

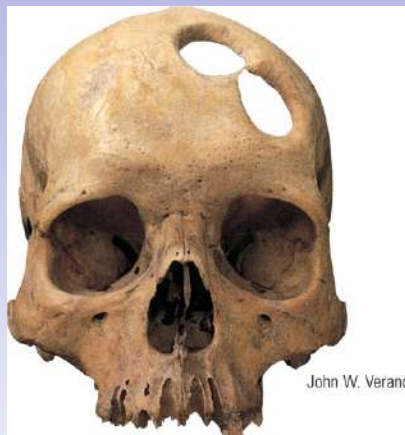
Psychological Disorder:

syndrome marked by a clinically significant disturbance in an individual's cognition, emotion regulation, or behavior



The Medical Model

- Philippe Pinel: first to treat psychological disorders according to the medical model
- Medical model: concept that diseases, in this case psychological disorders, have physical causes that can be *diagnosed*, *treated*, and, in most cases, *cured* often through treatment in a hospital
 - Mental illness (psychopathology)



Dance in a Madhouse, 1917 (litho), Bellows, George Wesley (1882–1925)/
San Diego Museum of Art, USA/Museum Purchase/The Bridgeman Art Library



Classifying Psychological Disorders

- Diagnostic and Statistical Manual of Mental Disorders (DSM)
 - DSM-5: American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, Fifth Edition; a widely used system for classifying psychological disorders
- Diagnostic labels
- Criticisms of the DSM

Labeling Psychological Disorders

- Rosenhan's study: healthy volunteers pretended to be mentally ill & committed themselves to mental hospitals —then couldn't get out! Diagnosed as schizophrenic & forced to take anti-psychotic meds
- Power of labels: Preconception can stigmatize
- Stereotypes of the mentally ill
- Insanity: a legal defense, not a medical diagnosis



Rates of Psychological Disorders

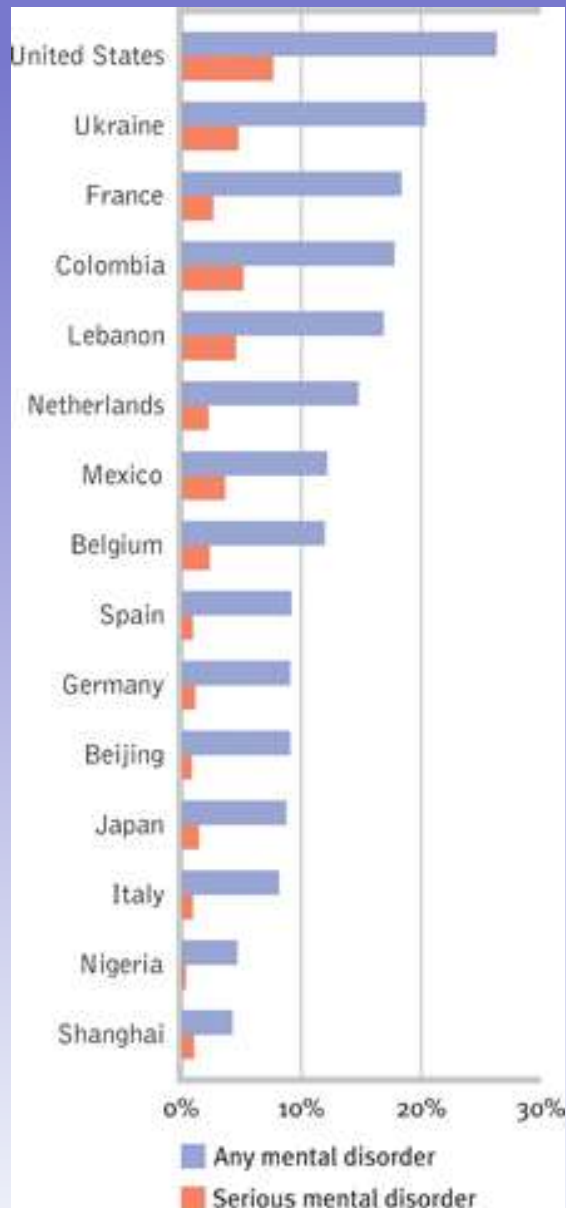


Table 65.1 Percentage of Americans Reporting Selected Psychological Disorders in the Past Year

Psychological Disorder	Percentage
Generalized anxiety	3.1
Social anxiety disorder	6.8
Phobia of specific object or situation	8.7
Mood disorder	9.5
Obsessive-compulsive disorder (OCD)	1.0
Schizophrenia	1.1
Posttraumatic stress disorder (PTSD)	3.5
Attention-deficit/hyperactivity disorder (ADHD)	4.1
Any mental disorder	26.2

Source: National Institute of Mental Health, 2008.

Table 65.2 Risk and Protective Factors for Mental Disorders

Risk Factors	Protective Factors
Academic failure	Aerobic exercise
Birth complications	Community offering empowerment, opportunity, and security
Caring for chronically ill or patients with neurocognitive disorder	Economic independence
Child abuse and neglect	Effective parenting
Chronic insomnia	Feelings of mastery and control
Chronic pain	Feelings of security
Family disorganization or conflict	Literacy
Low birth weight	Positive attachment and early bonding
Low socioeconomic status	Positive parent-child relationships
Medical illness	Problem-solving skills
Neurochemical imbalance	Resilient coping with stress and adversity
Parental mental illness	Self-esteem
Parental substance abuse	Social and work skills
Personal loss and bereavement	Social support from family and friends
Poor work skills and habits	
Reading disabilities	
Sensory disabilities	
Social incompetence	
Stressful life events	
Substance abuse	
Trauma experiences	

