



What is Abnormal...anyway?

Chapter 13- Psychological Disorders


CLASS OBJECTIVES:

How do we define abnormal behavior?


What are Anxiety Disorders?

What are Mood Disorders?

What is Schizophrenia?

A decorative vertical bar on the left side of the slide, featuring a green gradient background with white floral and vine patterns. The patterns include stylized flowers and swirling vines.

What percentage of the population would you guess have a psychological disorder?



People tend to believe that psychological disorders affect a small percentage of people, but this is not so.

The Midtown Manhattan Study (1962) reported that 55% of the general population have some form of mental illness

The Human Perspective

One of the most important objectives for this class is for students to recognize how psychological suffering is everywhere.

You will learn about clusters of symptoms that characterize different psychological disorders, but most importantly PEOPLE suffer with these disorders everyday.




Sensitivity Please!

The language we use when discussing psychological disorders is very important-people are not just their disorders!

The Disclaimer

❏ Please do not start diagnosing yourself, your family, friends, boyfriends/girlfriends, neighbors, classmates, professors or anyone else you can think of... 😊

❏ This chapter will not make you a psychologist!



How are people with
psychological disorders
portrayed in our culture?

Why is this front page article acceptable?

The Trentonian

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ROASTED NUTS

General-alarm fire at Trenton Psychiatric

By TOM BALDWIN
& JEAN LEVINE

Staff Writers

A welder's torch sparked a general alarm blaze that gutted offices and a chapel at Trenton Psychiatric Hospital yesterday as it burned out of control for more than two hours.

Authorities said no TPH employees or patients were hurt in the morning blaze. But several of the 100 firemen who responded to the scene collapsed from heat exhaustion.

Battalion Chief Graham Smith of the Trenton Fire Division said the blaze broke out in the Haines Building shortly before 6 a.m.

In minutes, as the flames shot across the roof of the L-shaped, three-story structure, firemen were calling for more help from Trenton's fire lines as well as the volunteer firemen of Easton, Hamilton and Lawrence.

Before it was declared under control at 10:19 a.m., the blaze would go to three alarms, then general alarm status.

Firemen initially charged into the building in the effort to beat down the flames. Fearful of a collapse, however, supervisors pulled firefighters back out to fight strictly from outside with aerial hoses.





**FIRST-LINE TREATMENT OF DEPRESSION
MINIMAL IMPACT ON SEXUAL FUNCTION**

Proven efficacy and clinical safety profile

WELLBUTRIN was significantly more effective than placebo in inpatient¹ as well as outpatient² clinical trials. The only adverse effect reported in clinical trials of WELLBUTRIN at an incidence of greater than 5% and more than twice that of placebo was tremor¹

Low incidence of sexual dysfunction

Unique noradrenergic mechanism of action³ with minimal impact on sexual function^{3,4}
Incidence of impotence with WELLBUTRIN and placebo is 3.4% vs 3.1%, respectively; incidence of decreased libido vs placebo is 3.1% vs 1.6%³

The principal medically important adverse reaction with WELLBUTRIN is seizure. For more information, please consult Brief Summary of Prescribing Information on next page.



I can.
PROVEN EFFICACY THAT SPANS
A SPECTRUM OF DISORDERS

BUPROPION
I CAN GET MY BEHIND

GENERAL ANXIETY DISORDERS
I CAN TAKE MYSELF

MAJOR DEPRESSION
I CAN GET MY FEELINGS

MINOR DEPRESSION
I CAN TAKE MY LIFE

THE ANXIOLYTIC ANTIDEPRESSANT



With **CONCERTA**,[®]
I see Andrew. Not his ADHD.

**Are all disorders
viewed the same?**

When the patient lashes out against "them"—

THORAZINE[®]
brand of chlorpromazine

quickly puts an end to his violent outburst

SMITH KLINE & FRENCH LABORATORIES
leaders in psychopharmaceutical research

"Thorazine is especially effective when the psychotic episode is triggered by delusions or hallucinations.

