

Psychological disorders

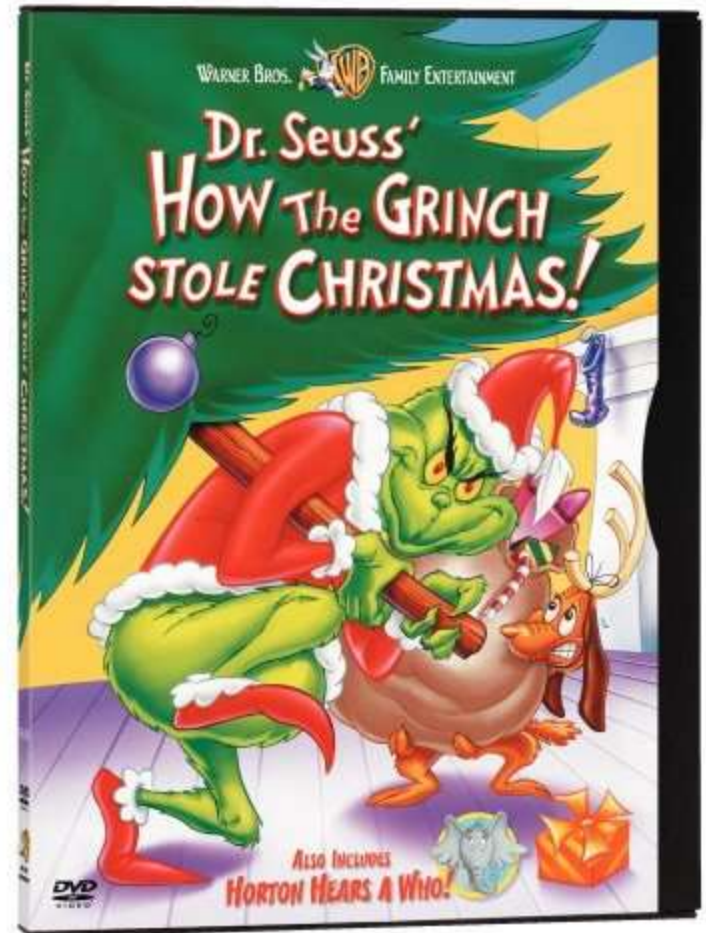
ESSENTIAL QUESTION:

**What are the major psychological disorders?
What criteria do psychologists use to diagnose psychological disorders? How do psychologists and psychiatrists diagnose patients with mental disorders?**

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

How the Grinch Stole Christmas Psychology Class

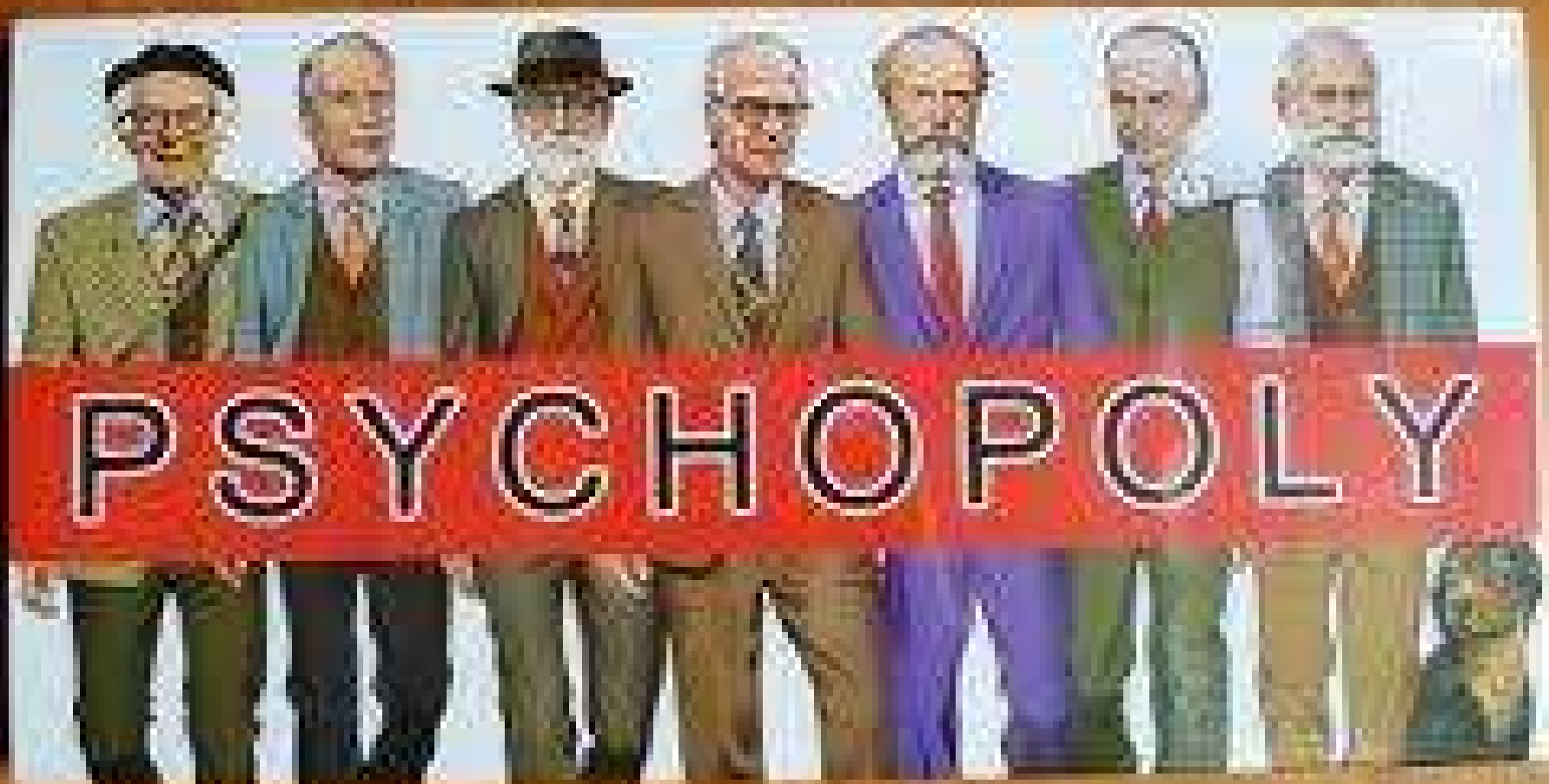


Myers' PSYCHOLOGY

(7th Ed)

Chpt 16

Psychological Disorders



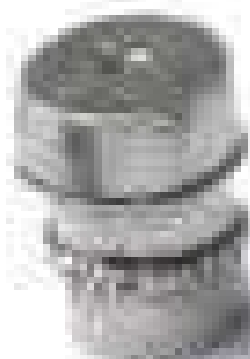
THE



Couch



symbol



Pill bottle



brain



Pyramid

Psychological disorders

ESSENTIAL QUESTION:

What criteria do psychologists use to diagnose psychological disorders?

GPS STANDARD:

SSPVB3- The student will identify abnormal

Psychological Disorders

- Psychological Disorder
 - a “harmful dysfunctional behavior” in which the behavior is “deviant” and distressful

Historical Perspective

- Perceived Causes

- movements of sun or moon

- lunacy--full moon (lunatic)

"...spooky effects have been ascribed to the phases of the moon....But when the statistics are redone properly, the correlation with lunar phase always evaporates....Yet many sensible people—including police officers and emergency room staff—continue to believe otherwise." --[Steven Strogatz](#)

Historical Perspective Perceived Causes: Lunar effects on behavior

- Kelly, Rotton, and Culver (1996) examined over 100 studies on lunar effects and concluded that the studies have failed to show a reliable and significant correlation (i.e., one not likely due to chance) between the full moon, or any other phase of the moon, and each of the following:

- - the homicide rate
 - traffic accidents
 - crisis calls to police or fire stations
 - domestic violence
 - births of babies
 - suicide
 - major disasters
 - casino payout rates
 - assassinations
 - kidnappings
 - aggression by professional hockey players
 - violence in prisons
 - psychiatric admissions [one study found admissions were *lowest* during a full moon]
 - agitated behavior by nursing home residents
 - assaults
 - gunshot wounds
 - stabblings
 - emergency room admissions
 - behavioral outbursts of psychologically challenged rural adults
 - lycanthropy
 - vampirism
 - alcoholism
 - sleep walking
 - epilepsy

Historical Perspective

- Perceived Causes

- If so many studies have failed to prove a significant correlation between the full moon and anything, why do so many people believe in these lunar myths?
- Kelly, Rotton, and Culver suspect four factors: media effects, folklore and tradition, misconceptions, and cognitive biases.
- A fifth factor should be considered, as well: communal reinforcement.

Historical Perspective

- Perceived Causes
 - supernatural forces
 - evil spirits

Historical Perspective

■ Ancient Treatments

- exorcism
- caged like animals
- torture rack
- beaten
- burned
- mutilated
- trephination
- blood replaced with animal's blood

Psychological Disorders

- The Scientific Revolution
 - Attitudes about people with abnormal behavior began to change
 - there was a shift from religious explanations for disease to scientific explanations
 - abnormal behavior patterns were now considered to be mental illnesses
 - mental illnesses had biological causes

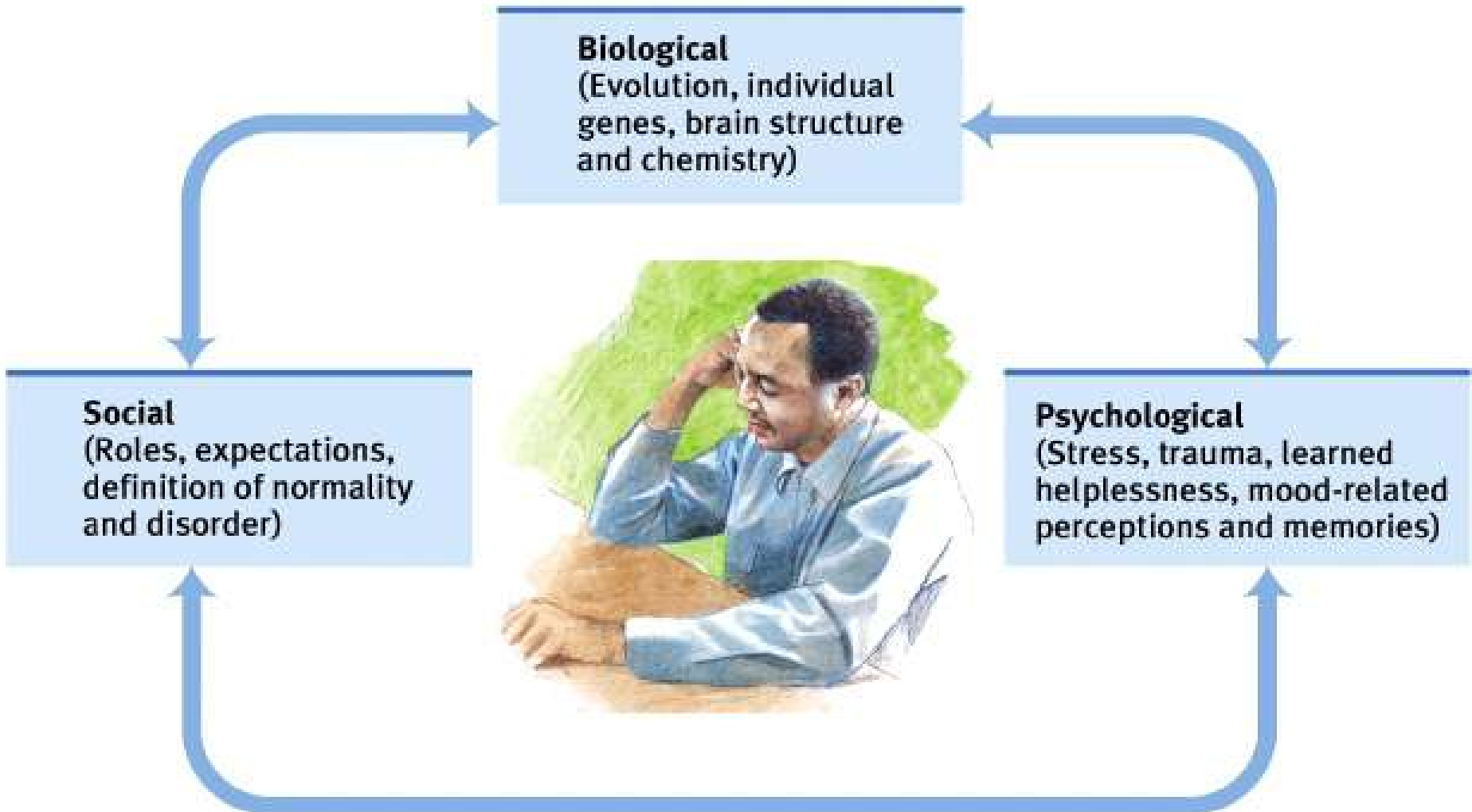
Psychological Disorders

- **Medical Model**
 - concept that diseases have physical causes
 - can be diagnosed, treated, and in most cases, cured
 - assumes that these “mental” illnesses can be diagnosed on the basis of their symptoms and cured through therapy, which may include treatment in a psychiatric hospital

Psychological Disorders

- Bio-Psycho-Social Perspective
 - assumes that biological, sociocultural, and psychological factors combine and interact to produce psychological disorders

Psychological Disorders



ESSENTIAL QUESTION:

What criteria do psychologists use to diagnose psychological disorders?