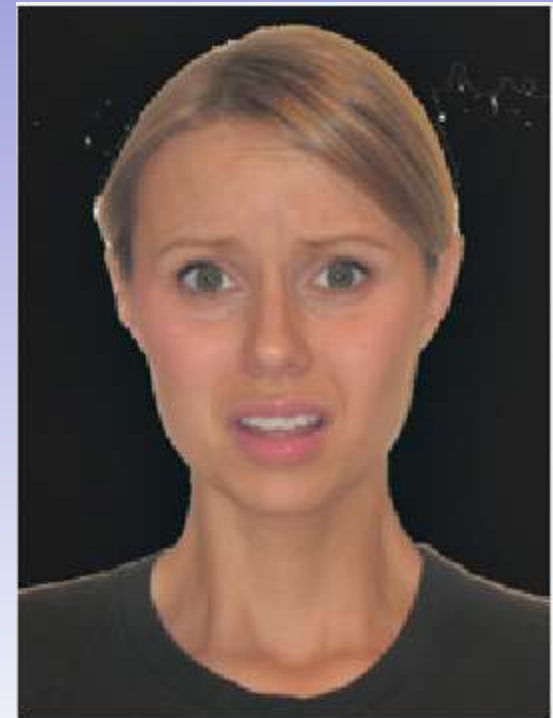
Anxiety Disorders



- Anxiety disorder: psychological disorders characterized by distressing, persistent anxiety or maladaptive behaviors that reduce anxiety
 - Generalized anxiety disorder: anxiety disorder in which a person is continually tense, apprehensive, and in a state of autonomic nervous system arousal
 - Panic disorders: anxiety disorder marked by unpredictable minutes-long episodes of intense dread in which a person experiences terror and accompanying chest pain, choking, or other frightening sensations
 - Phobias: anxiety disorder marked by a persistent, irrational fear and avoidance of a specific object, activity, or situation

Generalized Anxiety Disorder

- Generalized anxiety disorder
 - 2/3 women
 - Continual worry, jittery, agitated and deprived
 - Free floating anxiety



Reprinted from Brain Research, Vol 1191, Andrea Butler, Ipek Onuc, Christopher J. Fox, Jason J. S. Barton. Factors contributing to the adaptation after effects of facial expression, Pg 115–126, 2008, with permission from Elsevier.

Panic Disorder & ADHD

- Panic disorder

- Panic attacks
- ADHD: a psychological disorder marked by the appearance by age 7 of one or more of three key symptoms; extreme inattention, hyperactivity, and impulsivity



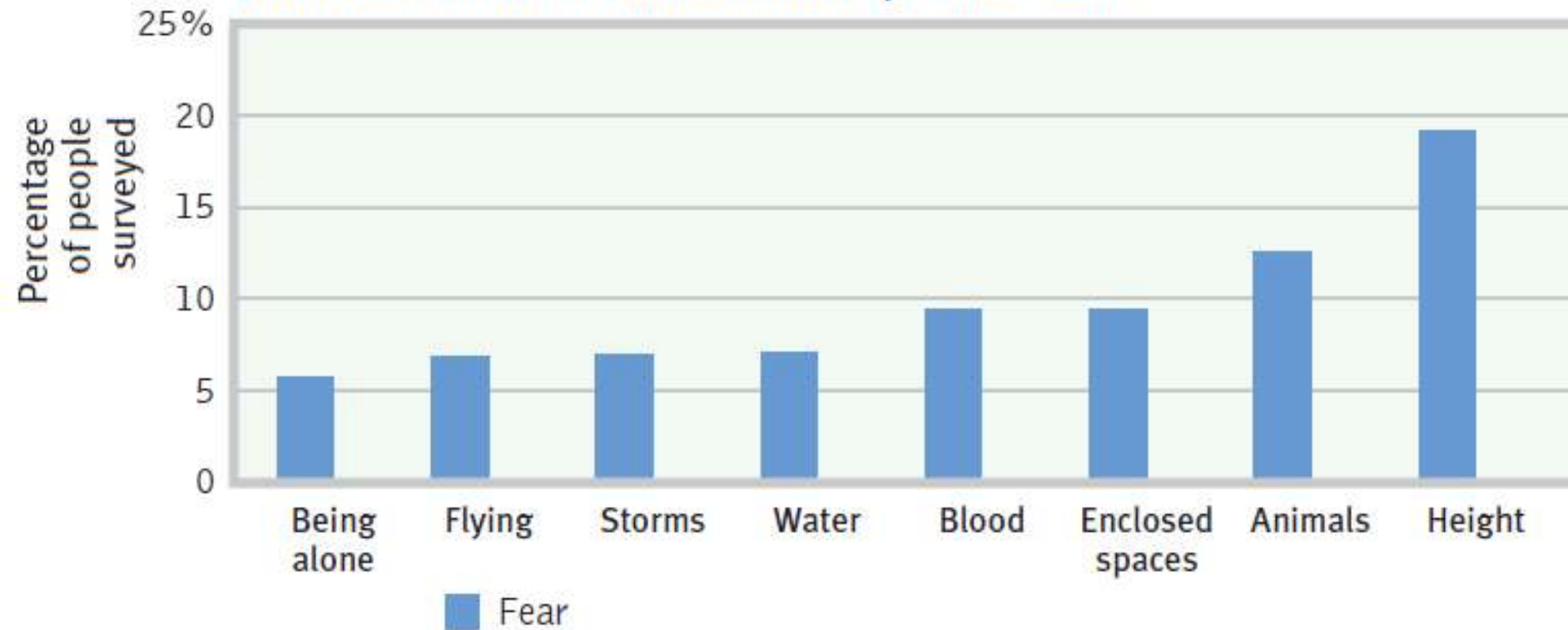
Specific Phobia

- Phobias
 - Specific phobia
 - Social anxiety disorder: intense fear of social situations, leading to avoidance of such
 - Agoraphobia: fear or avoidance of situations, such as crowds or wide open spaces, where one has felt loss of control and panic



