



Chapters 14 & 15

Psychological Disorders and
Treatment

CONCEPTUALIZATION OF ABNORMAL BEHAVIOR

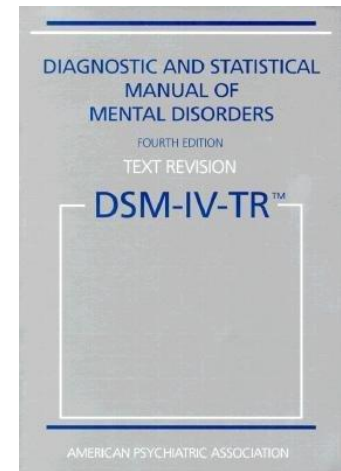


1. Deviation from cultural norms
2. Cause of personal distress
3. Maladaptive
 - Interference with work, social relations, or self-care

CLASSIFICATION

Diagnostic and Statistical Manual of
Mental Disorders Fourth Edition (Text Revision)

→ DSM-IV-TR



Multiaxial System: 5 axes

1. Clinical disorders
2. Mental retardation/personality disorders
3. Medical conditions
4. Psychosocial and environmental problems
→ (ie. Divorce, poverty, unemployment)
5. Global assessment of functioning

ASSESSMENT



Assessment → diagnosis → determine treatment and prognosis

1. Clinical Interview

- Structured
- Unstructured

2. Observation of Behavior

- hygiene, conversational ability, agitation

3. Testing

- Psychological tests (self-report questionnaires)
- Neuropsychological Tests

Susceptibility Factors

Diathesis-Stress Model

1. Biological Factors

- Genetic factors, prenatal and adolescent insults (ie. Malnutrition, toxins)

2. Psychological Factors

- Family systems model
- Socio-cultural model

3. Cognitive-Behavioral Factors

- Abnormal thoughts and behaviors are learned
- Distorted thoughts = maladaptive emotions/ behaviors

Susceptibility Factors

Diathesis-Stress Model

4. Sex Differences

- Females: Internalizing disorders
- Males: Externalizing disorders

5. Culture

- Universal vs. culture specific symptoms

TYPES OF TREATMENT

1. Psychotherapy

- Psychodynamic therapy
- Humanistic therapies
- Cognitive behavioral therapy
- Group therapy
- Family therapy



TYPES OF TREATMENT

2. Medication

→ Anti-anxiety

- benzodiazepines

→ Antidepressants

- Monoamine oxidase inhibitors
- Tricyclic antidepressants
- SSRIs

→ Antipsychotics

- neuroleptics ie. haloperidol
- Atypicals ie. clozapine



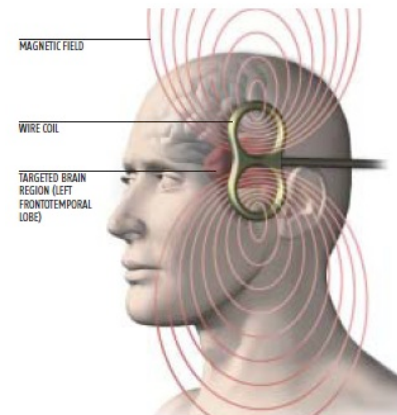
TYPES OF TREATMENT

3. Alternative Biological Treatments

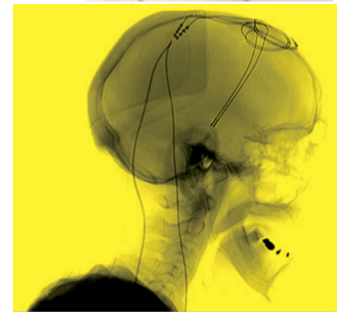
→ Electroconvulsive Therapy



→ Transcranial Magnetic Stimulation



→ Deep Brain Stimulation



ANXIETY DISORDERS

When anxiety interferes with normal functioning

1. Phobic Disorder

- excessive/unreasonable fear of specific object/situation
- Specific phobia
- Social phobia
- Behavioral therapy: systematic desensitization, exposure therapy, relaxation training
- SSRIs for social phobia



2. Generalized Anxiety Disorder

- Persistent, excessive anxiety and worry in the absence of a causal stimulus occurring most days
- Tranquilizers (short-term), antidepressants, CBT

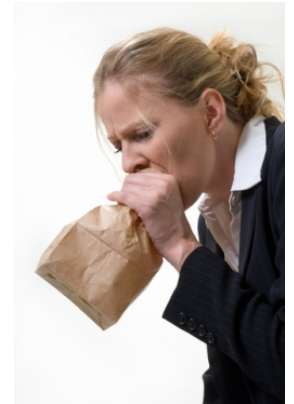


ANXIETY DISORDERS

When anxiety interferes with normal functioning

3. Panic Disorder

- Recurrent, unexpected panic attacks along with persistent worry of future attacks
- Panic attacks: Racing heart, sweating, trembling, shortness of breath, chest pain, dizziness, etc..
- CBT/behavioral therapy (exposure therapy)



