

Week 10 - Day 1 (Ch 11 - Pt 2)

Mar 21, 2016

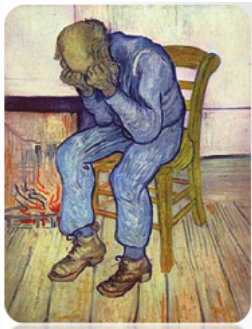
[Quizlet](#)

Announcements:

- Homework 5 is now available
 - Due at noon on April 6th

Schizophrenia

What is Schizophrenia?



- **Schizophrenia:** a psychological disorder characterized by a split between thought and emotion; involves alterations in thoughts, in perceptions, or in consciousness
 - split between person and reality
- It is a psychotic disorder, the essence of which is a disconnection from reality referred to as psychosis
- Current estimates state between 0.5 percent and 1.0 percent of the population has schizophrenia; affects women and men similarly

Types of Symptoms in Schizophrenia

- **Positive symptoms:** excesses in functioning, such as delusions, hallucinations, and disorganized speech or behavior
 - Extra symptoms
- **Negative symptoms:** deficits in functioning, such as apathy, lack of emotion, and slowed speech and movement
 - Deficits in functioning
 - Withdraw inward



Positive Symptoms of Schizophrenia

- Common positive (i.e., excessive) symptoms associated with schizophrenia include:

- **Delusions:** false beliefs based on incorrect inferences about reality
- **Hallucinations:** false sensory perceptions that are experienced without an external source. Frequently auditory, they can also be visual, olfactory, or somatosensory.
 - External
 - Often respond aloud to these sounds they hear
- **Loosening of associations:** Individual shifts between seemingly unrelated topics as he or she speaks, making it difficult or impossible for a listener to follow the speaker's train of thought
 - Word salad
- **Disorganized behavior:** Person might walk along muttering to himself, alternate between anger and laughter

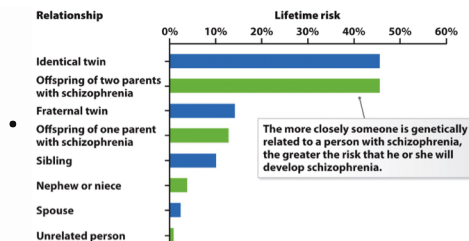
TABLE 14.5 Delusions and Associated Beliefs	
Persecution	Belief that others are persecuting, spying on, or trying to harm them
Reference	Belief that objects, events, or other people have particular significance to them
Grandeur	Belief that they have great power, knowledge, or talent
Identity	Belief that they are someone else, such as Jesus Christ or the president of the United States
Guilt	Belief that they have committed a terrible sin
Control	Belief that their thoughts and behaviors are being controlled by external forces

Negative Symptoms of Schizophrenia

- A number of behavioral deficits associated with schizophrenia result in patients' becoming isolated and withdrawn:
 - People with schizophrenia often avoid eye contact and seem apathetic
 - They do not express emotion
 - Speech is slowed and they use a monotonous tone of voice, long pauses before answering, failure to respond to a question, inability to complete an utterance after initiating it
 - Movements may be slowed and the overall amount of movement reduced, with little initiation of behavior and no interest in social participation
- Negative symptoms are more resistant to medications
 - Difficult to treat because "How do you make someone engage in conversation"

Biological Components of Schizophrenia

- Genetics plays a role in the development of the disorder
 - If one identical twin develops schizophrenia, the likelihood of the other twin's succumbing is almost 50 percent; 14 percent if the twins are fraternal
 - Genetic component of schizophrenia represents a predisposition rather than destiny
 - Does not mean that you are certain to develop it
- Schizophrenia in the brain
 - Ventricles in the brain are enlarged and there are abnormalities throughout many brain regions
 - Might explain the extra sensory experiences
 - Schizophrenia may result from abnormality in neurotransmitters (e.g., dopamine)