At the outset of treatment, Thorazine's combination of antipsychotic and sedative effects provides both emotional and physical calming. Assaultive or destructive behavior is rapidly controlled.

As therapy continues, the initial sedative effect gradually disappears. But the antipsychotic effect continues, helping to dispel or modify delusions, hallucinations and confusion, while keeping the patient calm and approachable.

A reminder advertisement—For prescribing information, please see PDS or available literature.

JOHN H. GLASS
600376

Representation of patients with chronic schizophrenia

It pays to break the cycle of noncompliance, relapse, and hospitalization

- Halidol is the major factor in high treatment costs—resulting in a high degree of hospitalization and PDS visits with associated costs.
- Only Halidol significantly reduces hospital days.
- HALDOL Decanoate ensures drug delivery for a full month by only 10 days with long-acting decanoate—which may help increase compliance while decreasing management costs.

Dosing change adjustments in response to exacerbation of psychotic symptoms. Therapy with HALDOL Decanoate 100 or HALDOL Decanoate 200 can be supplemented with short-acting oral forms of HALDOL (Haloperidol). The side effects of HALDOL Decanoate 100 and HALDOL Decanoate 200 are those of HALDOL. For particular risks of HALDOL Decanoate 100 and HALDOL Decanoate 200, please refer to the prescribing information on adjacent page.

HALDOL[®] Decanoate 100
(HALOPERIDOL) INJECTION 100 mg/mL
Reduced Hospitalize in Reduced Hospitalization

Zoloft
(sertraline HCl)

**When you know more about what's wrong,
you can help make it right.™**

Who's Normal?

- Your neighbor has physical complaints and sees several doctors weekly.
- A 22 year-old college student smokes 4-5 marijuana joints per day, has a 3.8 GPA, has a part-time job and a solid long term relationship.
- Rachel has been caught several times urinating in the corner.
- A 35 year-old very happily married man enjoys wearing women's clothes and underwear on the weekends when he and his wife go out on the town.

Who decides what's “NORMAL”?

WE do!




What Is Abnormal Behavior?



Abnormal behavior is characterized as:

- Non-typical
- Socially unacceptable
- Distressing to the person who exhibits it or to the people around them



Criteria for abnormal behavior include statistical infrequency, dysfunction, personal distress, and violation of norms.

None of these criteria alone is adequate for classifying abnormal behavior.

What do we call
people labeled as
abnormal?



Labels, Labels, Labels...

These words are used to dismiss and dehumanize people who we consider different.



Abnormal Psychology

- ❏ Is the field of psychology concerned with assessment, treatment, and prevention of maladaptive behavior.
 - “Clinical Psychology”

How are Psychological Disorders Diagnosed?

- ❏ The *American Psychiatric Association* (APA) has devised a system for diagnosing maladjusted behavior
- ❏ The *Diagnostic and Statistical Manual of Mental Disorders*
 - Referred to as the *DSM IV* (4th edition)



Why do we need a
system to diagnose
psychiatric disorders?

Goals of the DSM IV

- ❏ To provide a system for diagnosing disorders
- ❏ To improve the reliability of diagnoses
- ❏ To make diagnoses consistent with research evidence and clinical experiences.

History

- The mentally ill were once subjected to terrible conditions in “*insane asylums*”
- This resulted in Deinstitutionalization:
 - This effected treatment methods
 - Accounts for a large majority of the homeless population.





Feeling Anxious?



What does anxiety feel like?

- Anxiety is a generalized feeling of fear and apprehension that may be related to a situation or object.
- Anxiety is often accompanied by increased physiological arousal
 - increase heart rate, blood pressure, and respiration

Anxiety

■ There are several types of anxiety disorders:

- (GAD) Generalized Anxiety Disorder
- (PTSD) Post Traumatic Stress Disorder
- (OCD) Obsessive- Compulsive Disorder
- Phobic Disorder




Specific Phobias



What are Phobias?