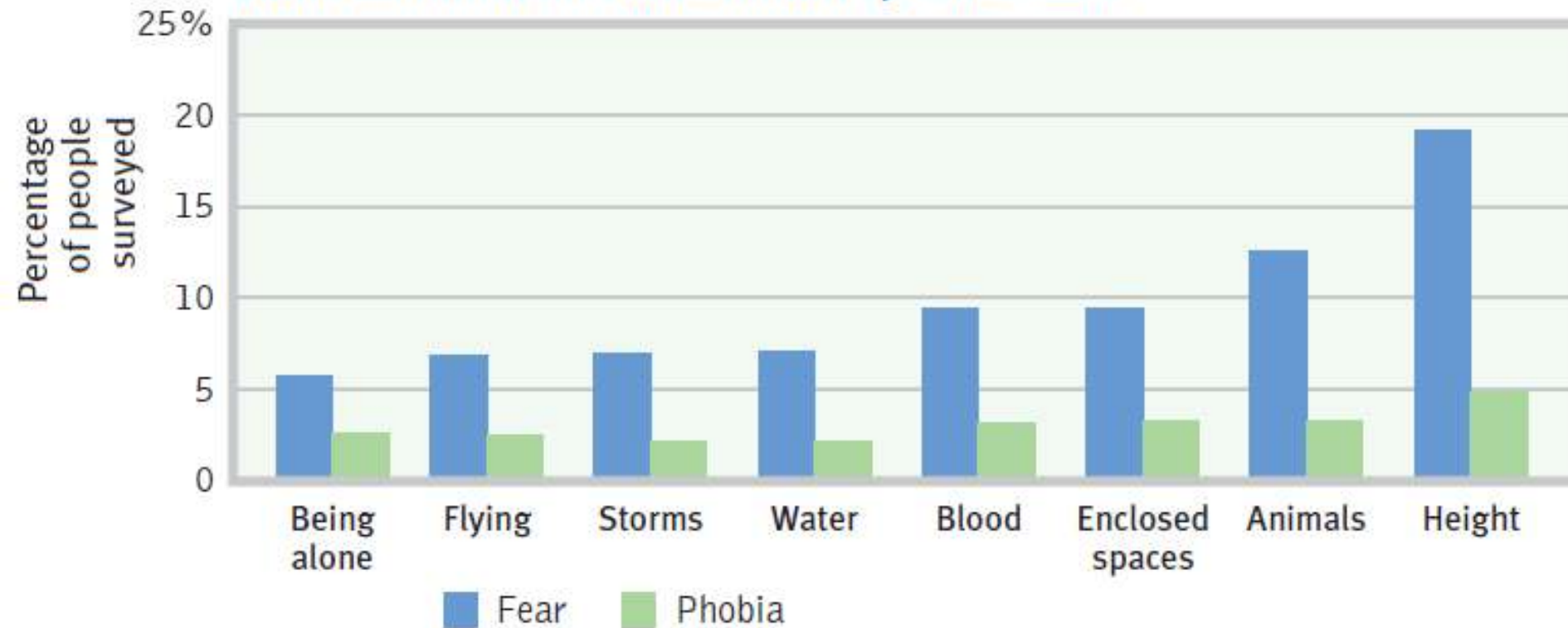
Specific Phobia

Some common and uncommon specific fears



Phobias

Some common and uncommon specific fears



Obsessive-Compulsive Disorder

- Obsessive-compulsive disorder: disorder characterized by unwanted repetitive thoughts (obsessions) and/or actions (compulsions).
 - Checkers
 - Hand washers



Obsessive-Compulsive Disorder

Common Obsessions and Compulsions Among Children and Adolescents With Obsessive-Compulsive Disorder

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

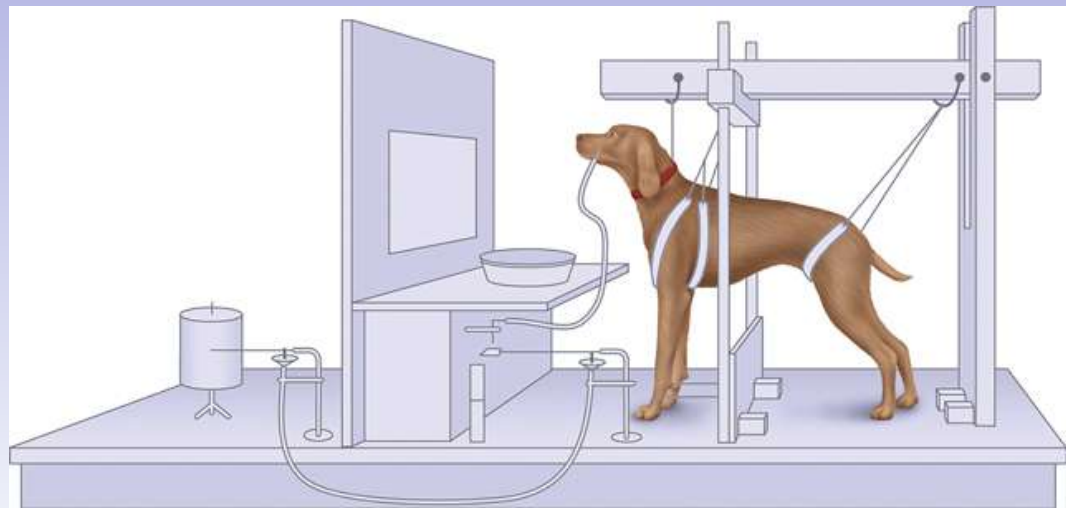
Posttraumatic Stress Disorder

- Post-traumatic stress disorder (PTSD): disorder characterized by haunting memories, nightmares, social withdrawal, jumpy anxiety, numbness of feeling, and/or insomnia that lingers for four weeks or more after a traumatic experience
 - “shellshock” or “battle fatigue”
 - Not just due to a war situation
- Post-traumatic growth: positive psychological changes as a result of struggling with extremely challenging circumstances and life crises



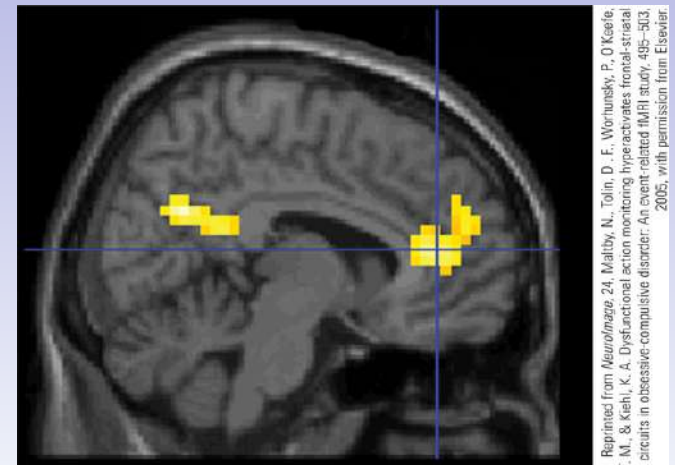
Understanding Anxiety Disorders, OCD and PTSD

- Classical and operant conditioning: being taught to be afraid or anxious
 - Stimulus generalization
 - Reinforcement
- Observational: learning by seeing learning



The Biological Perspective

- Natural selection: survival mechanism?
- Genes: inherited?
 - Anxiety gene
 - Glutamate: chemically induced?
- The Brain
 - Anterior cingulate cortex



Reprinted from *NeuroImage*, 24, Malby, N., Tolin, D. F., Worhunsky, P., O'Keefe, T. M., & Kiehl, K. A. Dysfunctional action monitoring hyperactivates frontal-striatal circuits in obsessive compulsive disorder: An event-related fMRI study, 495–503, 2005, with permission from Elsevier.