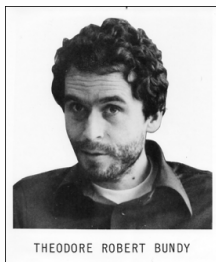
Environmental Factors

- Environmental stress seems to contribute to the development of schizophrenia:
 - Being born or raised in an urban area approximately doubles the risk of developing schizophrenia later in life
 - A large city like New York will increase your chances of developing the disease
 - People with schizophrenia are more likely to have been born during late winter and early spring
 - Mothers of children born in late winter and early spring were in their second trimester of pregnancy during flu season
 - Mothers of people with schizophrenia are more likely than other mothers to have contracted influenza during this critical period
 - Growing up in a dysfunctional family may increase the risk of developing schizophrenia for those who are genetically at risk

True Life: I Have Schizophrenia

<http://www.mtv.com/videos/true-life-i-have-schizophrenia/1586145/playlist.jhtml>

Personality Disorders



- **Personality Disorder**
 - More enduring than other disorders
 - Has an onset in adolescence or early adulthood
 - Is stable over time
 - Leads to distress or impairment



- Although individuals change somewhat over time, the ways they interact with the world and cope with events are fairly fixed by the end of adolescence
- Some people interact with the world in maladaptive and inflexible ways

- People with personality disorders:
 - consistently behave in maladaptive ways
 - show an extreme level of maladaptive behavior
 - Not just occasionally grumpy person. They're that way all of the time
 - experience much personal distress and problems as a result of their behavior

Personality Disorder Clusters

- **Cluster A:**
 - Paranoid PD
 - Schizoid PD
 - Schizotypal PD
- **Cluster B:**
 - Antisocial PD
 - Borderline PD
 - Histrionic PD
 - Narcissistic PD
- **Cluster C:**
 - Avoidant PD
 - Dependent PD
 - Obsessive-Compulsive PD

Cluster A Personality Disorders

- “Odd, eccentric” cluster



Paranoid PD

- Associated characteristics:
 - Tense
 - Guarded
 - Holds grudges
 - Suspicious

Schizoid PD

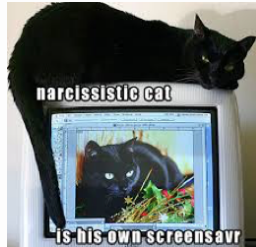
- Associated characteristics:
 - Socially isolated
 - Emotionally restricted
 - Has no desire for relationships

Schizotypal PD

- Associated Characteristics:
 - Peculiar thoughts, appearance, and behaviors
 - Emotionally detached
 - Socially isolated
 - Superstitious
- It's like a person who has a random weird take on things
 - Any time you have a conversation with them, they have a weird spin on it

Cluster B Personality Disorders

- “Dramatic, emotional, erratic” cluster



Borderline PD

- Associated Characteristics:
 - Cannot stand to be alone
 - Intense
 - Unstable moods
 - Unstable relationships
 - Chronic anger - outbursts
 - Suicidal tendency/self mutilation
 - Substance abuse

Borderline Personality Disorder Is Associated with Poor Self-Control

- **Borderline personality disorder:** characterized by disturbances in identity, in affect, and in impulse control
- The term borderline was initially used because these patients were considered on the border between normal and psychotic
- Approximately 1 percent to 2 percent of adults meet the criteria for borderline personality disorder; more than twice as common in women as in men
- Possible causes: low serotonin, trauma, or abuse

Histrionic PD

- Associated Characteristics:
 - Seductive behavior
 - Needs immediate gratification
 - Needs constant reassurance
 - Shallow emotions
 - Rapidly changing moods

Narcissistic PD

- Associated Characteristics:
 - Self-absorbed
 - Expects special treatment
 - Expects admiration
 - Envious when others get attention
 - Very inflated sense of self worth

Antisocial PD

- Associated Characteristics:
 - Manipulative
 - Exploitative
 - Dishonest
 - Disloyal
 - Lacking guilt
 - Habitually breaks social rules
 - Legal trouble
 - Childhood history of such behavior
- In 1980, the DSM dropped the former label psychopath and adopted the term antisocial personality disorder (APD)
- **Antisocial personality disorder (APD)**: a personality disorder marked by a lack of empathy and remorse
- APD is the catchall diagnosis for individuals who behave in socially undesirable ways, seeking immediate gratification of wants and needs without any thought of others
- Serial killers are often classified this way

