered here, will be offered the challenge, inspiration, excitement and comfort to share and discuss Balint projects and and medical educational experiences. We will have the opportunity in the Balint groups running throughout the conference to cultivate our clinical senses in the discussions of down-to-earth clinical experiences and to develop the relations between each other

In this way the congress will be another milestone in a continuous process of developing and promoting Balint group work.

We know the Romanian Balinters as active partners of the International Federation and look very much forward to make a deeper acquaintance with you during this congress.

So, dear Romanian Balint colleagues, many thanks for hosting the Balint congress here in Poiana Brasov! Thank you very much!

In short: on behalf of the IBF I expressed our thanks to all the members of the Romanian Organising Committee. We in the IBF who have been part of the extensive preparatory work for the congress share their delight setting out on our 4 days congress journey. It is really wonderful to be here. Thank you so much!

Dear delegates to the 16th International Balint Congress, ladies and gentlemen

The old Greeks already knew that being a good enough doctor is not only about finding out the disease and its cure. It is equally important to know who is the patient suffering from the illness. But it seems every new generation of doctors has to make this old wisdom come alive again. This



is one important aspect of Balint work. The other – and even more difficult one - is: What kind of doctor and person am I and how does it affect my relations to my patients?.

Michael Balint, the founder and inspirator of the training method carrying his name, already, 60 years ago advocated the idea that the doctor has to be trained to integrate the medical technical aspects on the one hand, with the personal understanding of the patient, the interplay between the doctor and his patient on the other. Balint envisaged a health care system in which the wise, committed and competent GP/ family doctor is at the centre of the health service. Since then, quite a few nations have successfully implemented this idea in their health care systems. Balint work is not a political movement But by its focus on the doctor-patient relationship – intrinsically and quite unintentionally – it does have a political twist since the way the various national health systems are designed clearly affects the doctor-patient relationship.

There are many interesting places in life. But there are very few places like the doctor's consulting room. Here you will find such density of all kinds of hope, joy, relief, human dignity, ordinary and strange pleasures, respectful intimacy and suspiciousness, all kinds of despair and anxiety, human pettiness, uncertainty and awe about life and about disease and threatening death. That is what makes work so fascinating and challenging. That is also what can make it so difficult and exacting and bring people to exhaustion and burn-out.

One of the themes of our congress is "Writing a prescription is easy – understanding your patient is not so easy" and we will hear more about this soon, and we will work on it in during the congress. But you could just as well see it from the perspective of the patient: "Receiving a prescription is easy but understanding what the doctor actually meant by it is not always so easy".

The patient may ask after he/she has left the consulting room with the prescription. "What was this all about? Does the doctor understand my problem, does he care?"

Even if you are a person in a strong social position, you may ask yourself these questions – and you might add: "Does he dare taking the risk relating to me as a good doctor should to an ordinary patient? Or is he governed by exaggerated respect maybe even fear? Does he think I will sue him, or file a complaint to the Medical Board, or strip him off his privileges?"

I am pretty sure that all of us the day we ourselves become patients wish to have a doctor who is in touch and professionally careful and independent. This is what we primarily are trying to maintain and develop by Balint group work.

Though the cathexis found in doctor-patient relationship is very special it is certainly not unique. Michael Balint knew about intense clinical relations from his own experience as a dedicated psychoanalyst. That is why he was able to highlight this aspect of doctoring to his GP colleagues. There are also other professions in which you will find highly cathected human relationships: clergymen, nurses, teachers, physiotherapists, social workers, lawyers, managers and human relation officers of companies and organisations, policemen in democratic societies etc etc. In all such areas Balint group work can be very useful for professional development and maintainance of professional standards.

You have chosen a beautiful and dramatic place for our congress. We are surrounded by a landscape and an ancient culture that make you humble. Two years ago – in Berlin when we decided to have the Congress here, by coincidence, in a jazz club of all places, I heard a melody from Transylvania which moved me deeply and has stayed with me even stronger since I learnt the meaning of the words.

