Psy 101 Review Session

- Review the chapters
- Example exam questions
- Time open for questions

Wilson 103
7:00 Pm  4/14/2000
Chapter 15  Psychological Disorders

• Psychopathology

• Perspectives on Psychopathology
  Psychodynamic
  Cognitive-Behavioral
  Biological
  Systems
  Evolutionary

• Diagnostic System
  DSM-IV
Psychopathology

- **Psychopathology** refers to problematic patterns of thought, feeling, and behavior
  - Disrupted functioning at home, work, and in the person’s social life
  - Patterns that cause distress in the person or in others
  - Psychopathology literally means sickness of the mind

- Psychopathology varies between and within cultures
Labeling of Mental Illness

- The notion of abnormality carries with it the presumption that we can define what is and is not abnormal
  - Labeling theory argues that diagnoses of abnormality are but labels we use for people who we consider deviant.
The psychodynamic perspective proposes a functioning continuum and recognizes three classes of pathology:

### Continuum of Psychopathology

<table>
<thead>
<tr>
<th>LEVEL OF DISTURBANCE</th>
<th>CAPACITIES</th>
<th>Relation to Reality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal to neurotic</td>
<td>Able to maintain relationships.</td>
<td>Able to see reality clearly.</td>
</tr>
<tr>
<td></td>
<td>May have minor difficulties such as conflicts with significant others or a tendency to be competitive.</td>
<td>May have minor defensive distortions, such as seeing the self and significant others as better than they really are.</td>
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<tr>
<td>Personality disordered</td>
<td>Unable to maintain relationships consistently.</td>
<td>Generally able to see reality with clarity (i.e., with no hallucinations or delusions).</td>
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<tr>
<td></td>
<td>May avoid relationships, jump into them too quickly, or end them abruptly.</td>
<td>Prone to gross misinterpretations in interpersonal affairs. (A subset suffers from chronically idiosyncratic thinking.)</td>
</tr>
<tr>
<td>Psychotic</td>
<td>Tremendous difficulty maintaining relationships. isolated.</td>
<td>Unable to distinguish clearly between what is real and what is not.</td>
</tr>
<tr>
<td></td>
<td>May be socially peculiar.</td>
<td>Has delusions, hallucinations, or other psychotic thought processes.</td>
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- **Love**
  - Able to maintain relationships.
  - May have minor difficulties such as conflicts with significant others or a tendency to be competitive.
- **Work**
  - Able to maintain employment.
  - May have difficulties such as rigidity, defensiveness, underconfidence, workaholism, overambition, or underachievement.
- **Relation to Reality**
  - Able to see reality clearly.
  - May have minor defensive distortions, such as seeing the self and significant others as better than they really are.
  - Generally able to see reality with clarity (i.e., with no hallucinations or delusions).
  - Prone to gross misinterpretations in interpersonal affairs. (A subset suffers from chronically idiosyncratic thinking.)
  - Unable to distinguish clearly between what is real and what is not.
  - Has delusions, hallucinations, or other psychotic thought processes.
• The biological perspective seeks the roots of abnormal behavior within the brain, and holds that the brain disturbance results in mental changes.

The diathesis-stress model

• The systems perspective seeks the roots of abnormality in the broad social context. A change in one member may influence other members in a system.

• The evolutionary perspective are likely to provide insight into psychopathology.
DSM-IV

- The American Psychiatric Association published a diagnostic manual that attempts to classify signs and symptoms into syndromes
  - Signs are observable phenomena (temperature)
  - Symptoms are reports from patients (headache)
- The current edition is termed the DSM-IV
  - The DSM-IV uses a multi-axial system of diagnosis
    - The axes cover symptoms as well as medical conditions, stress, and current level of function

- Descriptive diagnosis
# The Axes of DSM-IV

<table>
<thead>
<tr>
<th>Axis</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Symptoms that cause distress</td>
</tr>
<tr>
<td>II</td>
<td>Personality disorders and mental retardation</td>
</tr>
<tr>
<td>III</td>
<td>Medical conditions that may be relevant to understanding or treating a psychological disorder</td>
</tr>
<tr>
<td>IV</td>
<td>Psychosocial and environmental problems</td>
</tr>
<tr>
<td>V</td>
<td>Global assessment of functioning</td>
</tr>
</tbody>
</table>

(Source: DSM-IV, American Psychiatric Association, 1994)
Childhood Disorders

- Attention-Deficit Hyperactivity Disorder is characterized by inattention, impulsiveness, and hyperactivity
  - Prevalence of ADHD is likely 3-5% of school-aged children, more common in boys
  - ADHD is often treated with Ritalin

- Conduct Disorder refers to the child who persistently violates rules and norms
  - Prevalence is larger in boys than girls
  - Conduct disorder may reflect a problem in conditioning
Substance-Related Disorders

- **Substance-Related Disorders** refer to continued use of a substance (alcohol) that impairs social and physical functioning.