GPS STANDARD:

SSPVB3- The student will identify abnormal

Psychological Disorders

- Psychopathology
 - Mental illness involves patterns of thought, emotions, and behavior that result in:
 - personal distress
 - Significant impairment in social or occupational functioning
 - the presence of a mental illness in an individual is determined by how a particular society defines “normal” vs. “abnormal”

Psychological Disorders

- What is abnormal?

Infrequency

- if we define being normal as being what most people do, then statistically infrequent behavior is behavior that is atypical, or rare, might be considered abnormal

Personal suffering

- experiencing distress or personal suffering is the criterion that people often use in deciding that their psychological problems are severe enough to require treatment

Psychological Disorders

- What is abnormal?

- Norm violation

- When people behave in ways that are bizarre, unusual, or disturbing enough to violate social norms, those people are described as abnormal

- [Norms are a model or patterns of behavior considered typical for a particular group, culture, society, etc.]

DSM-IV

ESSENTIAL QUESTION:

What methods are used to diagnose and assess abnormal behavior? What is the Diagnostic and Statistical Manual of Mental Disorders?

GPS STANDARD:

SSPVB3- a.) Describe methods used to diagnose and assess abnormal behavior

Psychological Disorders-- Etiology

- DSM-IV

- American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (Fourth Edition)
- a widely used system for classifying psychological disorders
- it lists all of the currently accepted categories of mental disorders and their descriptions

Psychological Disorders-- Etiology

- DSM-IV-TR
 - presently distributed as DSM-IV-TR (text revision)
 - (DSM-V comes out in 2011)
 - U.S. health-care providers and insurance companies require DSM-IV-TR classification for all treatments they prepay or reimburse

Psychological Disorders-- Etiology

- DSM-IV-TR continued....
 - diagnostic classification not only is used to classify a disorder but also:
 - to predict its future course
 - to apply appropriate treatment
 - to stimulate scientific research into its causes
 - In order to study a disorder, it must first be named and described

Psychological Disorders-- Etiology

- DSM-IV-TR continued....
 - the very idea of “diagnosing” people’s problems in terms of their symptoms presumes that they have a “mental illness”
 - Mostly the classifications in the DSM-IV-TR are a helpful and practical tool

Psychological Disorders-- Etiology

- DSM-IV-TR continued....
 - DSM-IV-TR:
 - Define the process by which patients can be diagnosed
 - In Axis I it lists 16 clinical syndromes

Psychological Disorders-- Etiology

- Axis I Clinical syndromes
 - disorders diagnosed in infancy, childhood, adolescence (ADD, ADHD, bedwetting, Autism, Learning Disorder)
 - delirium, dementia, amnesia, other cognitive disorders (can be caused by disease, aging, drug use)
 - mental disorders due to a medical condition (symptoms in any category caused by a medical condition such as a brain injury, brain tumor, epilepsy, Huntington's disease)
 - substance-related disorders (drug abuse)

Psychological Disorders-- Etiology

- Axis I Clinical syndromes
 - schizophrenia
 - Mood disorders (depression, bipolar disorder, mania)
 - Anxiety disorders (OCD, GAD, Panic disorder, phobias)
 - Somatoform disorders (hysterical blindness, deafness, paralysis, hypochondriasis)
 - factitious disorders (intentionally simulates the signs and symptoms of a disorder)

Psychological Disorders-- Etiology

- Axis I Clinical syndromes
 - dissociative disorders (psychologically caused loss of memory/amnesia or the development of more than one identity)
 - Eating disorders (anorexia nervosa, bulimia nervosa)
 - sexual and gender identity disorders
 - sleep disorders (sleep apnea, night terrors, narcolepsy)

Psychological Disorders-- Etiology

- Axis I Clinical syndromes
 - impulse control disorders (gambling, kleptomania- stealing, pyromania-firesetting)
 - adjustment disorders- failure to adjust to or deal well with divorce, financial problems, family discord, death or other unhappy life events
- Other conditions that may be a focus of clinical attention:
 - Example # 1- neuroleptic induced Parkinsonism such as a frozen face or shuffling walk
 - Example #2- neuroleptic induced sweating, trouble swallowing, incontinence, delirium

Psychological Disorders- Etiology

- Neurotic Disorder
 - (term seldom used now)
 - usually distressing but that allows one to think rationally and function socially

Rates of Psychological Disorders

TABLE 16.3

PERCENTAGE OF AMERICANS WHO HAVE EVER EXPERIENCED PSYCHOLOGICAL DISORDERS

Disorder	Ethnicity			Gender		Total
	White	Black	Hispanic	Men	Women	
Alcohol abuse or dependence	13.6%	13.8%	16.7%	23.8%	4.6%	13.8%
Generalized anxiety	3.4	6.1	3.7	2.4	5.0	3.8
Phobias	9.7	23.4	12.2	10.4	17.7	14.3
Obsessive-compulsive disorder	2.6	2.3	1.8	2.0	3.0	2.6
Mood disorder	8.0	6.3	7.8	5.2	10.2	7.8
Schizophrenia	1.4	2.1	0.8	1.2	1.7	1.5
Antisocial personality	2.6	2.3	3.4	4.5	0.8	2.6

Source: Data from Robins & Regier, 1991. Similar gender differences, though with somewhat higher rates of disorder, come from the U.S. National Comorbidity Survey (Kessler & others, 1994).

Psychological disorders

ESSENTIAL QUESTION:

What is schizophrenia? What is bipolar disorder?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Chpt 16 Psychological Disorders

“ASYLUM”

video notes

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

“ASYLUM” video notes

Kathryn Hernandez- talks about Lionel Richie

- **Crime-** arson
- **Disorder-** bipolar disorder
- **Symptoms-**
 - Disorganized speech
 - Disorganized behavior

“ASYLUM” video notes

Calvin Coleman- “King Solomon”

- **Crime**- attempted murder
- **Disorder**- schizophrenia
- **Symptoms**-
 - Disorganized speech
 - Delusions of Grandeur- “Maybe I am King Solomon”; the FBI told me to keep it secret

“ASYLUM” video notes

James Hoffer- “the drummer”

- **Crime**- murder (killed a police officer)
- **Disorder**- paranoid schizophrenia
- **Symptoms**-
 - visual hallucinations- spiritual devils
 - auditory hallucinations- talks to himself or the voices he is hearing
 - paranoid- afraid people are out to get him

“ASYLUM” video notes

Walter Spuller- “friends” with Buttons the dog

- **Crime**- murder (shot a person with a rifle and knicked their heart twice)
- **Disorder**- paranoid schizophrenia
- **Symptoms**-
 - persecution- feels he is being interfered with; someone is poisoning his water bottle
 - paranoid- afraid people are out to get him
 - reference- feels he is being talked about; that his thoughts were being broadcast on the radio or tv

“ASYLUM” video notes

Chris Clarke- tennis player

- **Crime**- murder (killed his girlfriend)
- **Disorder**- paranoid schizophrenia
- **Symptoms**-
 - persecution- felt his girlfriend was trying to hurt him he is being interfered with
 - paranoid- afraid people are out to get him

“ASYLUM” video notes

Rebecca Wilson- waitress at hospital

- **Crime**- infanticide (killed her daughter on Halloween night)
- **Disorder**- bipolar disorder, a.k.a.- manic depressive disorder
- **Symptoms**-
 - Delusions- falsely believed that she and her daughter were possessed and that they were going to hell
 - Persecution- the Devil was trying to kill us both

“ASYLUM” video notes

Jesse Skinner- dating Rebecca Wilson

- **Crime-** murder (killed his wife)
- **Disorder-** paranoid schizophrenia
- **Symptoms-**
 - Flat affect- lack of emotion
 - Note- the hospital staff thinks he has a lot of anger right below the surface

Schizophrenia

ESSENTIAL QUESTION:

What is schizophrenia? What are the major symptoms of schizophrenia? What are the four major types of schizophrenia?

GPS STANDARD:

SSPVB3- c.) Compare anxiety disorders, mood disorders, personality disorders, and schizophrenia and describe appropriate

Major Depressive Disorder

ESSENTIAL QUESTION:

What is depression? What are the main symptoms of depression?

GPS STANDARD:

SSPVB3- c.) Compare anxiety disorders, mood disorders, personality disorders, and schizophrenia and describe appropriate treatments for these disorders.

Psychological Disorders- Etiology

- Cyclothymic Disorder
- Dysthymic disorder
- Learned helplessness

Psychotic Spectrum

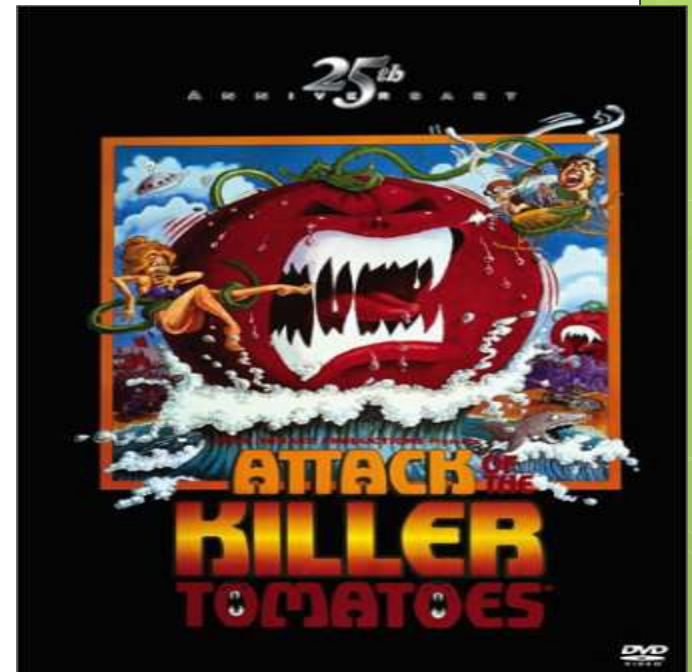
ESSENTIAL QUESTION:

**What is the psychotic spectrum?
What are the symptoms of
schizophrenia, bipolar, and
depression?**

GPS STANDARD:

**SSPVB3- c.) Compare anxiety disorders,
mood disorders, personality disorders, and
schizophrenia and describe appropriate
treatments for these disorders.**