- *Phobic disorders* are excessive, irrational fear and avoidance of specific objects or situations
 - Effects 7.8% of the U.S population (APA, 2005)

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Phobias should not to be
confused with “normal
fears”

What can we learn from the
Maury show?



I can't sleep, 'cause the
clowns will get me.



Obsessive-Compulsive Disorder

I am not obsessive
I am not obsessive
I am not obsessive
I am NOT OBSESSIVE
I AM not obsessive
I am not OBSESSIVE
I am NOT OBSESSIVE
I AM NOT OBSESSIVE
I am not obsessive

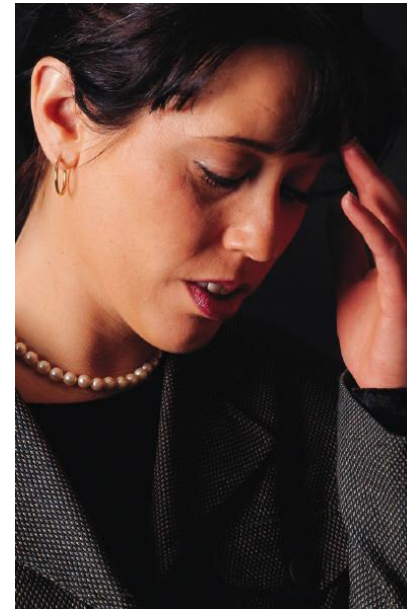
Obsessive-Compulsive Disorder (OCD)

- ❑ OCD involves persistent, uncontrollable, thoughts and irrational beliefs
- ❑ The obsessions are intrusive thoughts cause compulsive rituals that interfere with daily life
- ❑ 2.6% of the U.S. population suffers from this disorder (Karno & Golding (1991)).

I just can't stop myself!!

- ❏ The ritual behaviors are compulsions that are performed by the person to reduce anxiety.
- ❏ These compulsions are repetitive behaviors or mental acts a person feels they MUST perform.

What does OCD look like?





Mood Disorders


Class Objectives:
Depression
Bipolar Disorder



Depressive Disorders

- Depression is included in the category of mood disorders in which people show:
 - Extreme and persistent sadness
 - Despair
 - Loss of interest in activities once considered pleasurable.

“Depression is like falling into a deep, dark hole that you cannot climb out of. You scream as you fall, but it seems like no one hears you. Some days you float upward without even trying; on other days you wish that you would hit bottom so that you would never fall again.”



■ Depression is so prevalent that it is known as “*the common cold*” of psychiatric disorder.

- 14 to 15 million Americans are affected each year



How depressed can you be?

■ The severity of depression varies because this is a spectrum disorder

■ Severe depression sometimes includes thoughts of death and suicide

■ People with depression may have delusions

- False beliefs

Bipolar Disorder

- ❑ Someone who alternates between periods of depression and mania has “Bipolar disorder”.
- ❑ This disorder is essentially a roller-coaster ride of mood.

What does Mania look like?

☞ The manic phase involves:

- rapid speech and “flights of ideas”
- inflated self-esteem
- decreased need for sleep





THINK

Stop and Think...
How would you describe
Schizophrenia?

How would you describe a
person with this disorder?

Who has Schizophrenia?



THINK

- A middle-aged man walks the streets of New York with aluminum foil under his hat, so the Martians can't read his mind.
- A young woman sits in her college classroom and hears the voice of God telling her she is a vile and disgusting person.
- You try to strike up a conversation with the supermarket bagger, but he stares at you vacantly and will say only one or two words in a flat, monotone voice.



They ALL do!

Most people think of Schizophrenia as a singular disorder. We will examine the different types of Schizophrenia and how they are not all the same.