Major Depressive Disorder

- Mood disorder: psychological disorders characterized by emotional extremes
- Major depressive disorder: mood disorder in which a person experiences, in the absence of drugs or a another medical condition, two or more weeks with five or more symptoms, at least one of which must be either (1) depressed mood, or (2) lost of interest or pleasure
 - Problems regulating appetite
 - Problems regulating sleep
 - Low energy
 - Low self-esteem
 - Difficulty concentrating and making decisions
 - Feelings of hopelessness
- Persistent depressive disorder

Diagnosing Major Depressive Disorder

The DSM-5 classifies major depressive disorder as the presence of at least five of the following symptoms over a two-week period of time (including depressed mood or loss of interest or pleasure). The symptoms must cause near-daily distress or impairment and not be attributable to substance use or another medical or mental illness.

- Depressed mood most of the day
- Markedly diminished interest or pleasure in activities most of the day
- Significant weight loss or gain when not dieting, or significant decrease or increase in appetite
- Insomnia or sleeping too much
- Physical agitation or lethargy
- Fatigue or loss of energy
- Feeling worthless, or excessive or inappropriate guilt
- Problems in thinking, concentrating, or making decisions
- Recurrent thoughts of death and suicide

Bipolar Disorder

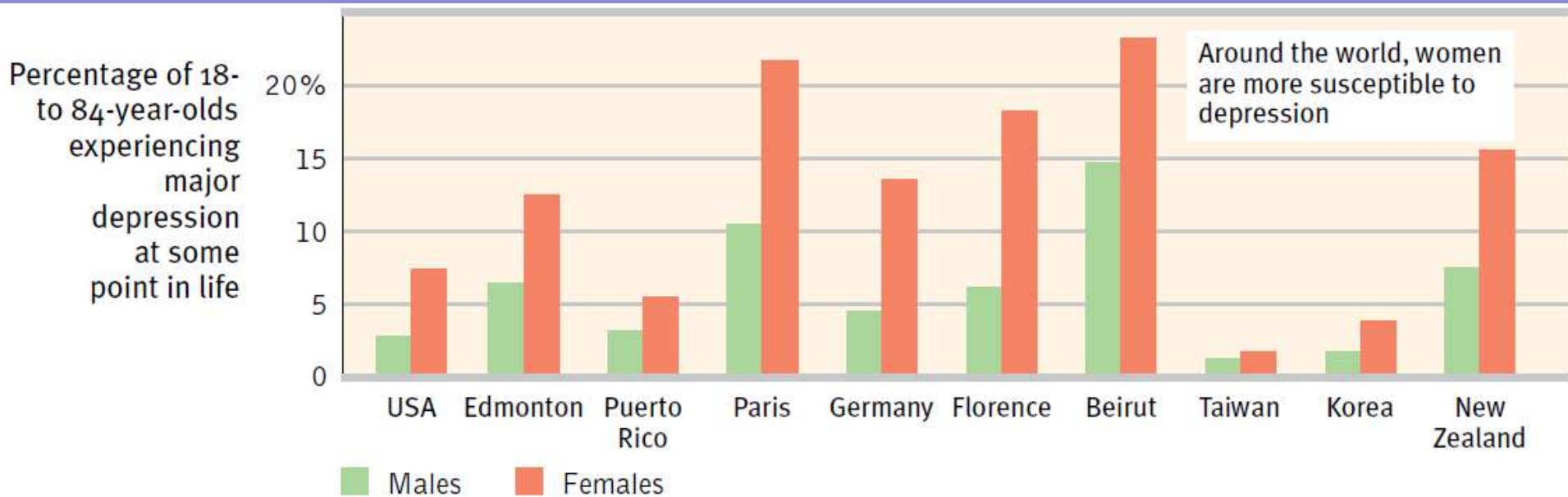
- Bipolar Disorder: mood disorder in which a person alternates between the hopelessness and lethargy of depression and the overexcited state of mania (formerly called *manic-depressive disorder*)
 - Mania (manic): mood disorder marked by a hyperactive, wildly optimistic state
 - Overtalkative, overactive, elated, little need for sleep, etc.
 - Disruptive Mood Dysregulation Disorder: childhood condition of extreme irritability, anger, and frequent, intense temper outbursts



Understanding Depressive and Bipolar Disorders

- Many behavioral and cognitive changes accompany depression
- Depression is widespread
- Women's risk of major depression is nearly double men's
- Most major depressive episodes self-terminate
- Stressful events related to work, marriage and close relationships often precede depression
- With each new generation, depression is striking earlier and affecting more people

Understanding Depressive and Bipolar Disorders



Understanding Depressive and Bipolar Disorders

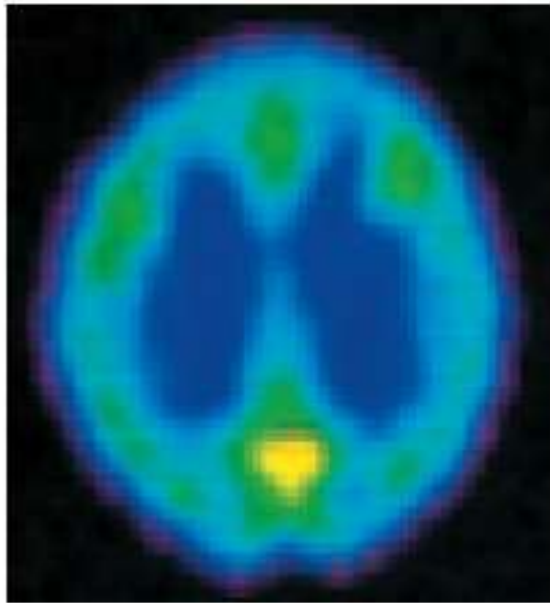
The Biological Perspective

- Genetic Influences
 - Mood disorders run in families
 - Heritability
 - Linkage analysis
- The depressed brain
- Biochemical influences
 - Norepinephrine and serotonin