Assessment and Consequences

- APD estimated at between 1 percent and 4 percent of the population; more common in men than in women
 - Most apparent in late adolescence and early adulthood
 - Generally improves around age 40
 - The disregard for social norms kind of drop off at old age
- Perhaps as much as 50 percent of the prison population meets the criteria for APD
 - Affected individuals are often charming and intelligent, lacking remorse, willing to lie or cheat, and lacking empathy
 - Individuals do not seem to feel fear or anxiety (Lykken, 1995)
 - They don't get afraid
 - Some with APD manage to be successful professionals

The Etiology of APD

- Genetic and environmental factors appear to play roles in APD
- EEG examinations show criminals who meet the criteria for antisocial personality disorder have

slower alpha-wave activity

- Pattern of reduced psychophysiological response in the face of punishment also occurs in adolescents at risk for developing psychopathy (Fung et al., 2005)
 - Aren't scared of punishment
- Evidence of amygdala abnormalities
 - amygdala controls fear
- Factors such as low socioeconomic status, dysfunctional families, childhood abuse, and malnutrition may also be important

APD vs. Psychopathy

- APD is a diagnosis in the DSM-V
- Psychopathy is not, but is still recognized within the psychiatric community
- Psychopathy is an extreme version of APD
 - An individual must experience a lack of remorse or guilt about their actions in addition to demonstrating antisocial behaviors to qualify as a psychopath
 - Approximately 50% of incarcerated individuals have been found to have APD, only 15% of those convicted criminals have been shown to have psychopathy

Cluster C Personality Disorders

- "Anxious, fearful" cluster

Avoidant PD

- Associated Characteristics:
 - Easily hurt and embarrassed
 - Few close friends
 - Sticks to routines to avoid new and possible stressful experiences

Dependent PD

- Associated Characteristics:
 - Wants others to make decisions for them
 - Needs constant advice and reassurance
 - Fears being abandoned
 - This is bad when two people like this are in a romantic relationship

Obsessive Compulsive PD



- Not the same as OCD
- Associated Characteristics:
 - Perfectionist
 - Overly conscientious
 - Indecisive
 - Preoccupied with details
 - Rigid
 - Difficulties expressing affection

Vocab:

Schizophrenia	a psychological disorder characterized by a split between thought and emotion (involves alterations in functioning, such as delusions, hallucinations, and disorganized speech or behavior)
Positive symptoms	excesses in functioning, such as delusions, hallucinations, and disorganized speech or behavior
Negative symptoms	deficits in functioning, such as apathy, lack of emotion, and slowed speech and movement
Delusions	false beliefs based on incorrect inferences about reality
Hallucinations	false sensory perceptions that are experienced without an external source. Frequently auditory
Loosening of associations	Individual shifts between seemingly unrelated topics as he or she speaks, making it difficult to follow
Disorganized behavior	Person might walk along muttering to himself, alternate between anger and laughter
Personality disorder	A deeply ingrained maladaptive pattern of behavior (typically manifests around adolescence)
Cluster A	Personality disorder cluster includes paranoid, schizoid, and schizotypal
Cluster B	Personality disorder cluster includes antisocial, borderline, histrionic, narcissistic
Cluster C	Personality disorder cluster includes avoidant, dependent, and obsessive-compulsive
Paranoid PD	PD associated with being tense, guarded, grudge holding, and suspicious
Schizoid PD	PD associated with being socially isolated, emotionally restricted, and having no desire for relationships
Schizotypal PD	PD associated with having peculiar thoughts, appearance and behaviors and being emotionally withdrawn
Borderline personality disorder	characterized by disturbances in identity, in affect, and in impulse control
Antisocial personality disorder (APD)	a personality disorder marked by a lack of empathy and remorse

PY 101-012 - Spring 2016 (UA)

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 [facebook group](#)
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Website for notes and other study materials
from University of Alabama's Psychology 101
section 012 Spring 2016