- **Alcoholism** is a common substance-related disorder
  - Some 13 million in the USA are alcoholic
  - Alcoholism is the 3rd largest cause of death
  - Heredity plays a large role in alcoholism
    - Children of alcoholics are prone to developing alcoholism, the effect is larger for males than for females.
Schizophrenia

- Schizophrenia refers to a profound disturbance in human function including:
  - **Thought**: Illogical thought systems (delusions) and loosening of associations
  - **Perception**: Presence of hallucinations
  - **Language**: Word salad, disconnected ideas
  - **Affect**: Emotion (often flat or absent)

- Symptoms can be viewed as:
  - **Positive**: Delusions are an added function
  - **Negative**: Signal the absence of a function (flat affect)
Major Types of Schizophrenia

- Paranoid
- Catatonic
- Disorganized
- Undifferentiated
- Residual
Biological Basis of Schizophrenia

- **Diathesis-stress** model proposes that some persons develop schizophrenia because of an underlying biological vulnerability (diathesis) that is compounded by stress.

- The heritability of schizophrenia is 50-83%:
  - Risk of schizophrenia is 48% in monozygotic, 17% in dizygotic twins, and 9% in siblings.

- **Dopamine hypothesis:** schizophrenia reflects elevated levels of dopamine in brain.
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- **Dopamine hypothesis**: schizophrenia reflects elevated levels of dopamine in brain.
  - Glutamate hypofunction hypothesis
  - Neural atrophy and dysfunction
Mood Disorders

- Mood disorders are characterized by disturbance of emotion and mood state
  - Mania refers to an excessive degree of happiness, and a belief the person can do anything
  - Major Depressive Disorder refers to a long-term episode of intense sadness, loss of appetite, and difficulty in sleeping
    - Duration may be 5 months or more
    - Women are twice as likely to have major depression (incidence is 2-3% for men and 5-9% for women)

- Major types of mood disorders
Theories of Depression

- Depression may reflect a biological vulnerability and an environmental basis

- The heritability of depression is about 30%
  - Twin studies show a clear role of genetics in depression

- Effective antidepressant drugs alter serotonin activity (Prozac blocks the reuptake of serotonin)

- Cognitive theories of depression note that depressed people have negative cognitive schemas about themselves
Aaron Beck’s cognitive theory

Beck’s Negative Triad

Negative view of world
Negative view of self
Negative view of future

Depressed mood
Paralysis of will
Avoidance
Suicidal wishes
Increased dependency

(Figure adapted from Beck, 1976, p 256)
Anxiety Disorders

- Anxiety disorders refer to feelings of distress, uneasiness, or apprehension

- Types of anxiety disorders:
  - **Phobias** refer to an irrational fear of an object or situation
    - **Social phobia**: a fear of being in a public situation
  - **Panic Disorders** are intense attacks of anxiety that are justified by the situation
  - **Agoraphobia** refers to anxiety associated with being in places or situations from which it might be difficult to escape (e.g. an elevator)
Obsessive-Compulsive Disorder

- An **obsession** is a persistent thought that cannot be controlled
  - “Did I lock the door?”
- A **compulsion** is an intentional behavior (ritual) that occurs in response to a thought
  - Check the door (22 times)
- Key aspect is that OC persons experience anxiety if they are unable to complete their ritual
• Dissociative disorder
  Dissociative identity disorder

• Personality disorder
  Narcissistic personality
  Borderline personality
  Antisocial personality

• The related theories
Chapter 16. Treatment of Psychological Disorders

- Psychotherapies
- Biological therapies
- Evaluating therapies
- The broader context of psychological treatment
Varieties of Psychological Treatment

- Psychodynamic
- Cognitive-behavioral
- Humanistic
- Family and marital
- Biological
Psychological Therapies

- Whereas the biological therapies view mental disorders through the medical model, psychological therapies view the roots of abnormal behavior in mental states:
  - Each therapy has its own view as to the cause of mental disorder.
  - Each therapy has its own approach to the treatment of mental disorder.
Psychodynamic Approach