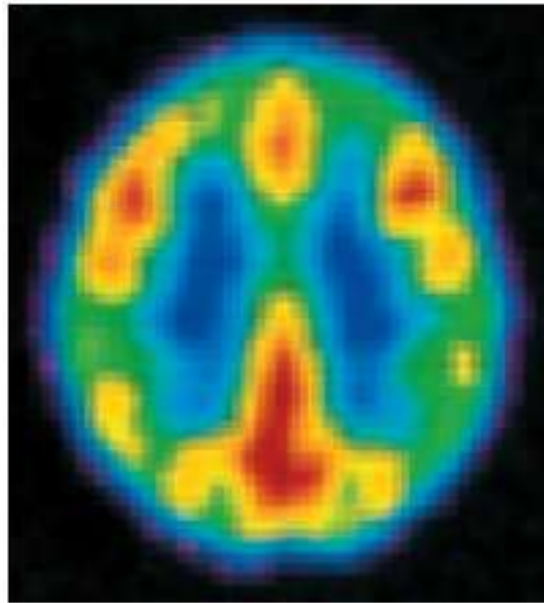
Understanding Depressive and Bipolar Disorders

The Biological Perspective

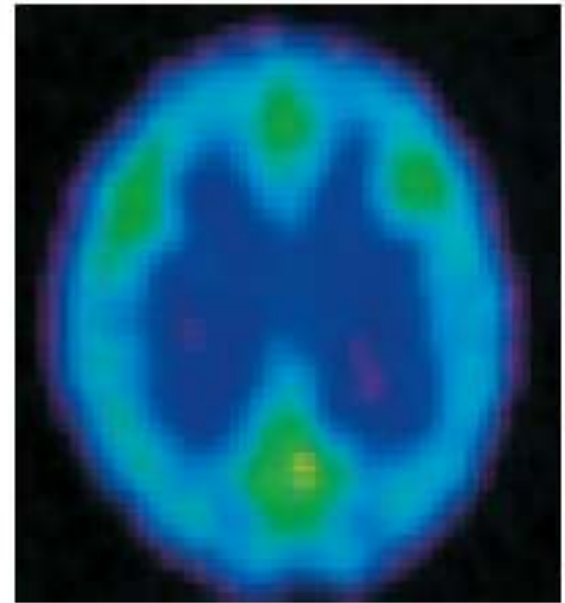
The ups and downs of bipolar disorder



Depressed state
(May 17)



Manic state
(May 18)



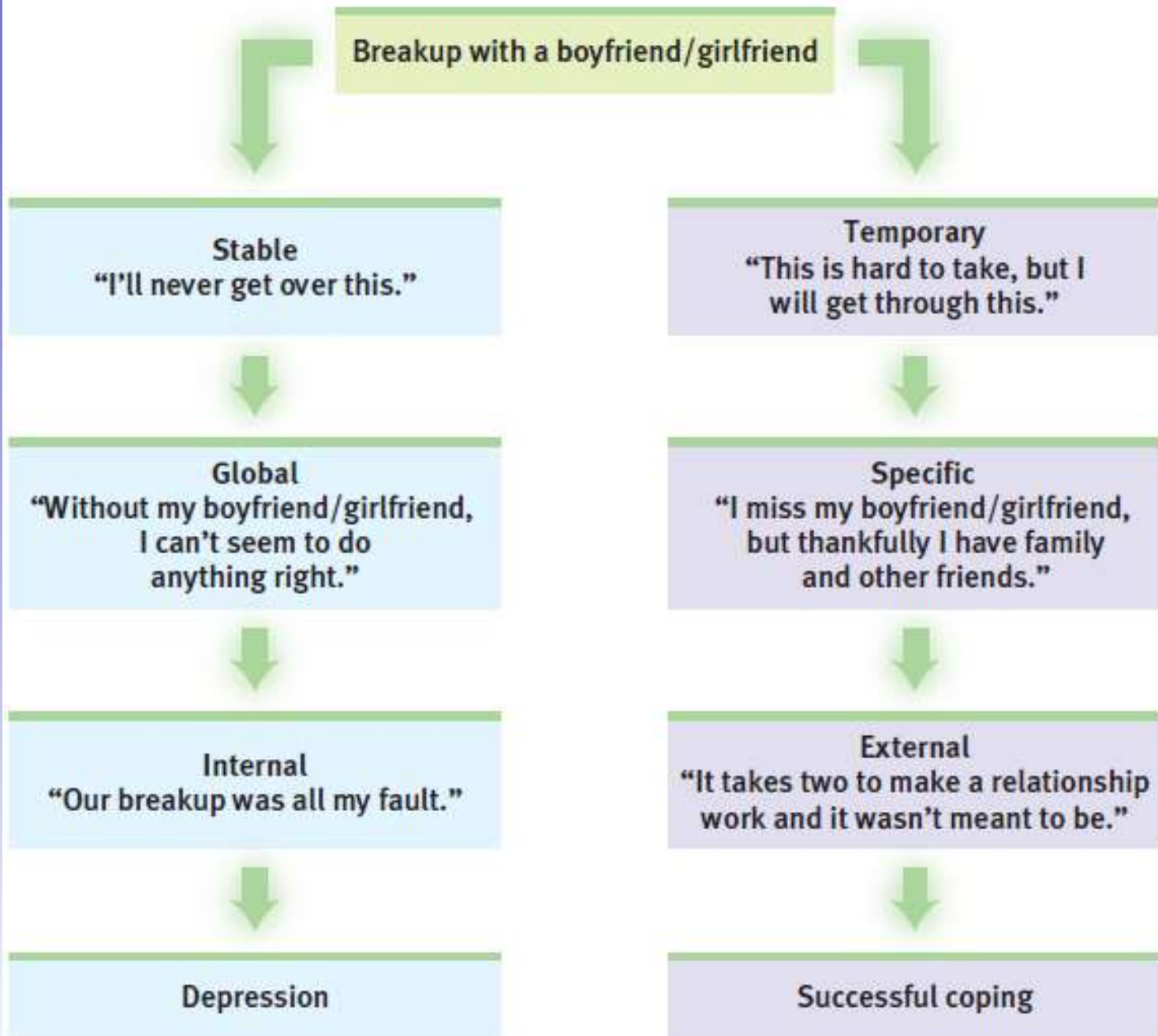
Depressed state
(May 27)