4. Obsessive-Compulsive Disorder

- Obsessions: frequently recurring, uncontrollable, anxiety-producing thoughts
- Compulsions: repetitive acts performed to alleviate anxiety evoked by the obsession
- clomipramine (SSRI); CBT (exposure and response prevention); DBS

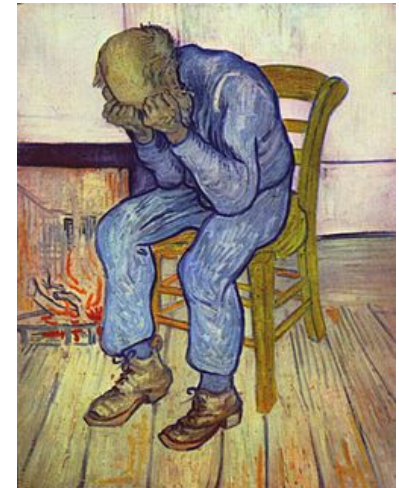


MOOD DISORDERS

Extreme emotions

1. Major Depression

- Depressed/irritable mood + loss of interest in pleasurable activities + 3 other symptoms (ie. weight change, sleep problems, guilt etc.)
- 2x more women
- Dysthymia: less extreme depressed mood but longer duration
- Antidepressants treat monoamine deficiency
 - Early antidepressants: MAOIs, tricyclics
 - SSRIs
- CBT to treat cognitive factors like learned helplessness, cognitive triad of negative thoughts (onself, present situation, future)



MOOD DISORDERS

Extreme emotions

2. Bipolar Disorder

- Periods of major depression and mania
- Mania: elevated mood, insomnia, increased energy, grandiosity, racing thoughts
- Hypomania: less extreme elevated mood
- lithium



SCHIZOPHRENIA

“Divided Mind”

1) **Positive Symptoms:** excess of normal

→ Delusions: distortion in thought

→ Hallucinations: distortion in perception

→ Loosening of associations:

- Disorganized thoughts ie. Clang associations

→ Disorganized Behavior

- Odd behavior ie. Echolalia, poor hygiene

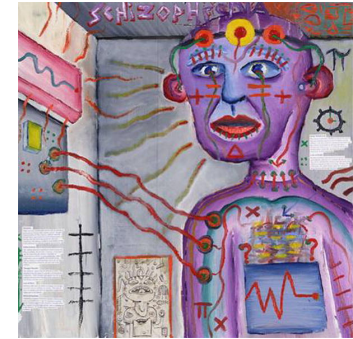
2) **Negative Symptoms:** loss of normal

→ Social withdrawal, apathy, slowed speech, emotional blunting



SCHIZOPHRENIA Treatment

“Divided Mind”



“First generation antipsychotics”

reserpine → chlorpromazine → haloperidol

→ block dopamine receptors

→ Motor side effects resembling Parkinson's disease

→ Only effective for positive symptoms

“Second generation antipsychotics”

→ Clozapine and many others

→ Act on multiple neurotransmitter systems

→ No motor side effects

→ Can treat negative and positive symptoms

PERSONALITY DISORDERS

Pervasive inflexible pattern of thinking, perceiving, and relating to others

1) Odd/Eccentric

→ paranoid, schizoid, schizotypal

2) Dramatic, Emotional, Erratic

→ Histrionic, Narcissistic, **Borderline**, **Anti-social**

3) Anxious/fearful

→ Avoidant, Dependent, Obsessive-Compulsive

PERSONALITY DISORDERS

Borderline Personality Disorder

- Lack sense of self ie. Fear of abandonment
- Emotional instability ie. Mood swings
- Lack impulse control ie. Self-mutilation
- Dialectical behavioral therapy

Anti-social Personality Disorder

- Disregard for and violation of the rights of others
- Includes psychopaths



CHILDHOOD DISORDERS

1) Autism

- Deficits in social interaction ie. Difficulty understanding others' emotions
- Impaired communication ie. Pronoun reversal
- restricted interests ie. Repetitive behaviors
- A spectrum of disorders (Asperger's syndrome)
- Applied behavioral analysis



2) Attention Deficit Hyperactivity Disorder

- hyperactivity, inattention, impulsivity
- Methylphenidate “Ritalin”- stimulant that increases dopamine levels