Killer Tomato vs. Landshark



Medical Brochure

- Schizophrenia
- Bipolar
- Depression

Psychological Disorders- Etiology

- Psychotic Disorder
 - person loses contact with reality
 - experiences irrational ideas and distorted perceptions

Distinguishing Schizophrenia from other disorders

- The five ways in which a patient can be identified as psychotic:
 - delusions
 - hallucinations
 - disorganized behavior
 - disorganized speech
 - negative symptoms

Schizophrenia

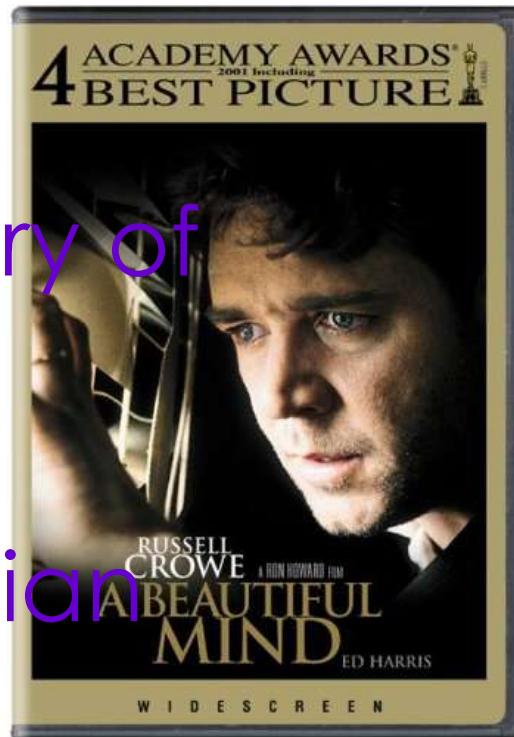
- Schizophrenia
 - literal translation “split mind”
 - a group of severe disorders characterized by:
 - disorganized and delusional thinking
 - disturbed perceptions
 - inappropriate emotions and actions

Schizophrenia

A Beautiful Mind

“The true story of
Nobel prize
winning
mathematician

John Nash”



Psychopharmacology:

antipsychotic medications

- Thorazine

- is used for the reduction of symptoms of psychotic disorders such as schizophrenia
- is also used for the short-term treatment of severe behavioral disorders in children, including explosive hyperactivity and combativeness

Psychopharmacology:

antipsychotic medications

- Insulin-Coma therapy
 - high doses of insulin lowers blood sugar and induces a seizure
 - the seizure produces a deep coma
 - when the patient emerges from the coma they displayed fewer symptoms of psychosis

Schizophrenia: positive symptoms

- Hallucinations

- sensory experiences without sensory stimulation; may be auditory or visual
- nearly always abnormal and can affect any of the five senses
- auditory and visual hallucinations are the most common

Schizophrenia: positive symptoms

- Delusion

- is a false belief(s) that cannot be explained by the patient's culture or education that may accompany psychotic disorders
- the patient cannot be persuaded that the belief is incorrect despite evidence to the contrary

Types of Schizophrenia

ESSENTIAL QUESTION:

What is schizophrenia? What are the four major types of schizophrenia?

GPS STANDARD:

SSPVB3- c.) Compare anxiety disorders, mood disorders, personality disorders, and schizophrenia and describe appropriate treatments for these disorders.

Schizophrenia: subtypes

- paranoid schizophrenia
 - 40 % of schizophrenics
 - false beliefs; often of persecution or grandeur; anger; anxiety; argumentativeness; extreme jealousy

Schizophrenia: subtypes

- disorganized schizophrenia
 - 5 % of schizophrenics
 - delusions; hallucinations; incoherent speech; facial grimaces; inappropriate laughter/giggling; neglected personal hygiene; loss of bladder or bowel control

Schizophrenia: subtypes

- catatonic schizophrenia
 - 8 % of schizophrenics
 - disordered movement; alternating between immobility (stupor) and excitement; the person does not speak or attend to communication; the body is rigid or can be posed in virtually any posture which is called “waxy flexibility”

Schizophrenia: subtypes

- undifferentiated schizophrenia
 - 40 % of schizophrenics
 - patterns of disordered behavior, thought, and emotion that do not fall easily into any other type
- undifferentiated are behaviors that are left after the patient does not qualify for the other subtypes
- Example- no motor symptoms that could qualify the patient for **catatonic**; a flat affect does not belong with **paranoid type**; no disorganization of speech or behavior patterns which would rule out **disorganized**

Schizophrenia

TABLE 16.2

SUBTYPES OF SCHIZOPHRENIA

<i>Paranoid:</i>	Preoccupation with delusions or hallucinations, often with themes of persecution or grandiosity
<i>Disorganized:</i>	Disorganized speech or behavior, or flat or inappropriate emotion
<i>Catatonic:</i>	Immobility (or excessive, purposeless movement), extreme negativism, and/or parrotlike repeating of another's speech or movements
<i>Undifferentiated:</i>	Many and varied symptoms
<i>Residual:</i>	Withdrawal, after hallucinations and delusions have disappeared

Schizophrenia

- Schizophrenics have excessive amounts of dopamine
 - dopamine- a neurotransmitter used in the parts of the brain that regulate movement; also involved in the experience of pleasure which causes schizophrenics to feel manic or high; malfunctioning dopamine systems are related to the appearance of the movement disorders associated with schizophrenia

Schizophrenia



Schizophrenia

- Positive symptoms

- distortions or exaggerations of cognitive, perceptual, or behavioral functioning- disorganized thoughts, hallucinations, and delusions are added to the person

Schizophrenia:

Types of Delusions- false beliefs

- **Grandeur**- patients believe they are persons of exalted station, such as a god, famous historical figure, or movie star, etc.
- **Guilt**- patients feel they have committed an unpardonable sin
- **Ill Health**- patients believe they have a terrible disease
- **Jealousy**- patients are convinced that their spouses or partners have been unfaithful
- **Passivity**- patients believe they are being controlled or manipulated by some outside influence, such as radio waves

Schizophrenia: positive symptoms

- Disorganized Behavior
 - physical actions that do not appear to be goal-directed:
 - taking off one's clothes in public
 - repeatedly making the sign of the cross
 - assuming and maintaining postures
 - the physical action will most likely be bizarre

Schizophrenia: positive symptoms

- Disorganized Speech
 - loose associations; “word salad”
 - mental associations that are not governed by logic but by rhymes, puns, or other rules not apparent to the observer

Schizophrenia: positive symptoms

■ Disorganized Speech example

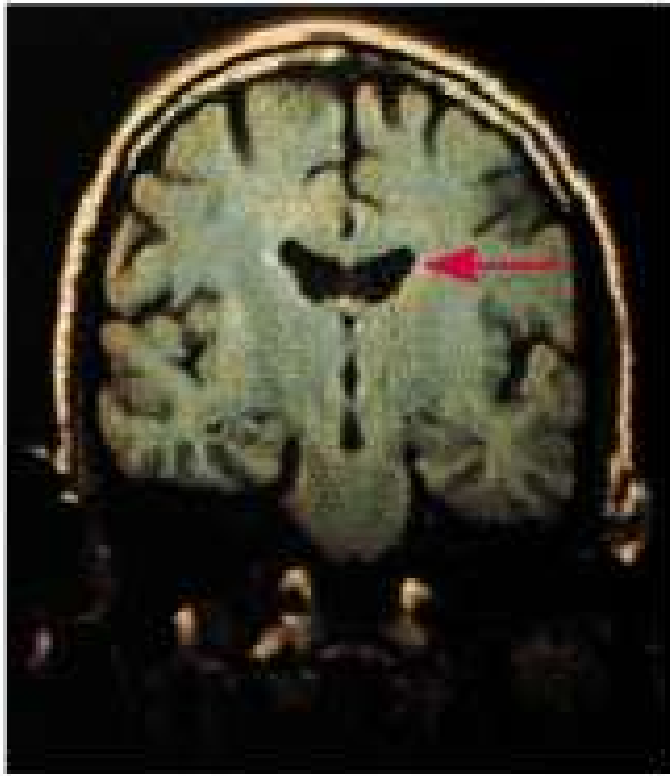
“Pertaining to our continuing failure to prosecute violations of minor's rights to sovereign equality which are occurring in gestations being compromised by ingestion of controlled substances...the skewing of androgyny which continues in female juveniles even after the separation from their mother's has occurred. Even anteaters like to French-kiss.”

Schizophrenia

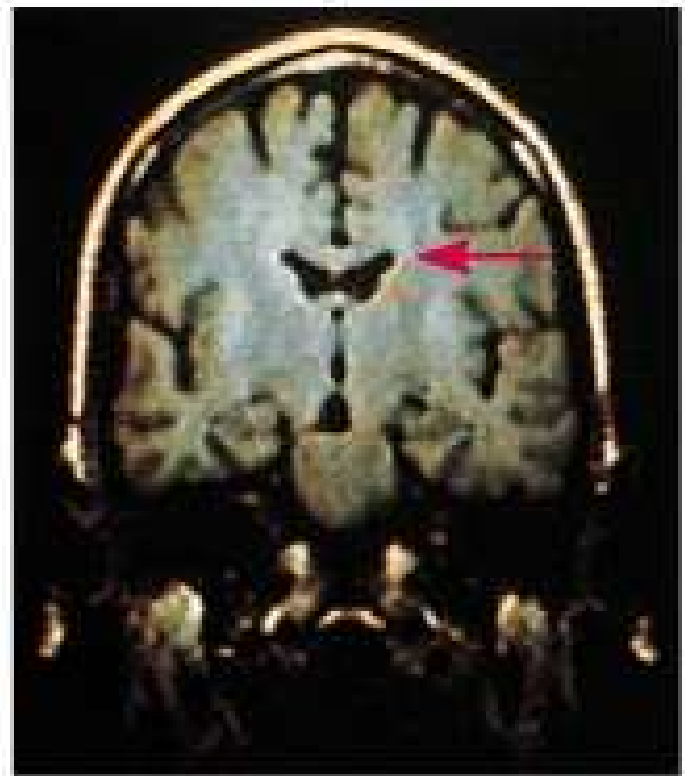
- **Negative symptoms**- subtracted elements from normal mental life; called negative because they give the impression that something has been taken away from the patient
 - lack of speech [alogia]
 - reduced amount of fluency of speech
 - lack of emotion or reduced emotional expression [flat affect]
 - loss of motivation or the will to do things [avolition]
 - loss of feelings of pleasure [anhedonia]

Schizophrenia:

MRI scan



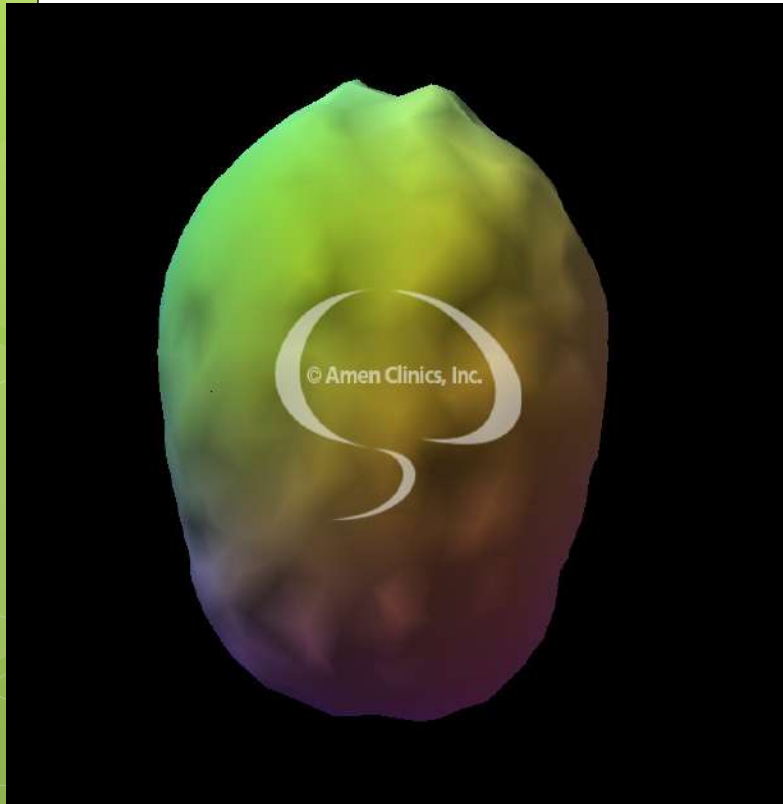
Schizophrenia



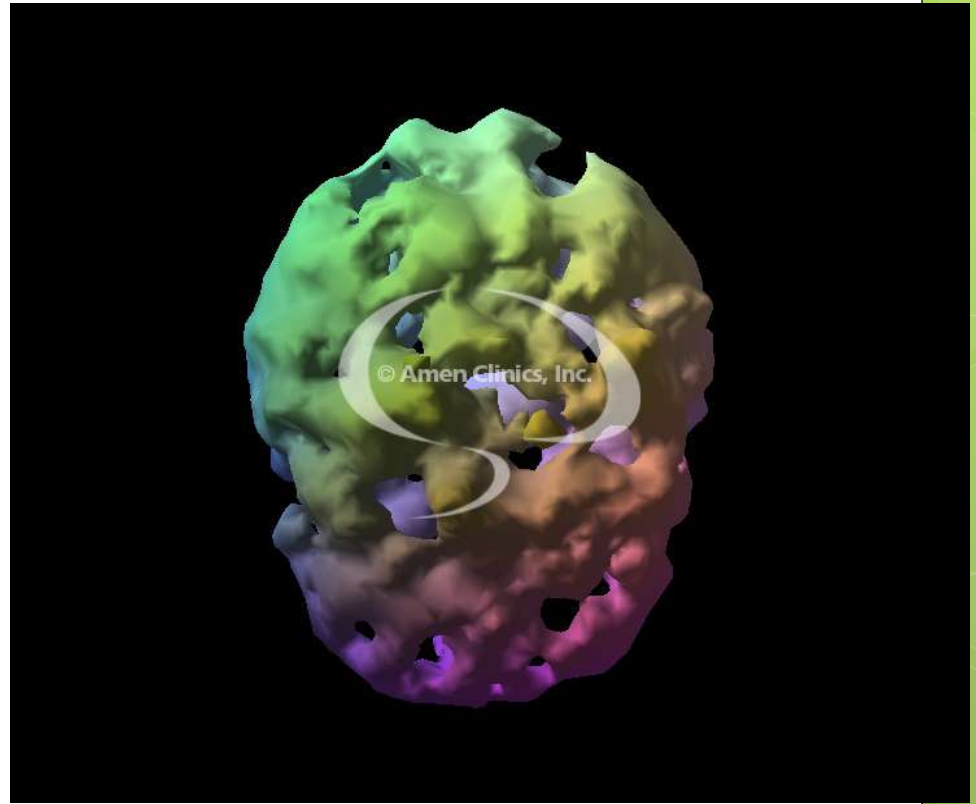
No schizophrenia

Schizophrenia: SPECT scan

Normal Brain



Schizophrenic Brain

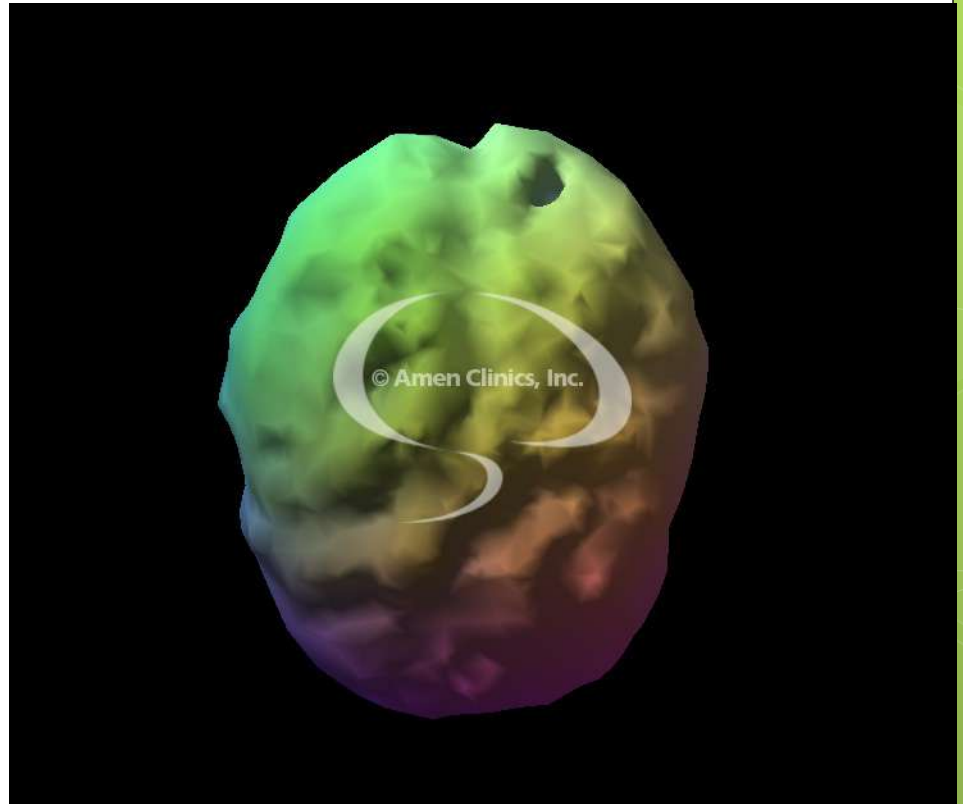


Schizophrenia: SPECT scan

Normal Brain



Schizophrenic Brain
after treatment with



Major Depressive Disorder

ESSENTIAL QUESTION:

What is depression? What are the main symptoms of depression?

GPS STANDARD:

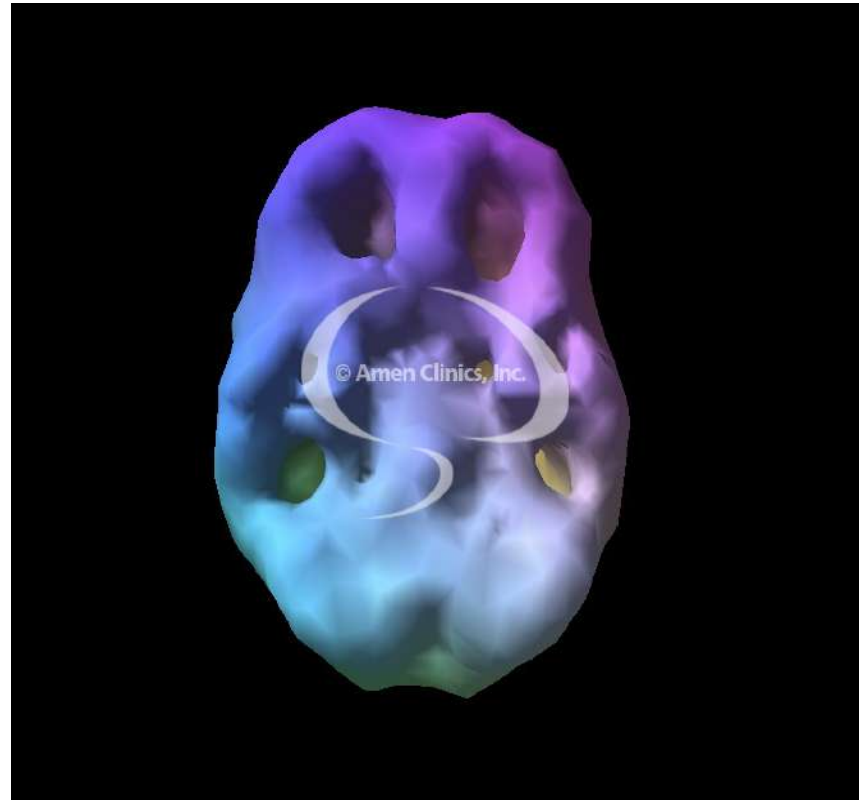
SSPVB3- c.) Compare anxiety disorders, mood disorders, personality disorders, and schizophrenia and describe appropriate treatments for these disorders.

Depression: SPECT scan

Normal Brain



Depressed Brain:
underside surface



Blue & purple equals low activity

Mood Disorders

- Mood Disorders
 - characterized by emotional extremes

Major Depressive Disorder

- a mood disorder in which a person, for no apparent reason, experiences two or more weeks of:
 - depressed moods
 - cannot enjoy life
 - feelings of worthlessness
 - trouble concentrating
 - problems with eating (weight loss or weight gain)
 - problems with sleeping (insomnia or sleeps a lot)
 - diminished interest or pleasure in most activities
 - guilt feelings
 - loss of energy (fatigue)
 - loss of motivation
 - thoughts about death

Major Depressive Disorder

Problems that interfere with the recognition of depression:

- not all patients recognize or accurately describe how they feel
- therapists and patients who come from different cultural backgrounds may have difficulty agreeing that the problem is depression
- the symptoms vary from patient to patient: one patient may be slowed down & crying; another will smile & deny that anything is wrong; some sleep & eat too much; others complain of insomnia

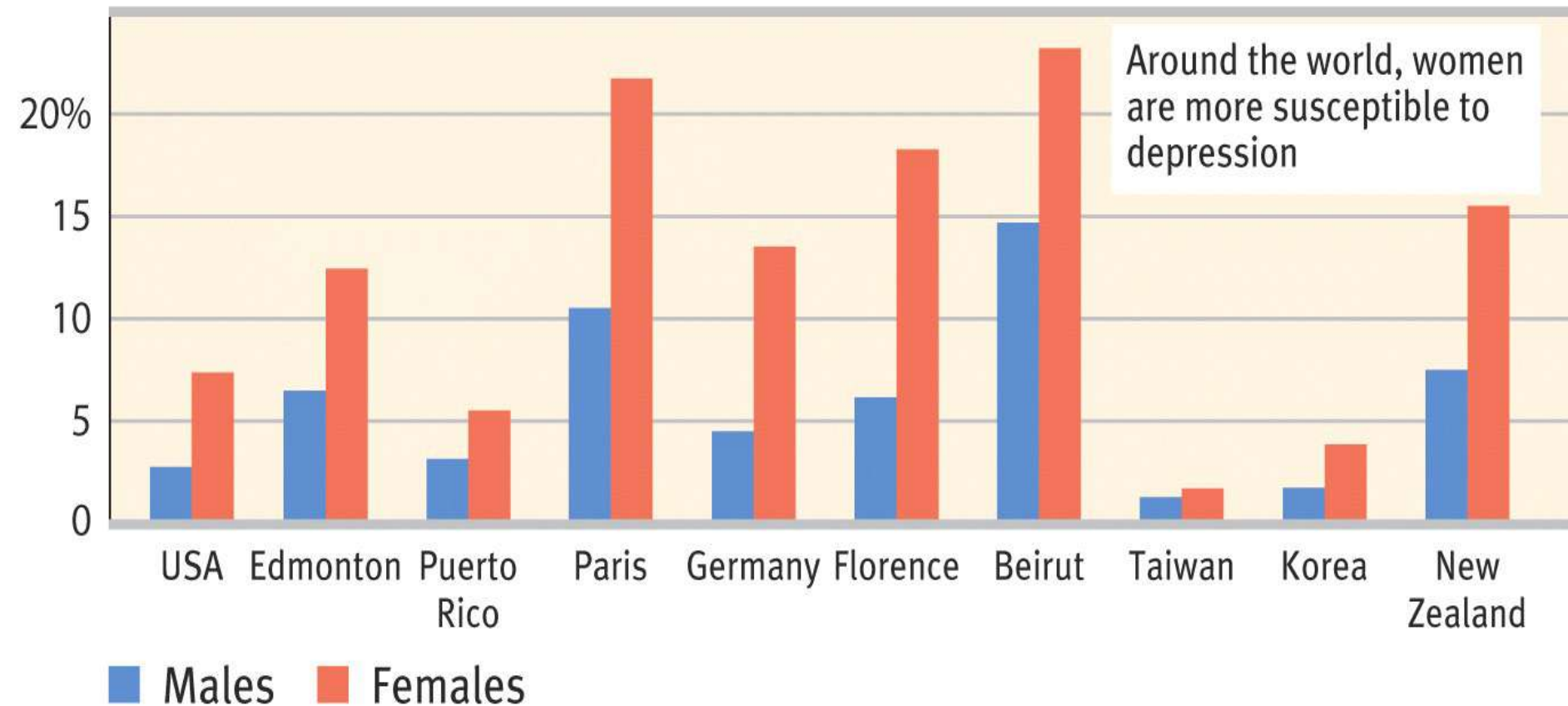
Major Depressive Disorder

Problems that interfere with the recognition of depression: (continued....)