The song is many many hundred years old, maybe 500, maybe even more. It says something important about life and also about the conditions that we have to recognise in our work.

Love, love,
You are like a curse
Love, love,
You are like a curse

Szerelem, szerelem
Átkozott györtrelem
Szerelem, szerelem
Átkozott györtrelem

(Love!) Why do you not blossom from every tree
from every tree
From every leaf of the cedar tree?

Miért nem virágoztál
Minden fa tetején

Minden fa tetején
Cédrus fa levelén

There is no rose
That blossoms in a (too) small garden
There is no rose like the one
When you love one another

Haj, de nem az a rózsza
Ki kis kertben nyílik
hanem az a rózsza
ki egy mást szereti

This is a song out of the longing for love. The unknown author of these lyrics tells us about true love and caring, which needs mutuality to develop. He or she also was painfully aware of that love can be severely inhibited by the tyranny of family and social rules (no rose can blossom in too small a garden).

So many of our patients come to us with diffuse symptoms and complaints. As doctors we meet many patients who suffer from love deficits and love disappointments. Human individuals are more or less vulnerable to lack of love and care. People have - deeply imbedded in their souls and bodies - various experiences from being loved and cared for OR the reverse - being neglected or abused. These experiences may be recent or belong to the remote past of the patient. And our bodies are a timeless carriers of drives and memories. Thus they are preserved, thus they are hidden from us and thus they cause us discomfort. But thus - by being encapsulated as symptoms in the body - the individual can carry on in everyday life without being overwhelmed. Until it becomes too much. That is when many people pay a visit to their doctor.

It is not a new thought, yet meaningful for the caring clinician to consider the relevance of love deficit or love conflict expressions. But this idea is not to be trivialised - something to be "known" in a smug way as some psychotherapists tend to do. And we cannot prescribe love, adequate family and social relations which will cure our patients - though some of us might have tried. But we can learn to relate to our patients and treat them with a deeper understanding, adequate care and with respect - and also with respect for our own limitations. In this way we learn something about ourselves too. In my own experience this is the most difficult but at the same time the most rewarding challenge of both doctoring and being a psychotherapist.

People who suffer from severe and incomprehensible symptoms have a hidden agenda. Mostly it is also more or less hidden to themselves.

Doctors who treat such patients also may have corresponding hidden agendas. Such patients can be abused (again!) by doctors - consciously or unconsciously - i.e. when they take extreme measures to rule out, investigate etc etc though they do not believe it is meaningful. Such patients can also abuse doctors and push them to do things they do not want to. But if we are to compare the health service to a cedar tree forest - it does happen that such

patients meet with a doctor - a blossom of the cedar tree - that manages to care for the patient medically and humanly, and thus helps the patient to make life a little bit more endurable, yes, miracles of improvement do also happen.

Does not the last phrase of the song

There is no rose
That blossoms in a (too) small garden
There is no rose like the one
When you love one another

say something about the conditions for the medical profession too?. If we are to minimise the risk for mechanical treatment and working too far from the state of our art, then we as doctors must try as much as possible to free ourselves from those aspects of the system that threaten to undermine the doctor-patient relationship and medical ethical standards. Such skews exist to a varying degree in all health care systems.

I phrased some of them as questions in my address on the congress homepage.

In short: Do diminishing social barriers tempt the doctor to become the friend, lawyer or even accomplice of his patients? Does the social welfare system or an authoritarian system transform him into a representative of the social authorities? Do the drugs available today and the way they are marketed, combined with the work load and lack of clinical presence of the doctor tempt him to prescribe a more or less standardised, too often inadequate (and costly) medication to his patients? Does the privatisation of the previously publicly organised health care turn him into a businessman rather than a doctor? Will evidence based treatment programmes for various diseases make us lose the assessment of the patient as a whole person? How is the relationship affected when doctors and patients come from vastly different cultural backgrounds?