Courtesy of Drs. Lewis Baxter and Michael E. Phelps, UCLA School of Medicine

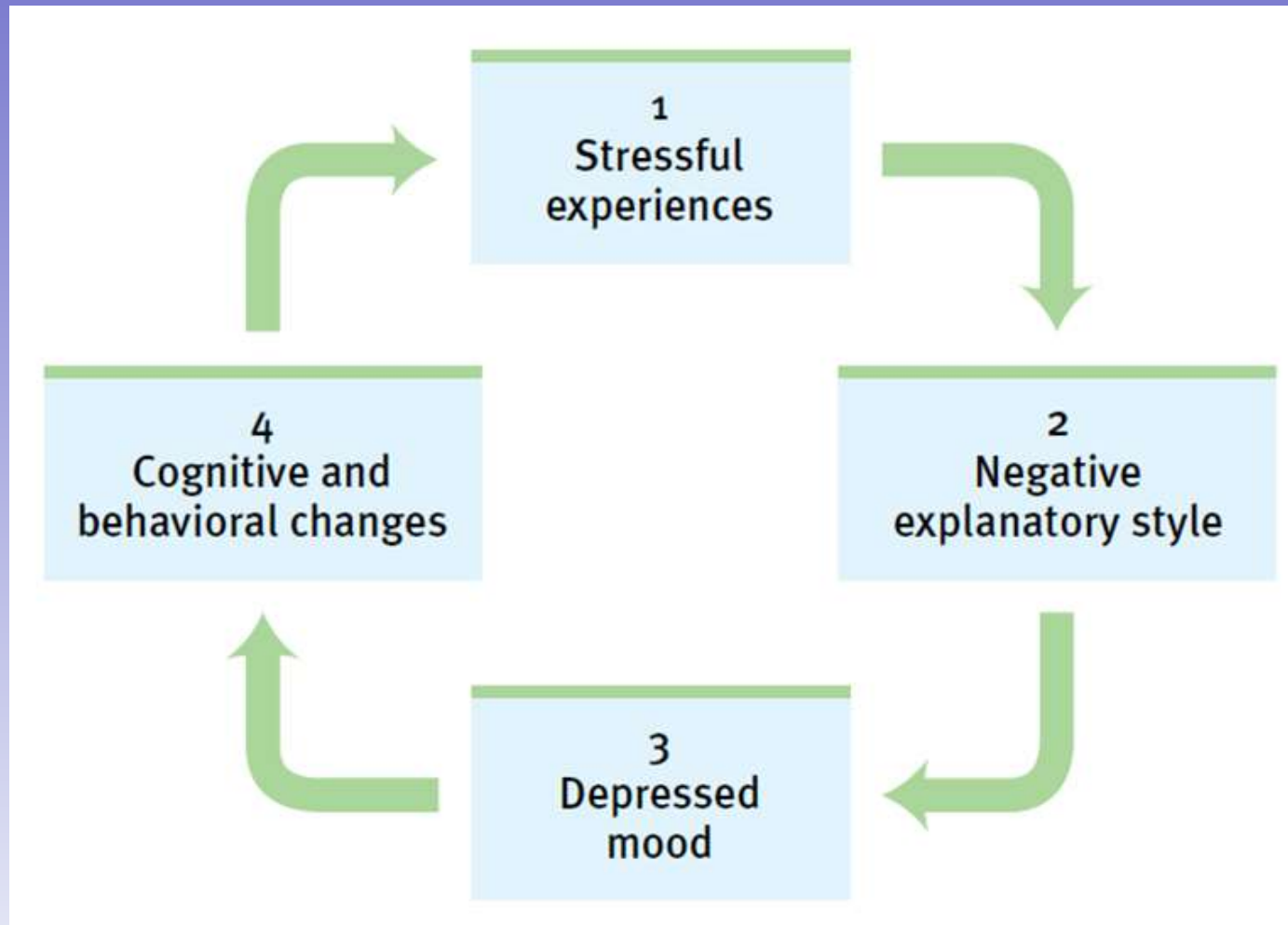
Social-Cognitive Perspective

- Negative Thoughts and Moods Interact
 - Self-defeating beliefs
 - Learned helplessness: give up after failing
 - Rumination: compulsive fretting; *overthinking* about our problems and their causes
 - Explanatory style: psychological attribute that indicates how people explain to themselves why they experience a particular event, either positive or negative
 - Stable, global, internal explanations
 - Cause versus indicator of depression?

Explanatory style and depression



Depression's Vicious Cycle



Symptoms of Schizophrenia

- Schizophrenia (means “split mind”): group of severe disorders characterized by delusions, hallucinations, disorganized speech, and/or diminished or inappropriate emotional expression
 - *Not multiple personalities!!*
 - Psychosis (psychotic disorder): psychological disorder in which a person loses contact with reality, experiencing irrational ideas and distorted perceptions

Symptoms of Schizophrenia

Disorganized Thinking and Disturbed Perceptions

- Disorganized thinking
 - Delusions: false beliefs, often of persecution or grandeur, that may accompany psychotic disorders, paranoid
 - Word Salad
 - Hallucinations: false sensory experience, such as seeing something in the absence of an external visual stimulus
 - Breakdown in selective attention

Symptoms of Schizophrenia

Diminished and Inappropriate Emotions

- Inappropriate Emotions
 - Flat affect
- Inappropriate Actions
 - Catatonia
 - Disruptive social behavior