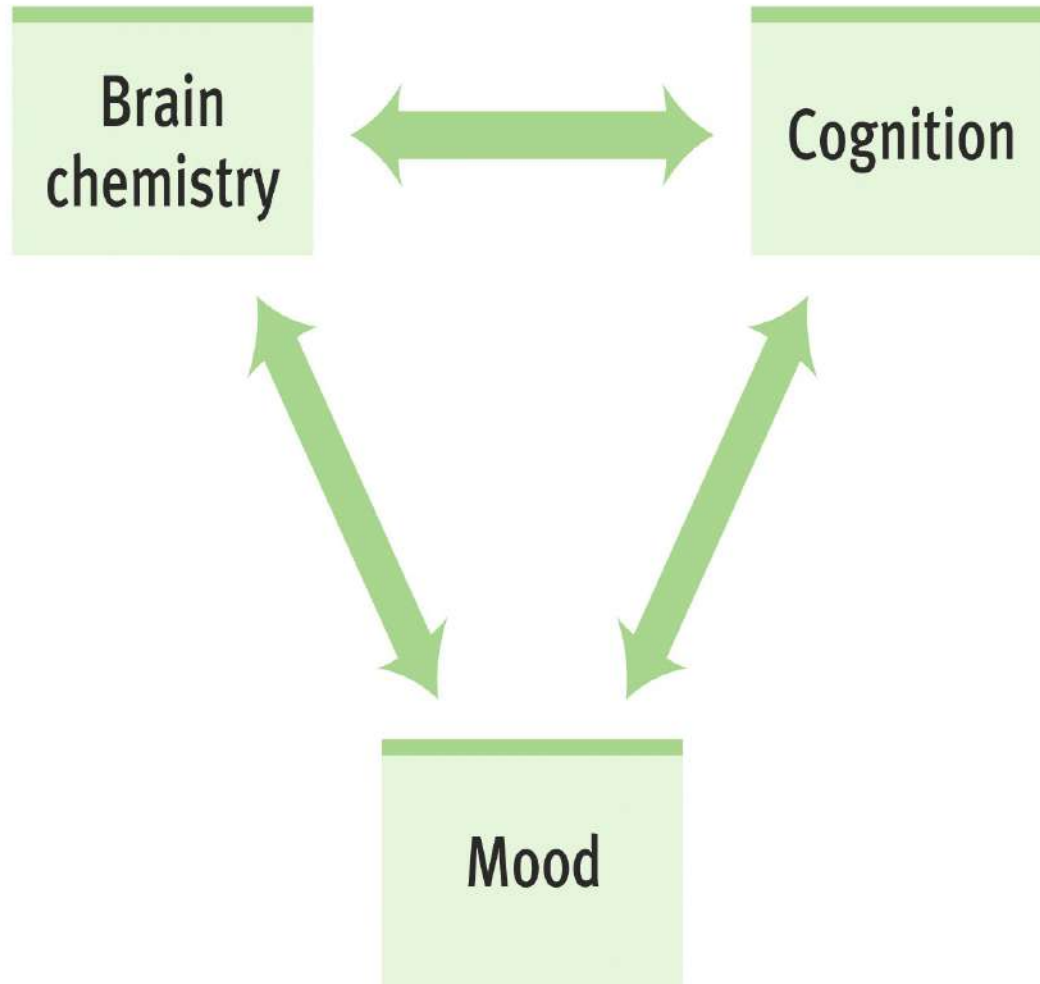
- some patients don't feel "depressed" but experience depression only as a loss of pleasure or reduced interest in their usual activities
- patients must recognize that their level of functioning has changed; if they do not (some are too ill to pay attention or are too apathetic to care), family or friends may report that there has been a change

Mood Disorders- Depression

Percentage of 18–84-year-olds experiencing major depression at some point in life

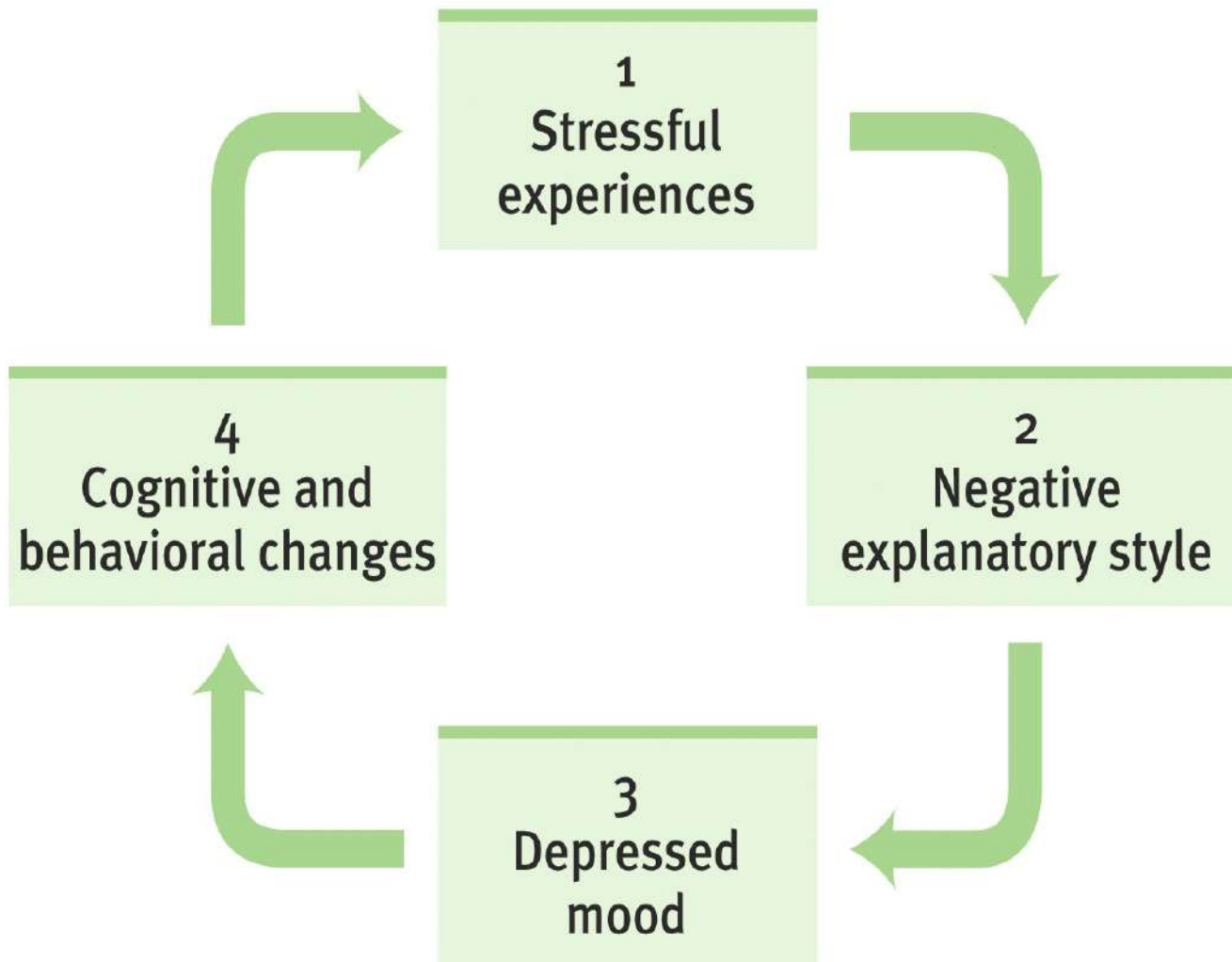


Mood Disorders- Depression



- Altering any one component of the chemistry-cognition-mood circuit can alter the others

Mood Disorders- Depression



- The vicious cycle of depression can be broken at any point

Suicide & Depression

- suicide is associated with a variety of psychological disorders, but it is most closely tied to some form of depression
- some form of depression has been implicated in 40% to 60% of suicides
- suicidal thoughts are a symptom of depressive disorders
- hopelessness about the future and a desire to seek instant escape from problems are also related to suicide attempts

The Suicide Myth

- one myth about suicide is that people who talk about it will never try it
 - on the contrary, those who say they are thinking of suicide are ***much more likely*** to attempt suicide than people from the general population
- 80% of suicides are preceded by some kind of warning:
 - “I think I’m going to kill myself.”
 - “Sometimes I wonder if life is worth living.”