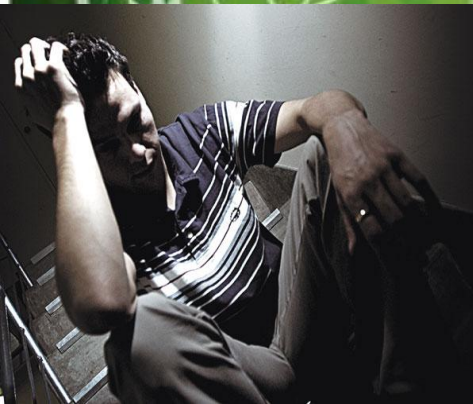


Stop and Think...
What do we think about people
with Schizophrenia?

How would you feel if you were asked
to show a person who was recently
released from Trenton Psychiatric
Hospital ?

Society devalues and dehumanizes those with schizophrenia.

- People with these severe mental disorders are twice as likely to be harassed in public as people without schizophrenia (Berzins et al., 2003).



Schizophrenia

■ Schizophrenia is the most extreme of all psychiatric disorders

- Effecting 1% of the population about 2 million Americans each year (Ho et al., 2003).

- 1 in 100 people

■ Schizophrenia is a devastating brain disorder that impacts almost every area of functioning.

“You are such a psycho!”

- Schizophrenia is a psychotic disorder, which comes from the Greek word “split mind”
 - Schizophrenia is not multiple personality disorder
- The symptoms of this disorder can be either positive or negative

Symptoms of Schizophrenia

- ❑ Positive symptoms:(in addition to what is typical)
 - hallucinations, delusions, racing thoughts
- ❑ Negative symptoms:(the absence of what is typical)
 - apathy, lack of emotion, poor or non-existent social functioning

Hallucinations - Sensory perceptions that occur without external stimulus. Causing people to hear, see, taste, touch or smell what others do not.



- Auditory hallucinations are the most common.



Hi, Jesus Christ...nice to meet you.

■ Delusions- A fixed, unshakeable false belief

- “I’m the King of England”
- “That streetlight is sending me secret messages”
- “I’m from the planet “Gwarnon”
- The CIA, FBI, and mafia are “out to get me!”

Negative Symptoms

❏ *Negative symptoms* of schizophrenia indicate the absence of normal behavior.

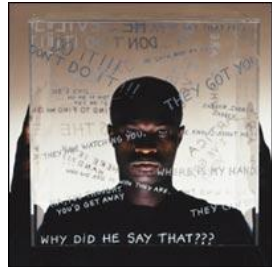
- Emotional and social withdrawal
- Poverty of speech or thought
- Inappropriate /lack of emotion

The many faces of schizophrenia

- This disorder is divided into several subtypes:

- Paranoid-

- “The FBI has this room bugged! You may be in on it...”



- Disorganized-

- “The Dahl, Dahl, Dahl is the ultimate makeup...Elvis Presley IS John Travolta, the eagle is the mail in the home!”

Catatonic Schizophrenia

- ❑ This type of schizophrenia affects the motor functions/responses.
- ❑ This can be displayed in waxy flexibility



Name that Psychotic Disorder!

- ❏ Chris has started spending large amounts of time guarding his home. “They” have bugged his phone and are sending cars past his house. He believes that the CIA, FBI and mafia are “after him” for witnessing a drug deal. People everywhere are in on the plot and want to kill him.

Paranoid Type

- ❏ Sally appears statue-like, often staying in the same unusual position for hours. When asked, “how are you Sally?”, she replies, “how are you, Sally?”