Onset and Development of Schizophrenia

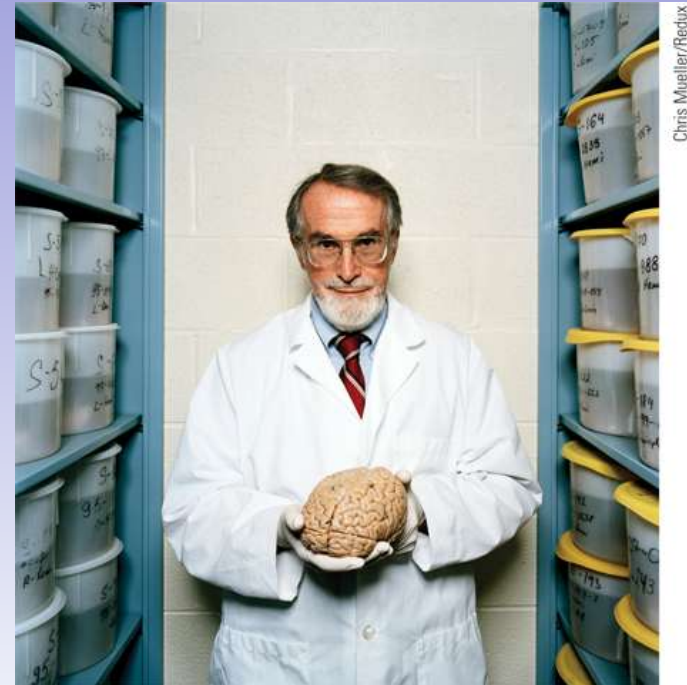
- about 1% of population, runs in families
- Onset usually by late teens
- **Positive** (delusions, hallucinations) versus **negative** symptoms (flat affect, catatonia)
- **Chronic** (process) schizophrenia: slow developing, unlikely to recover, usually negative symptoms
- **Acute** (reactive) schizophrenia: develops fast, likely to recover, usually positive symptoms

Understanding Schizophrenia

Brain Abnormalities:

Dopamine Overactivity

- Dopamine Overactivity
 - Dopamine – D4 dopamine receptor
 - Dopamine blocking drugs
- Glutamate levels low



Chris Mueller/Redux

Understanding Schizophrenia

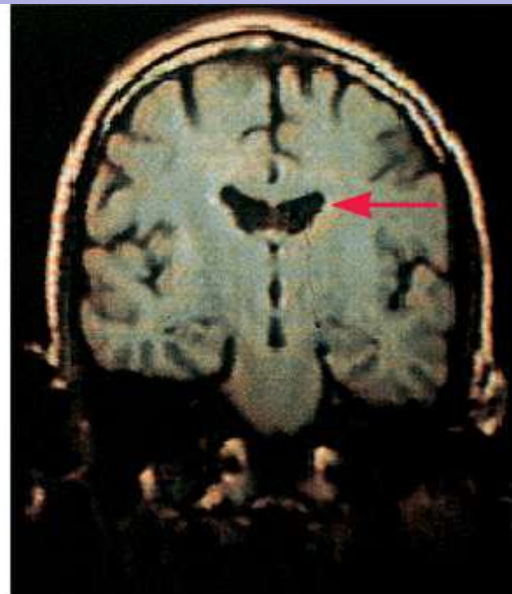
Brain Abnormalities:

Abnormal Brain Activity and Anatomy

- Abnormal Brain Activity and Anatomy
 - Frontal lobe and core brain activity
 - Fluid filled areas of the brain



No schizophrenia



Schizophrenia

Both photos: From Daniel Weinberger, M.D., CBDB, NIMH

Understanding Schizophrenia

Brain Abnormalities:

Maternal Virus During Midpregnancy

- Maternal Virus During Pregnancy
 - Studies on maternal activity and schizophrenia
 - Influence of the flu during pregnancy



(a)



(b)

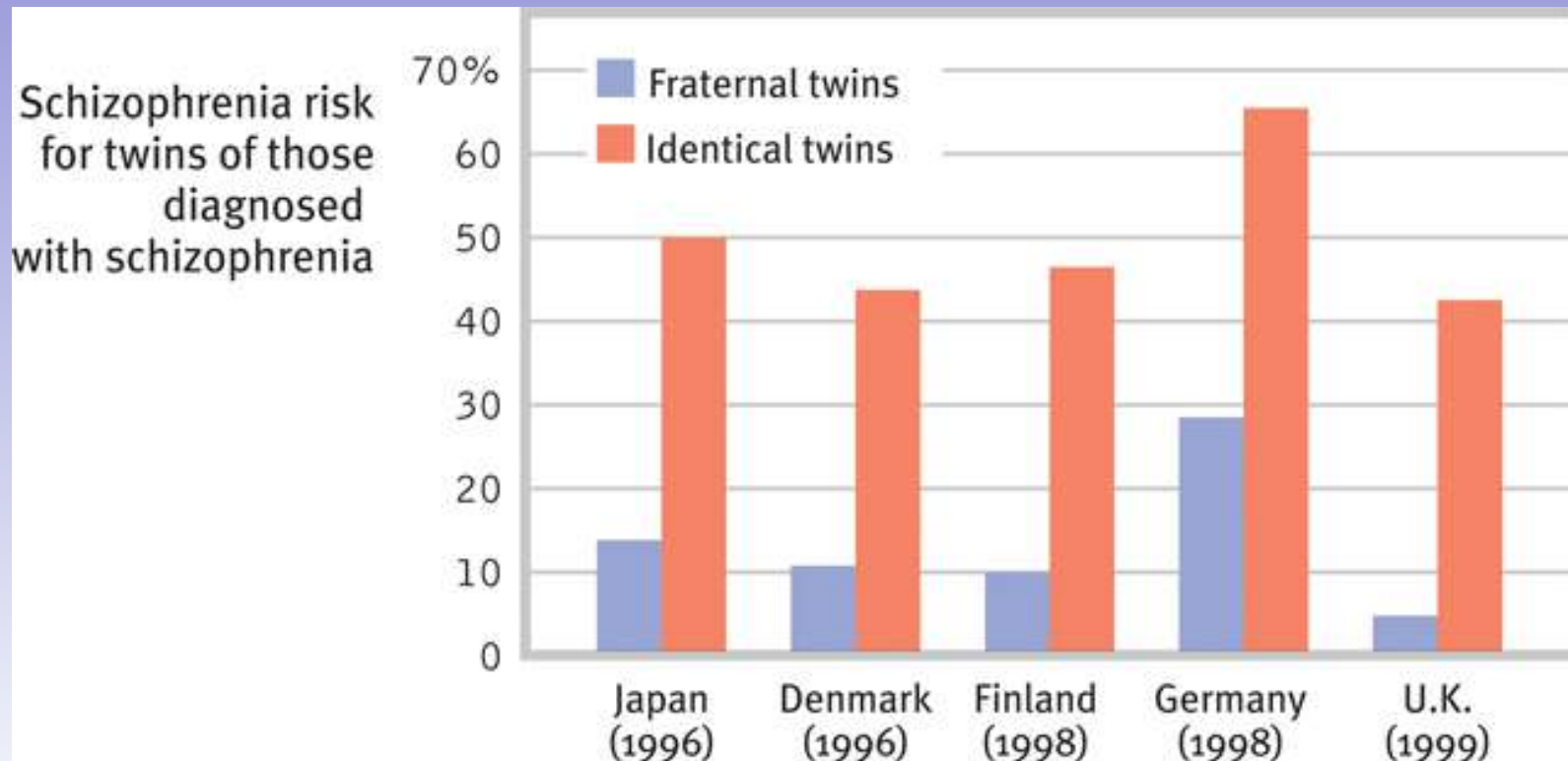


(c)