- The psychodynamic approach was created by S. Freud
  - Mental symptoms reflect unconscious conflicts that induce anxiety
  - Insight refers to the situation when a person comes to understand their unconscious conflicts
  - Therapeutic change requires an alliance (relationship) between the patient and therapist
Psychodynamic Techniques

- The goal of psychodynamic therapy is to achieve insight into unconscious conflicts
  - Free Association refers to a technique in which the patient is encouraged to say whatever comes to mind to reveal the unconscious processes of the patient
  - Interpretation: Therapist interprets the thoughts, and feelings of the patient in order to reveal the hidden conflicts and motivations
  - Analysis of transference: Patients bring into therapy their past troubled relationships; these are transferred to the therapist
Cognitive-Behavioral Therapies

- Cognitive-behavioral therapies focus on the current behaviors of a person
  - Emphasis is on the present rather than the past
  - Cognitive-Behavioral therapists are very directive
  - Therapy duration is short-term rather than years long
  - Initial focus is on a detailed behavioral analysis: focus is on the problem behavior and the stimuli associated with it
Behavior Therapies

- Classical conditioning techniques can alter emotional responses
  - **Systematic desensitization**: Patient is encouraged to confront a feared stimulus (snake) while in a relaxed state
    - Therapist trains relaxation
    - Patient constructs an image hierarchy
    - While relaxing, patient imagines the least fearful of the images in their hierarchy (e.g. being on the planet as a snake)
  - **Exposure**: Patient is exposed to the stimulus that they fear (locked in a room full of snakes)
Cognitive Therapies

- Focus of cognitive therapies is on changing dysfunctional thought patterns.
- **Rational Emotive Therapy** focuses on the hurtful thought patterns of the patient:
  - Ellis’s theory suggests that pathology results when persons adopt illogic in response to life situations.
  - Therapist notes illogical and self-defeating thoughts and teaches alternative thinking that promotes rational thought.

- Participatory modeling / Skill training
- Ellis’s Rational-Emotive therapy / ABC theory of psychopathology
Gestalt Therapies

- Gestalt therapists emphasize that losing touch with one's feelings in order to meet social obligations is the root of mental disorder.
  - Focus of gestalt therapy is to have people focus on their current feelings.
  - Empty-chair technique: Therapist places an empty chair next to the client and asks them to imagine that the object of their emotion is actually sitting in the chair. The client then is asked to direct their conversation to the chair.
- Two chair technique
- Client-centered therapy/Unconditional positive regard
Pharmacotherapy

- Psychotropic medications are drugs that act on the brain to alter mental function.
- Prior to 1956, schizophrenia was virtually untreatable with many patients confined for life in mental hospitals.
  - Chlorpromazine (Thorazine) was found to reduce severity of psychotic thought allowing people to live outside of mental institutions.
    - Reduced size of institutions.

- ECT and Psychosurgery
Psychotropic Mechanisms of Action

Psychotropic drugs can alter behavior via:
- An interaction with neurotransmitters in brain
  - Some release specific transmitters
  - Some block the reuptake of transmitters
  - Some interact with postsynaptic receptors
  - Some may act within neuron cells
• Antipsychotic medications (schizophrenia and other acute psychotic states)
  Side effect: tardive dyskinesia

• Antidepressant medications
  Tricyclic antidepressants/Monoamine oxidase inhibitors/Selective serotonin reuptake inhibitor

• For bipolar disorder -- Lithium

• Antianxiety medications
  Benzodiazepines (e.g. Valium) increase GABA activity / can result in drug dependence
Evaluation of Therapies

- Pharmacotherapy
  - Drug therapies for depression, anxiety, and schizophrenia can be effective in a number of patients; focus is on long-term treatment (years)
  - Issues are related to side effects of the drugs and to the high relapse rate when the drugs are stopped
  - Continued use of certain drugs can minimize relapse of mental disorder

- Meta-analyses show that psychotherapy produces measurable benefit to patients (on the order of a 25% benefit or gain)
Social context of psychological treatment

- Economic issues
- Deinstitutionalization
- Managed care
- Primary prevention
Example Questions
Psychoses are most accurately described as ______________.

A. chronic and severe disturbances that substantially inhibit the capacity to love and to work
B. gross disturbances involving a loss of touch with reality
C. problems in living, such as phobias, that substantially inhibit the capacity to love and to work
D. problems in living, such as constant self-doubt, and repetitive interpersonal problems
E. problems in functioning, such as reasoning and thinking problems

Topic: Contemporary Approaches to... Difficulty: Easy
Type: Factual
Aaron Beck developed the major cognitive theory of depression, the negative triad, which proposed that depressed individuals employ a negative view of ______________.