All these issues can also be addressed in a personal way by doctors relating to each other in a Balint group. It will not solve all the problems but it will be helpful in increasing the awareness and sensitivity of the doctor. In this way tea-spoon by tea-spoon our clinical work can be improved. Tea-spoon by tea-spoon such issues can also be brought into the administrative and political process of health care. One first administrative step is to make the time for regular Balint group work available.

I am looking forward to exchanging thoughts, listening to papers, and to participating in vivid discussions about the doctor-patient relationship, about the development of the Balint method as an important supportive tool for all clinically engaged professionals, and about values in contemporary medicine.

And again, many thanks to our Romanian hosts!

Dragi colegi și gazde din România,
în numele Federației Internaționale Balint doresc să vă spun cât de bucuroși suntem că ne aflăm aici. Adresez calde mulțumiri membrilor Comitetului Român de Organizare

pentru munca depusă la crearea acestui mediu plăcut în care să ne desfășurăm întâlnirea de lucru, pentru pregătirea programului științific extins și a activităților sociale !

Ne-am adunat aici oameni din toate colțurile lumii ca în aceste patru zile care ni se oferă, să discutăm despre proiectele Balint, să ne împărtășim experiența medicală, să ne confruntăm ideile, să ne lăsăm inspirați, emoționați, încurajați!

Pe parcursul Conferinței, în cadrul grupurilor de lucru Balint, vom avea ocazia să ne cultivăm intuiția, judecata clinică în discuții realiste despre experiențe clinice, să ne cunoaștem și să dezvoltăm relații amicale. În acest sens Congresul va fi un adevărat proces de dezvoltare și promovare a grupurilor Balint.

Pe colegii români îi cunoaștem ca parteneri activi în cadrul Federației Internaționale și așteptăm cu mare nerăbdare ca în timpul acestui Congres să consolidăm relațiile noastre. Dragi colegi români, membri ai grupurilor Balint, multe mulțumiri pentru găzduirea Congresului Balint aici la Poiana Brasov, vă mulțumesc foarte mult!

**Opening Speech
by dr. Baka Tünde, President, ABR**

Welcome everybody,

It is much easier to make a speech at the beginning of an event like our Congress, than at the end of it.

Why is that so?

I think this is because now, at the beginning, on such a wonderful morning, we are speaking about our plans, our expectations and dreams with great enthusiasm and optimism.

In fact, we are going to speak about the perfect conference which gives us the feeling of having control. However at the end of this Congress when your feedbacks, opinions, impressions, memories will follow- which will certainly be very different-we could also feel some uncertainty, or even anxiety.

In fact, we will lose control!

This is the risk of any organisation!

In the beginning there was the idea...

The idea to organize an International Congress of the Balint Federation, here in Romania.

This idea was born in the mind of our ex- president, Berci Veress, at Oxford, eleven years ago.

This idea, like a prematurely newborn child, was unexpected, spontaneous, maybe it seemed a little aggressive at that time, although full of life and vitality.

Berci and his wife Eva are very good parents and so the idea became a fact.

After several years we are here in full opening of the congress and say thanks for the board of the Federation to offering us the opportunity of organizing this event here in the center of Romania.

In my fantasy, Balint-work means for us a parallel

world, where dimensions are variable, dynamic and so much different.

Our projection is very positive and authentic in this parallel world and our participation at Balint congress is like a teleportation.

For example yesterday distances on latitude and altitude between London and Brasov, Stockholm and Brasov were so significant, today they have totally disappeared.

The dimension of time will also expand during the Congress: here every minute, every hour will gain importance again.

So, I welcome you all, at the 16th International Congress here in Brasov, Transylvania, Romania.

Transylvania, well-known as the land of ballads, a very romantic region of the country which can certainly induce a favorable state of mind for Balint activity.

Thank you all to be here with us!!