Understanding Schizophrenia

Genetic Factors

- Genetic predisposition
- Twin studies



Understanding Schizophrenia

Psychological Factors

- Possible warning signs
 - Mother severely schizophrenic
 - Birth complications (low weight/oxygen deprivation)
 - Separation from parents
 - Short attention span
 - Disruptive or withdrawn behavior
 - Emotional unpredictability
 - Poor peer relations and solo play

Module 69: Other Disorders



Somatic Symptom and Related Disorders

- Somatic symptom disorder: psychological disorder in which the symptoms take a somatic (bodily) form without apparent physical cause
 - Somatic (body)
 - Conversion disorder: disorder in which a person experiences very specific genuine physical symptoms for which no psychological basis can be found
 - Functional neurological symptom disorder
 - Illness anxiety disorder: disorder in which a person interprets normal physical sensations as symptoms of the disease (Hypochondriasis)

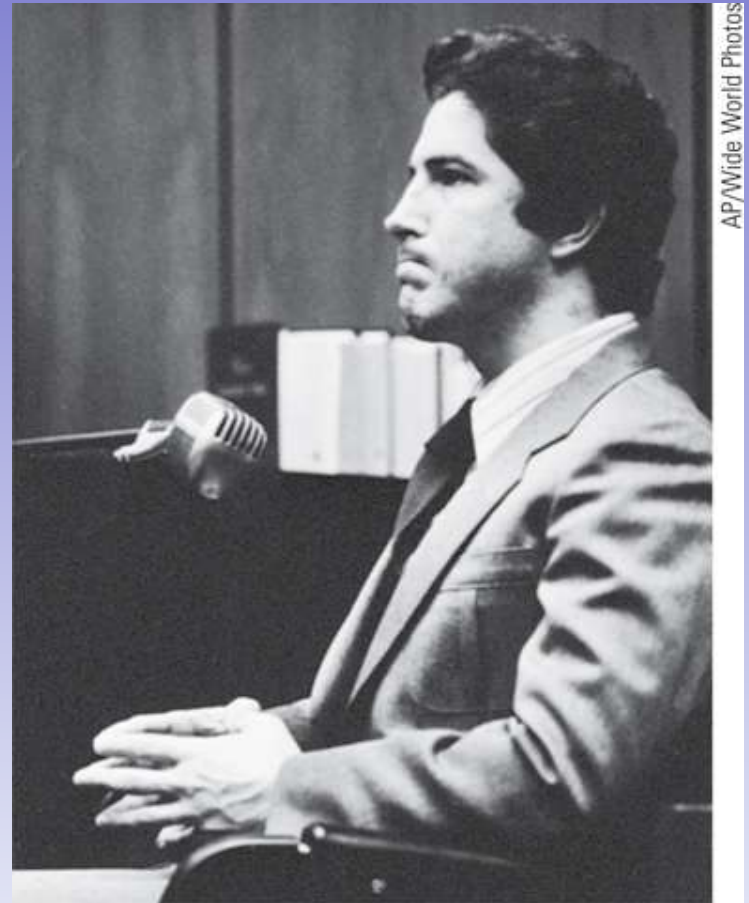
Dissociative Disorders

- Dissociative disorders: disorders in which conscious awareness becomes separated (dissociated) from previous memories, thoughts, and feelings
 - Fugue state: disorder characterized by reversible amnesia for personal identity, including the memories, personality, and other identifying characteristics of individuality. The state can last days, months or longer.
 - Dissociate (to become separated)

Dissociative Disorders

Dissociative Identity Disorder

- Dissociative identity disorder (DID) rare dissociative disorder in which a person exhibits two or more distinct and alternating personalities. Formerly called *multiple personality disorder*



Understanding DID

- Genuine disorder or not?
- DID rates: really undiagnosed until 1970s, then suddenly LOTS of cases
- Therapist's creation?
- DID and other disorders
 - **Borderline Personality Disorder:** characterized by difficulties regulating emotion. This means that people who experience BPD feel emotions intensely and for extended periods of time, and it is harder for them to return to a stable baseline after an emotionally triggering event



Feeding and Eating Disorders

- Eating disorders
 - Anorexia nervosa
 - Bulimia nervosa
 - Binge
-eating
disorder



Personality Disorders

- Personality disorders: psychological disorders characterized by inflexible and enduring behavior patterns that impair social functioning
 - Cluster A
 - **Schizoid personality disorder**: lack of interest in social relationships, a tendency towards a solitary or sheltered lifestyle, secretiveness, emotional coldness, detachment and apathy
 - Cluster B
 - **Histrionic personality disorder**: pattern of excessive attention-seeking emotions, usually beginning in early adulthood, including inappropriately seductive behavior and an excessive need for approval
 - **Narcissistic personality disorder**: long-term pattern of exaggerated feelings of self-importance, an excessive need for admiration, and a lack of empathy toward other people
 - Antisocial personality disorder: see next slide
 - Cluster C
 - **Avoidant personality disorder**: intense fear of rejection and being negatively judged by others

Personality Disorders

Antisocial Personality Disorder

- Antisocial personality disorder: personality disorder in which a person (usually a man) exhibits a lack of conscience for wrongdoing, even toward friends and family members. May be aggressive and ruthless or a clever con artist
 - **Sociopath**: created, more erratic (The Joker in Batman)
 - **Psychopath**: born, often seem normal (Dexter)