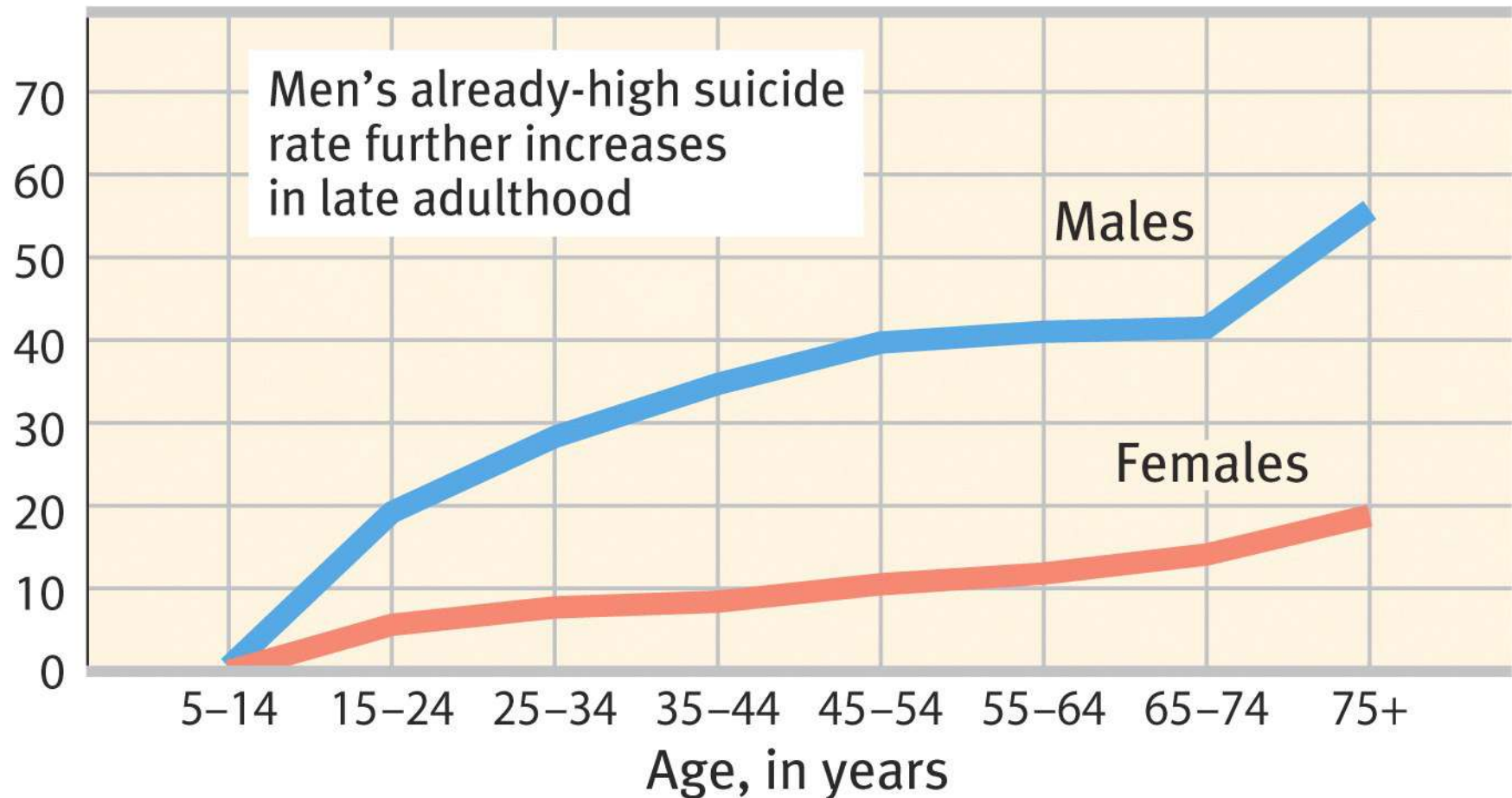
Suicide prevention

- if you suspect someone that someone you know is thinking about suicide:
 - encourage the person to contact a mental health professional
 - if the danger is imminent, make the contact yourself and ask for advice about how to respond

Mood Disorders-

male suicide rates are higher than female rates

Suicides per 100,000 people (1998)



Manic Episode

(dopamine levels are high)

- a mood disorder marked by a hyperactive, wildly optimistic state
- euphoria- great elation and sense of wellbeing
- heightened or exaggerated self-esteem
- increased motor activity
- increased goal-directed activity
- reduced need for sleep
- increased talkativeness
- racing thoughts
- easily distracted
- poor judgment (as shown by spending sprees & foolish investments, etc.)
- can have psychotic features due to high dopamine levels

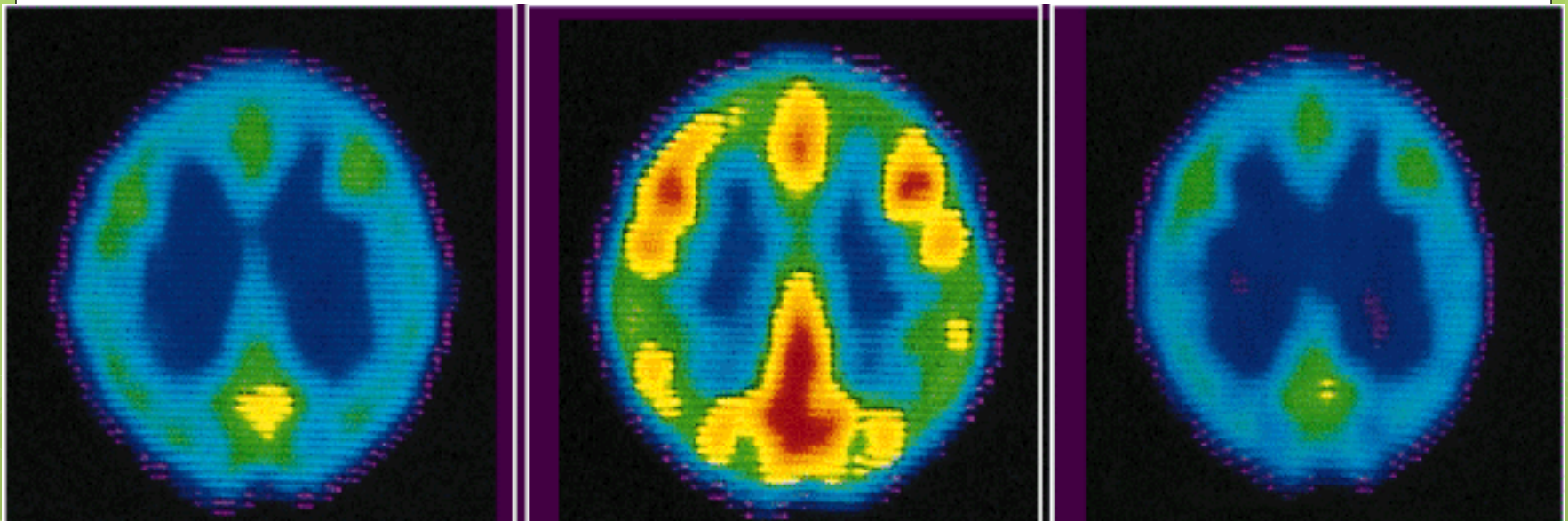
Bipolar Disorder

(formerly called manic-depressive disorder)

- a mood disorder in which the person alternates between:
 - the hopelessness and lethargy of depression
 - and the overexcited state of mania

Mood Disorders-Bipolar

- PET scans show that brain energy consumption rises and falls with emotional switches



Depressed state

Manic state

Depressed state

Psychological disorders

ESSENTIAL QUESTION:

What is an anxiety disorder? What is Generalized Anxiety Disorder? What is obsessive-compulsive disorder?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Anxiety Disorders

- Anxiety Disorders
 - distressing, persistent anxiety or maladaptive behaviors that reduce anxiety

Generalized Anxiety Disorder (GAD)

- person is tense, apprehensive, and in a state of autonomic nervous system arousal
- feeling of being restless, edgy, keyed up
- easily fatigued
- trouble concentrating
- irritability
- increased muscle tension
- trouble sleeping (initial insomnia, restlessness, unrefreshing sleep)

Obsessive-Compulsive Disorder (OCD)

- **obsessions**- unwanted repetitive thoughts that dominate a person's thought content
- the thoughts persist despite the fact that the person believes they are unrealistic and they try to resist them

Obsessive-Compulsive Disorder continued...

- **compulsions**- unwanted actions (either physical or mental) performed repeatedly in a way that the person realize is neither appropriate nor useful
- simply saying a word, or ritualistic phrase or action, in response to an obsession helps to relieve the negative feelings associated with the obsession
- compulsions can also be complicated:
 - elaborate dress
 - excessive ritualistic handwashing due to fear of contamination by dirt, germs, etc.
 - bedtime rituals
 - rituals for leaving the house

Obsessive-Compulsive Disorder continued...

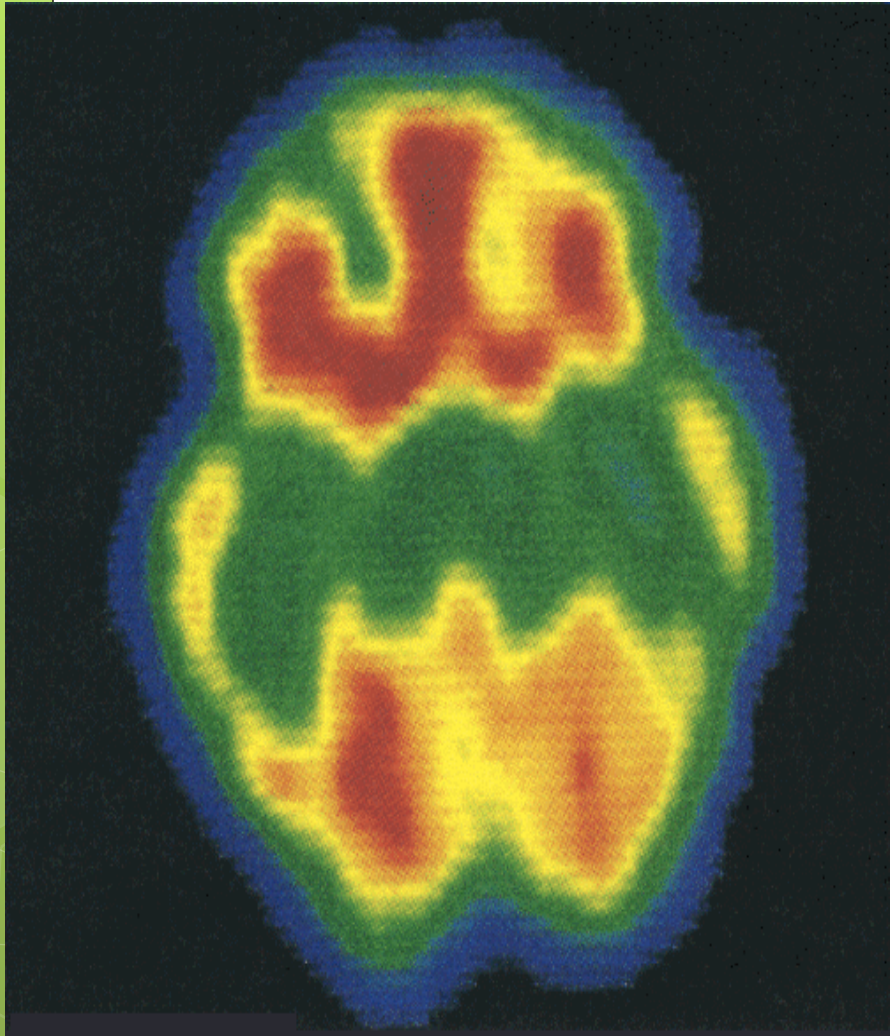
Four major symptom patterns of OCD

- the most common fear is the fear of contamination that leads to excessive handwashing
- doubts (“Did I turn off the burner on the stove?”) leads to excessive checking- the patient returns repeatedly to the stove to be sure that it is really off
- obsessions without compulsions
- obsessions and compulsions slow some patients down to the point that it takes them hours to eat breakfast or get ready for school

Obsessive-Compulsive Disorder continued...

- men and women are equally likely to develop OCD
- its prevalence is as high as 2% in the general population
- it is reported to occur more frequently in the upper classes and in those with high intelligence
- OCD may be at least in part inherited
- OCD might also be brought on by childhood infections such as:
 - **Strep throat.** Some studies suggest that some children develop OCD after infection with group A beta-hemolytic streptococcal pharyngitis — strep throat. However, these studies are controversial and more evidence is needed before strep throat can be blamed.
 - **MMR (measles, mumps, rubella) vaccines.** Also, these studies are controversial and more evidence is needed before MMR vaccines can be blamed.