A. their pasts, their presents, and their futures
B. themselves, their families, and their partner—whether married or not
C. themselves, the world, and their futures
D. themselves, those with whom they personally interact, and humanity in general
E. their inner thoughts and outside situations

Topic: Cognitive Theories   Difficulty: Medium   Type: Factual

Answer: C
Answer: B

Psychodynamic theory does NOT assert that ______________.

A. anxiety disorders stem from mental associations of thoughts and feelings
B. actual events underlie phobias or other recurrent anxieties
C. the triggers for depression depend upon an individual's personality structure
D. a seemingly innocuous event may activate a network of associations that includes thoughts or memories associated with anxiety
E. None of the above

Topic: Cognitive-Behavioral Theories   Difficulty: Medium
Type: Factual
Gwynneth had only been involved with Brad for three weeks before deciding that he was "the only man in the world who could love me." She began calling him constantly and suggested they live together. He became concerned about the intensity of her feelings and suggested they see each other only on weekends so they could get to know each other a little more slowly. She became furious and accused him of leading her on and using her.

Gwynneth may be exhibiting signs of _____________.

A. antisocial personality disorder  
B. borderline personality disorder  
C. dissociative identity disorder  
D. schizophrenia  

Answer: B
Symptoms of posttraumatic stress disorder include ______.

A. fear of being in places or situations from which escape might be difficult
B. flashbacks and recurrent thoughts of psychological distressing events
C. recurrent obsessions and compulsions that cause distress
D. intense anxiety in specific social or performance situation
E. all of the above

Topic: Panic Disorder   Difficulty: Easy   Type: Factual
The most current formulation of the dopamine hypothesis suggests that in the brains of individuals suffering from schizophrenia ___________.
A. subcortical circuits projecting from the midbrain to the limbic system and basal ganglia have excess dopamine and seem to be responsible for positive symptoms
B. subcortical circuits projecting from the midbrain to the limbic system and basal ganglia provide too little dopamine and seem to be responsible for negative symptoms
C. subcortical circuits projecting from the midbrain to the prefrontal cortex have excess dopamine and seem to be responsible for positive symptoms
D. subcortical circuits projecting from the midbrain to the prefrontal cortex produce too little dopamine and seem to be responsible for positive symptoms.

Topic: Theories of Schizophrenia   Difficulty: Difficult   Type: Factual

Answer: A
Alec, a 37-year old therapist is treating 17-year old Kim for depression. Kim desperately misses the father she recently lost to cancer. During therapy sessions she often expresses feelings of warmth and affection for Alec, which he interprets as Kim's displacement of her feelings for her father. He has also begun to notice that her behavior elicits protective feelings in him that go beyond the level typical of his relationships with his patients. Alec may be experiencing ______________.

A. sympathetic response  
B. transference  
C. therapeutic alliance  
D. countertransference  

Answer: D

Topic: A Case Illustration  Difficulty: Medium  Type: Factual
One of the earliest and still most widely used cognitive-behavioral techniques is ________________, in which the patient mentally confronts a phobic stimulus gradually while in a state that inhibits anxiety.

A. flooding  
B. token economy procedure  
C. empty chair technique  
D. systematic desensitization  
E. phobia therapy  

Answer: D

Topic: Systematic Desensitization   Difficulty: Easy   Type: Factual
When Lydia was seven years old, she was startled one day by the discovery of a spider that had somehow made its way into her school lunch bag. Since that day, she has been terrified of spiders. Whether it's take-out from the neighborhood Chinese restaurant, or her own pocketbook, every bag is a potential spider's nest to Lydia. She shakes out magazines, shoes, and hats in fear of again being caught off guard by arachnid assault. In order to get help for what she considers a life-disrupting phobia, Lydia has sought the help of a therapist who will attempt to ease her anxiety first by having her observe him handle spiders, and eventually, by having her handle them herself. This method is most accurately termed ____________.

A. therapeutic alliance  
B. countertransference  
C. participatory modeling  
D. flooding  

Answer: C

Topic: Modeling  Difficulty: Medium  Type: Conceptual
Antidepressant medications which can be particularly effective in helping to relieve physiological symptoms of severe depression, increase the amount of ____________ in synapses.

A. dopamine (only)
B. serotonin (only)
C. norepinephrine (only)
D. serotonin and/or norepinephrine
E. none of the above

Answer: D

Topic: Antidepressant & mood...  Difficulty: Medium
Type: Factual