Catatonic Type

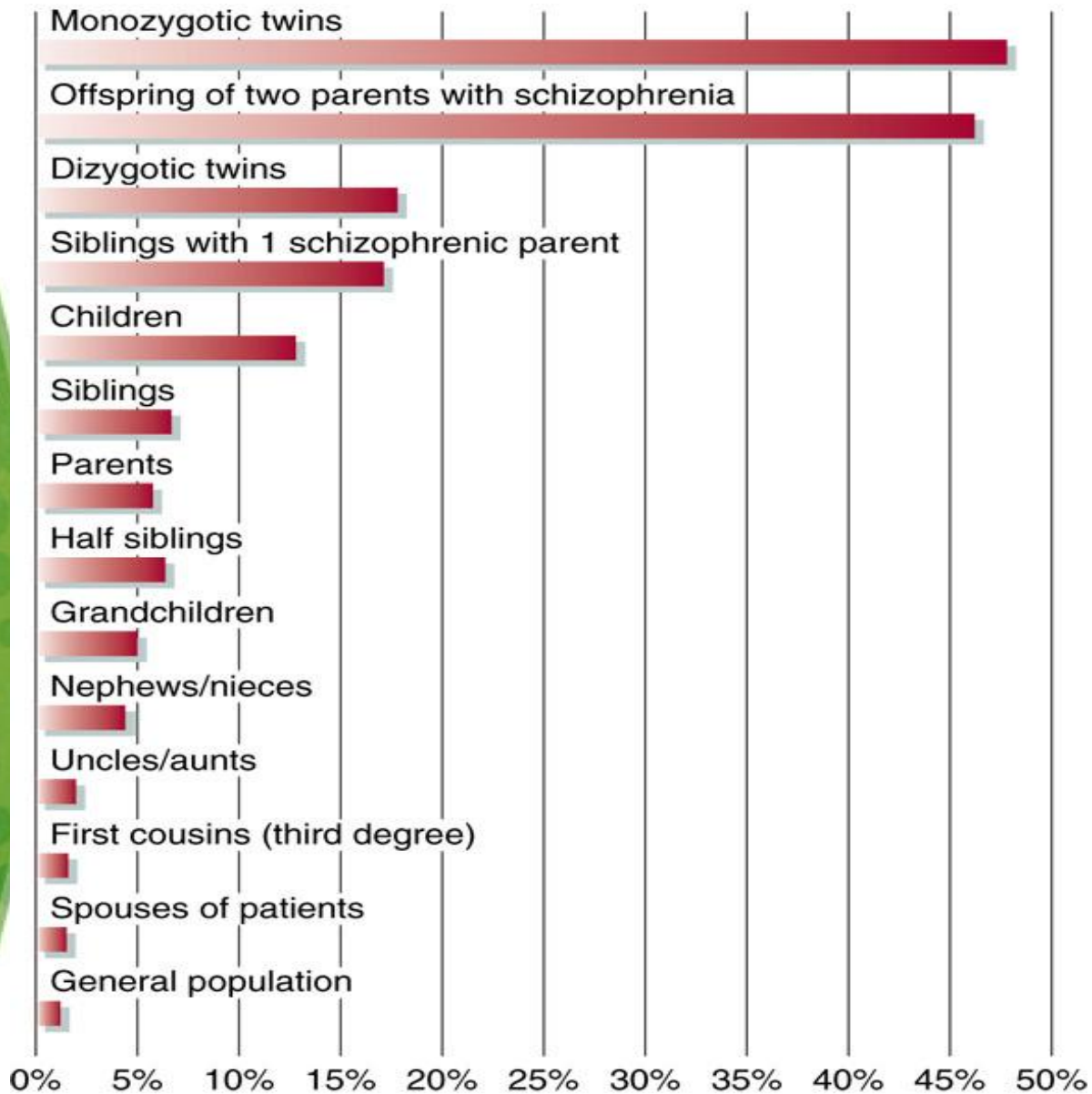
- ❏ At Grandma’s funeral, John walks up to the casket and begins to laugh hysterically. When he is asked why he is laughing, he replies “the lemon is the way! When it fell on the ship of the Yoda night owl.”

Disorganized Type

How many genes?

- The more genes you share, the more likely you will develop schizophrenia.
 - You have the greatest chance (48%) of having schizophrenia if your identical twin does.
 - If both of your parents have schizophrenia you have a 46% chance of developing the disorder

The Risk of Developing Schizophrenia



There is NO cure and even with treatment people with schizophrenia are likely to experience life-long difficulties.

available



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What's Next?

Personality