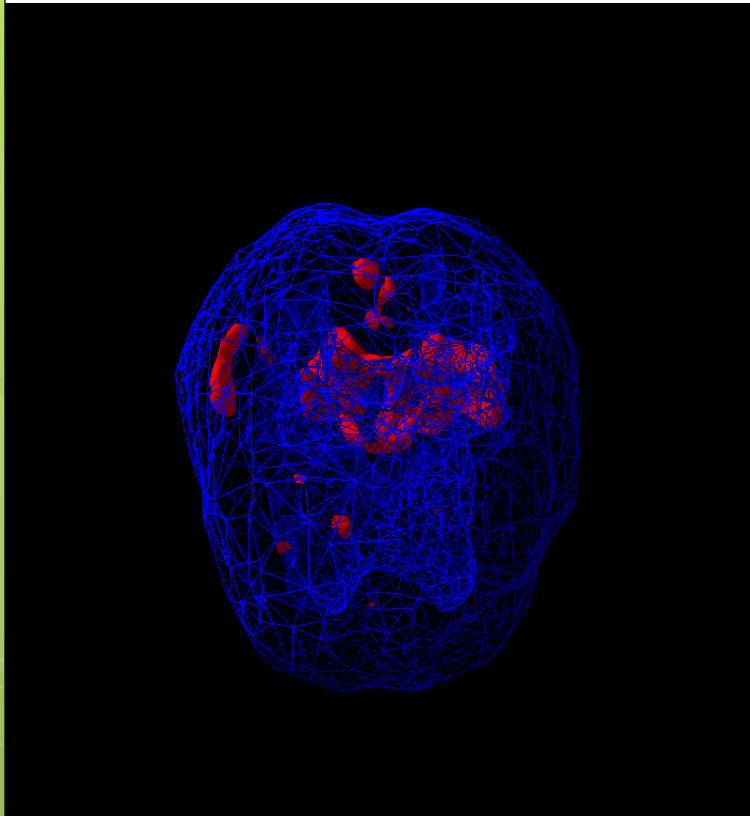
Anxiety Disorders



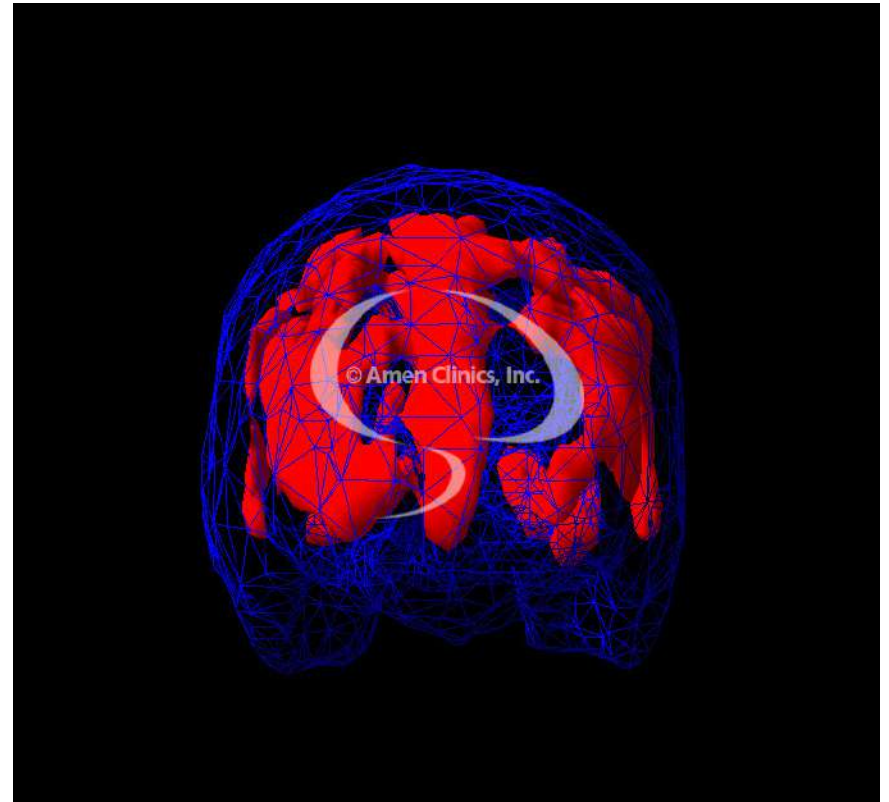
- PET Scan of brain of person with Obsessive/ Compulsive disorder
- High metabolic activity (red) in frontal lobe areas involved with directing attention

OCD: SPECT scan

Normal Brain



OCD Brain- trouble shifting
attention; ritualistic behavior,



heavy increased cingulate
activity

Panic Disorder

- marked by a minutes-long episode of intense dread in which a person experiences:
 - terror; a sense of disaster; fear of dying
 - chest pain; cardiac symptoms such as heart palpitations, rapid heart beat, trouble breathing
 - chills or hot flashes; sweating
 - choking
 - nausea
 - dizzy, faint, or lightheaded
 - other frightening sensations- derealization (feeling unreal); depersonalization (feeling detached from self); fear of becoming insane

Anxiety Disorders

TABLE 16.1

COMMON OBSESSIONS AND COMPULSIONS AMONG CHILDREN AND ADOLESCENTS WITH OBSESSIVE-COMPULSIVE DISORDER

Thought or Behavior Symptom	Percentage Report
<i>Obsessions (repetitive thoughts)</i>	
Concern with dirt, germs, or toxins	40%
Something terrible happening (fire, death, illness)	24
Symmetry, order, or exactness	17
<i>Compulsions (repetitive behaviors)</i>	
Excessive hand washing, bathing, tooth brushing, or grooming	85
Repeating rituals (in/out of a door, up/down from a chair)	51
Checking doors, locks, appliances, car brake, homework	46

Source: Adapted from Rapoport, 1989.

Psychological disorders

ESSENTIAL QUESTION:

What are phobias?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Anxiety Disorders

- Phobia

- persistent, irrational fear of a specific object or situation that is not actually likely to be dangerous
- people who experience phobias usually realize that their fear makes no sense
- the discomfort and avoidance of the feared object, event, or situation may greatly interfere with the person's life

Anxiety Disorders

- Acrophobia- heights
- Claustrophobia- enclosed places
- Hematophobia- blood
- Cynophobia- dogs
- Aerophobia- flying
- Entomophobia- insects
- Gamophobia- marriage
- Xenophobia- strangers
- Melissophobia- bees

Anxiety Disorders

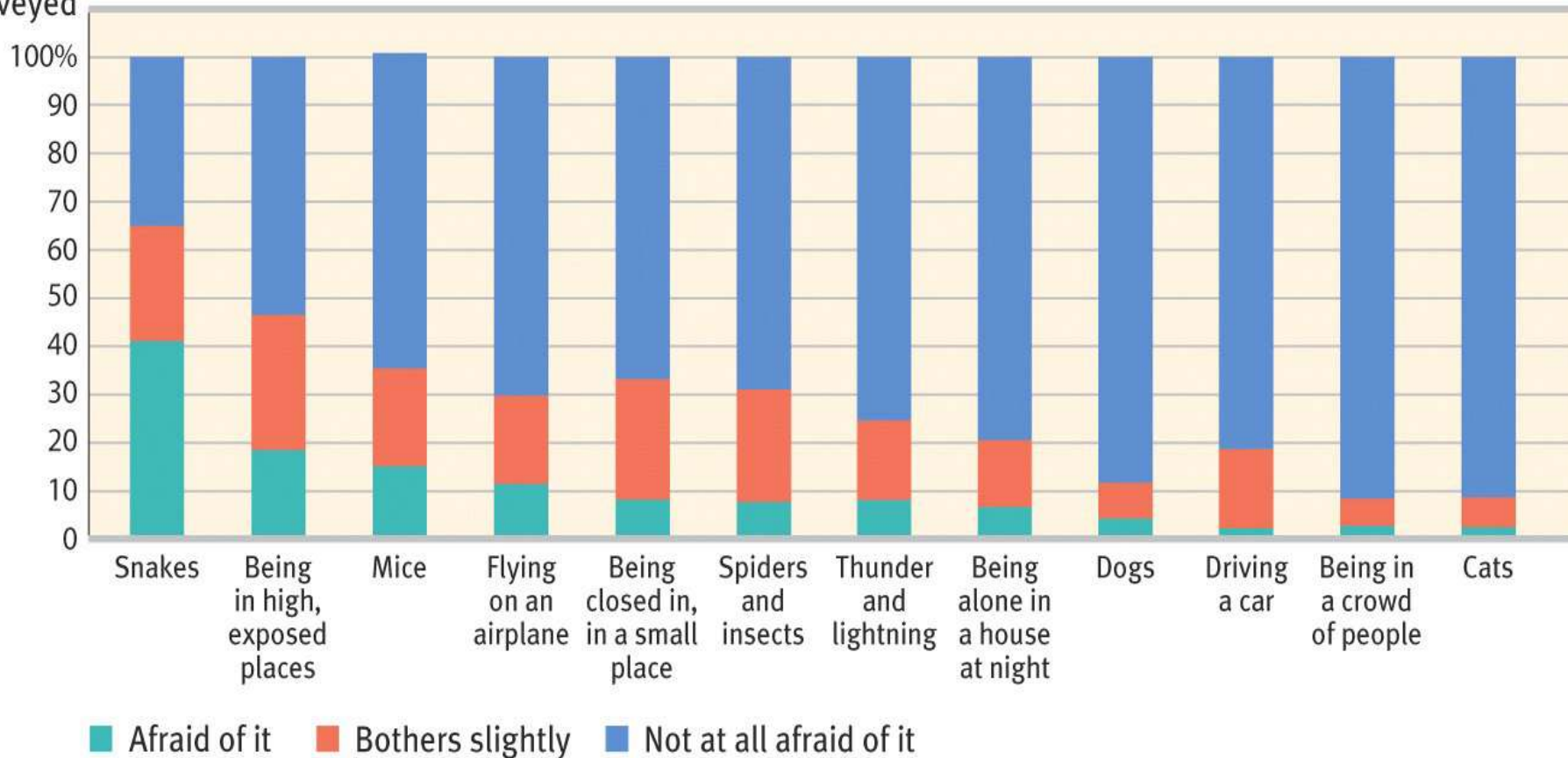
- Phobia

- there are thousands of phobias-
<http://phobialist.com/reverse.html>

Anxiety Disorders

- Common and uncommon fears

Percentage
of people
surveyed



Psychological disorders

ESSENTIAL QUESTION:

What is anorexia nervosa? What is bulimia?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Eating Disorders

- Anorexia Nervosa
 - fears weight gain or obesity
 - body dysmorphic disorder- a distorted body image
 - in this case patients view themselves as fat, even though they may be dangerously underweight

Eating Disorders: Anorexia Nervosa

- The Story of Karen Carpenter



Eating Disorders

- Bulimia

- An eating disorder characterized by episodes of overeating, usually of high calorie foods
- followed by:
 - vomiting
 - laxative use
 - fasting
 - excessive exercise

ESSENTIAL QUESTION:

What techniques do FBI agents use to track and capture serial killers?

GPS STANDARD:

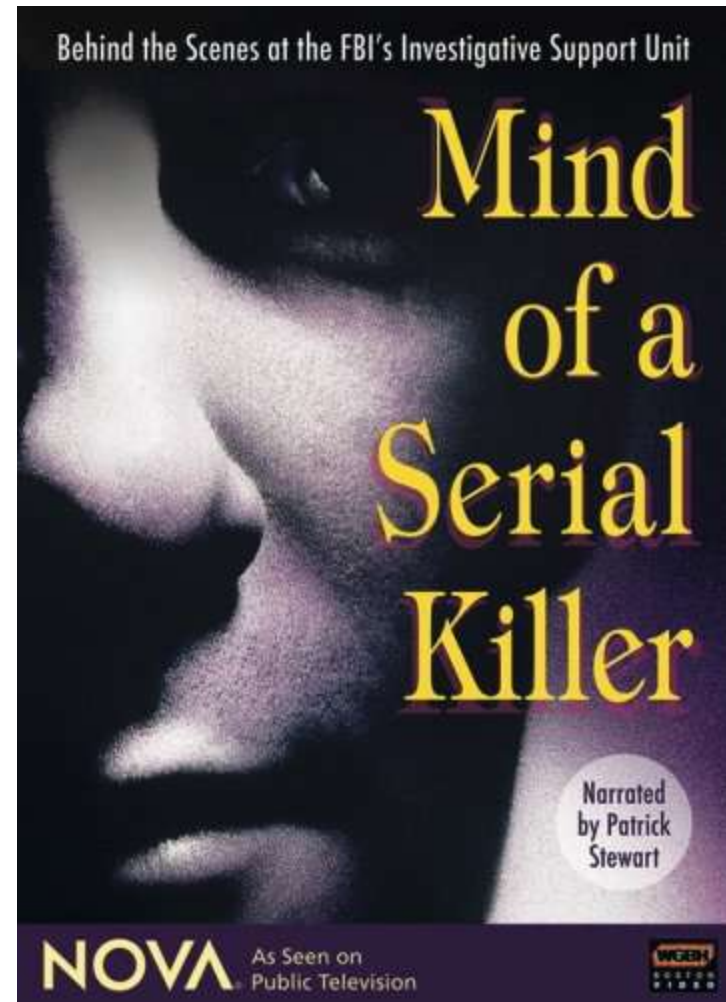
SSPVB3- The student will identify abnormal behavior and treatment.

e.) compare the biomedical, psychoanalytical, cognitive, and behavioral approaches to the treatment of psychological disorders.

Mind of a Serial Killer- narrated by Patrick Stewart

The FBI's Investigative
Support Unit

**a.k.a.-Behavioral
Analysis
Unit**



Antisocial Personality Disorder



“I will eat your liver with some faver beans and a nice chianti” - Dr. Hannibal Lector, psychiatrist and serial killer.... A.K.A.- Hannibal the Cannibal from “The Silence of the Lambs”



Antisocial Personality Disorder



“It rubs the lotion on its skin or else it gets the hose again.” - Buffalo Bill, serial killer.... from “The Silence of the Lambs”



Psychological disorders

ESSENTIAL QUESTION:

What is antisocial personality disorder?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Antisocial Personality Disorder

- Antisocial Personality Disorder
 - Formerly known as a psychopath or sociopath
 - disorder in which the person (usually man) exhibits a lack of conscience for wrongdoing, even toward friends and family members
 - may be aggressive and ruthless or a clever con artist

Antisocial Personality Disorder

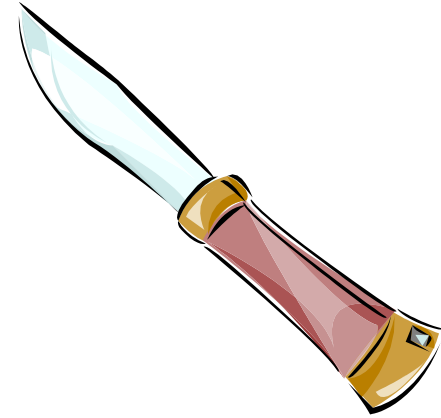
- The person is typically a male whose lack of conscience becomes plain before the age of 15, as he begins to lie, steal, fight, show cruelty towards animals or display unrestrained sexual behavior
- About half of children who exhibit these symptoms become antisocial adults

Antisocial Personality Disorder

- Many antisocial adults are:
 - unable to keep a job
 - irresponsible as a spouse or parent
 - likely to physically assault someone
 - likely to engage in criminal activity

Antisocial Personality Disorder

Antisocial Personality Disorder commonly afflicts serial killers



According to experts, serial killers cannot contain desires to kill repeatedly, even if there is no apparent motive.

Serial Killers

Jeffrey Dahmer



These men have two things in common: they are **cold-blooded killers** and they have **Antisocial Personality Disorder**.

Ted Bundy



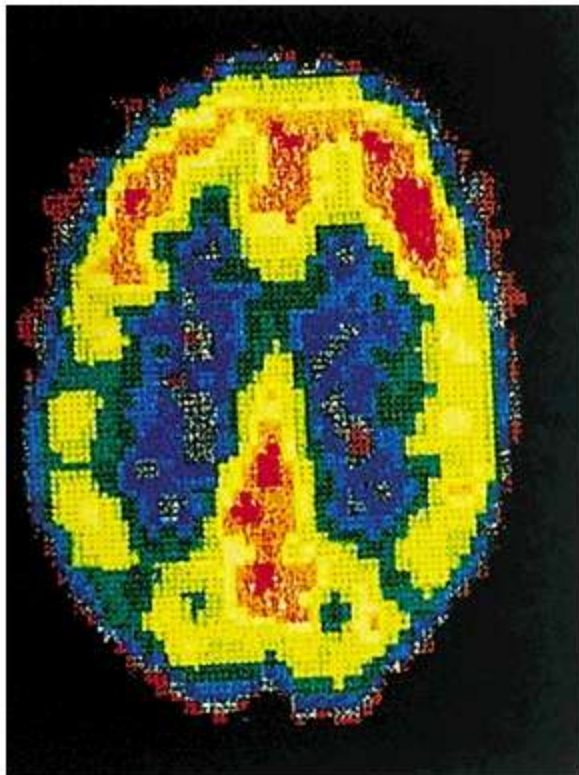
Antisocial Personality Disorder

- **PET scans** illustrate reduced activation (less **red** and **yellow**) in a serial killer's frontal cortex
- The **frontal cortex** is a brain area responsible for helping people to top impulsive and aggressive behavior

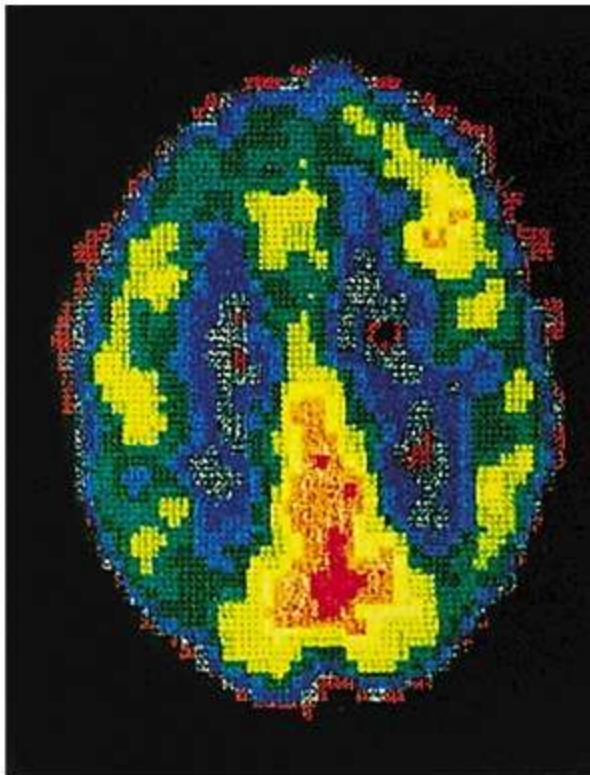
Antisocial Personality Disorder

- PET scans illustrate reduced activation in a murderer's **frontal cortex**

Normal



Murderer



■ The **frontal cortex** helps people to control their impulses

Antisocial Personality Disorder

- This reduction of activity in their frontal lobe made it difficult for them to control their impulses
- This lower activity was especially apparent in the brains of those individuals that murdered people impulsively

Antisocial Personality Disorder

- Raine also found that many killers have 11% less frontal lobe tissue than normal
- Therefore, they were less able to control their impulses to kill or commit other crimes

Antisocial Personality Disorder

- Genetic influences can wire the brain with a predisposition to antisocial personality disorder
- Adrian Raine conducted a study of 41 murders' brains and found reduced activity in their frontal lobe

Antisocial Personality Disorder

- When the antisocial person combines extremely high intelligence without a conscience, the result may be a charming and clever con artist or a....

Antisocial Personality Disorder

SERIAL KILLER

Antisocial Personality Disorder

- **Ted Bundy** was executed on January 24th, 1989
- He was executed in a Florida electric chair

Antisocial Personality Disorder

- Most criminals are not antisocial even though their behavior is antisocial
- Criminals often show responsible concern for their friends and family
- Generally, antisocial personalities do not feel compassion or concern for

Antisocial Personality Disorder

- When **Henry Lee Lucas** was 13 years old, he strangled a woman who refused to have sex with him
- **Lucas** claims to have bludgeoned, suffocated, stabbed, shot, or mutilated approximately **360** men, women, and children during his 32 years of criminal activity

Antisocial Personality Disorder

- During the last six years of **Henry Lee Lucas'** crime spree, Lucas teamed up with another killer named, **Elwood Toole**
- **Lucas & Toole** killed about 50 people together.....people they “didn’t think was worth living anyhow.”

Antisocial Personality Disorder

- **Lucas & Toole's** reign of terror ended when Lucas confessed to stabbing and dismembering his 15 year old common-law wife, who was Toole's niece
- The antisocial personality expresses very little regret over killing other people

Antisocial Personality Disorder

- **Lucas** stated, “Once I’ve done a crime, I just forget it.”
- **Toole** stated, “I think of killing like smoking a cigarette, just another habit.”

Psychological disorders

ESSENTIAL QUESTION:

What is antisocial personality disorder?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Antisocial Personality Disorder

*Functional Families,
Dysfunctional Brains*

**“Put your freakin phones
away or I will eat your liver
with some faver beans and
a nice chianti” - Dr.
Hannibal Lector,
psychiatrist and serial
killer.... A.K.A.- Hannibal
the Cannibal**

Jeffrey Dahmer



Psychological disorders

ESSENTIAL QUESTION:

What is dissociative identity disorder?

GPS STANDARD:

SSPVB3- The student will identify abnormal behavior and treatment.

Dissociative Disorders

- Dissociative Disorders
 - conscious awareness becomes separated (dissociated) from previous memories, thoughts, and feelings

Dissociative Disorders

- Dissociative Fugue

- a disorder characterized by a sudden loss of personal memory and the adoption of a new identity in a new location

- Dissociative Amnesia

- a disorder characterized by a sudden loss of memory
- all personal identifying information may be forgotten but the person does not create a new identity or leave home

Dissociative Disorders

- Dissociative Identity Disorder
 - rare dissociative disorder in which a person exhibits two or more distinct and alternating personalities
 - formerly called multiple personality disorder

Dissociative Disorders: Sybil

One of the
most
famous
cases of
DID. **We will
not be**

watching



Dissociative Disorders

- Shirley Ardell Mason (Sybil)
 - Shirley Ardell Mason was an American psychiatric patient and commercial artist whose life was documented in the book and film both released under the name "Sybil".
 - The book was penned by Flora Rheta Schreiber and published in 1973.
 - The movie was made for TV and was broadcast in 1976.
 - The name Sybil Isabel Dorsett was used in the book and movie to protect her identity.

Dissociative Disorders

- Shirley Ardell Mason (Sybil)
 - Sybil created and exhibited 17 distinct personalities



Dissociative Disorders

- Dissociative Identity Disorder cont.....
 - many people with DID have experienced life events of such a traumatic nature that they would like to forget them (child abuse, etc.)
 - most of the people with DID appear to be skilled at self-hypnosis, through which they can induce a trance-like state
 - most find that they can escape the trauma of the abuse at least temporarily by “creating new personalities” to deal with the stress

Dissociative Disorders

- Dissociative Identity Disorder ???
 - not all abused children display DID
 - there is evidence that some cases of DID may have been triggered by news media stories or by suggestions made to patients by their therapists
 - this evidence has led some skeptics to question the existence of multiple personalities

Personality Disorders

- Personality Disorders

- disorders characterized by inflexible and enduring behavior patterns that impair social functioning
- some consider these disorders not so much as severe mental disorders but rather as a lifestyle because these disorders usually without anxiety, depression, or delusions

Narcissistic Personality Disorder

- disorder in which the person has exaggerated ideas of self-importance and personal achievements
- Often preoccupied with envy of others and they blame others for holding them back and preventing their greatness from emerging

Narcissistic Personality Disorder continued....

- feel a sense of entitlement
- lack empathy for others
- take advantage of others

Narcissistic Personality Disorder continued....

- reject any personal criticism
- need constant attention and admiration

Borderline Personality Disorder

- disorder in which the person has a lack of stability in maintaining interpersonal relationships
- Unstable emotionally often showing intense, inappropriate anger
- feel empty inside
- feel bored

Borderline Personality Disorder continued....

- Poor self-image
- frantically try to avoid abandonment by other people
- are uncertain who they are... what is their real self?

Histrionic Personality Disorder

- disorder in which the person has excessive emotionality
- a preoccupation with being the center of attention
- need constant reassurance about their attractiveness

Histrionic Personality Disorder

- overly emotional
- overly dramatic behavior
- sexually seductive