Chapter 15: Treatment of Psychological Disorders

PSY 100

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Therapy

TREATMENT FOR ABNORMAL BEHAVIOR LOGICALLY DERIVES FROM WHAT ONE BELIEVES THE CAUSE OF THE ABNORMAL BEHAVIOR TO BE.

Psychotherapy

- Psychotherapy and its goals
 - **■** goals of psychotherapy
 - achieving a cure for psychological problems
 - provide support and caring for those who seek help

Psychotherapy

Psychotherapy

- Where is psychotherapy done?
 - Therapist's office
 - Community mental health center
 - Hospitals
 - Schools
 - in the home
 - prisons
- Who goes to therapy?

Psychodynamic Therapy

- Goal:
 - **■** Catharsis
- **■** Techniques
 - Methods used to get at the unconscious
 - **■** free association
 - dream analysis

Psychodynamic Therapy

- Manifest content
 - The conscious, remembered aspects of a dream
- Latent content
 - The unconscious, unremembered, symbolic aspects of a dream

Psychodynamic Therapy

- **■** Interpretation of reactions
- interpretation of slips of the tongue
- brief psychodynamic therapy

Behavior Therapies

- **■** Classical conditioning methods
 - **■** extinction
 - Systematic desensitization
 - **■** Flooding
 - **■** Exposure with response prevention
 - Aversion therapy
 - **■** Covert sensitization

Behavioral Therapies

- **■** Instrumental conditioning
 - **■** token economy
 - **■** functional analysis
 - **■** behavioral contract
 - **■** Goal setting
 - **■** self-monitoring

Cognitive-Behavioral Therapy

- Albert Ellis
 - Rational Emotive Behavior Therapy
 - Activating Event
 - Belief
 - Emotional Consequences
 - Disputing
 - New Emotions
- Aaron Beck
 - Cognitive restructuring

Cognitive Distortions

- All-or-nothing thinking
- **■** Overgeneralization
- Mental filter
- **■** Discounting the positive
- **■** Jumping to conclusions
- **■** Magnification
- **■** Emotional reasoning
- Shoulding on yourself
- Musterbation
- **■** Labeling
- **■** Personalization
- **■** Blame

Humanistic Therapy

- **■** Client-centered therapy
 - **■** Carl Rogers
 - **■** Active listening
 - Reflection
 - **■** Genuineness
 - **■** Empathic Understanding
 - Unconditional Positive Regard

Other types of therapy

- **■** Gestalt therapy
- **■** Eclecticism and Integration
- Group and family approaches to treatment

Effectiveness of Therapy

- Eysenck's Decision
- Effectiveness vs. Efficacy
- Consumer Reports
- Meta-Analyses
- Myths about delivering therapy

Drug Therapy

- History
- Lithium—First drug used
- Antianxiety drugs
 - Valium
- Antipsychotic drugs
 - Thorazine
 - Zyprexa

Drug Therapy

- Antidepressant drugs
 - MAO Inhibitors
 - Tricyclics
 - Elavil
 - Mellorill
 - Selective Serotonin Reuptake Inhibitors
 - Prozac
 - Effexor
 - Zoloft
 - Paxil

Drug Therapy

■ How SSRIs work:

The Good, The Bad and The Ugly on Prozac

- Ugly:
 - 1999: 10 million U.S. citizens on SSRIs
 - More worldwide
 - Antidepressant sales in 2000:
 - 10.2 **BILLION** dollars
- The Good
 - People who use them say that SSRIs work

The Good, The Bad and The Ugly on Prozac

- SSRIs help:
 - Decrease depression
 - Decrease anxiety
 - Decrease symptoms of OCD
 - Decrease symptoms of Eating Disorders
 - Increase self-esteem
 - Increase sluggish thoughts
 - Helps with creativity
 - Decreases disabling sensitivity

The Good, The Bad and The Ugly on Prozac

- Bad:
 - Prozac as poster boy for SSRIs
 - No clear evidence that Prozac actually works
 - Side effects are worse than reported
 - Withdrawal symptoms
 - Drug culture
 - Brain changes with long-term use of Prozac

The Good, The Bad and The Ugly on Prozac

- Birth defects associated with use
- Looks like an amphetamine, smells like an amphetamine, acts like an amphetamine
 - Do I need to go further?

Electroconvulsive Therapy

- History of ECT
- Still done
 - 100,000 per year
 - 2x as high as 40 years ago
- Effective if done right
 - Most effective with people who have intractable depression

Concluding Thoughts

- Abnormal behavior will always be a part of our culture
- psychologists will always be in demand
- A need to determine the most effective (in terms of time and cost) treatments
- Even if we are unable to help an individual get "better" we have a responsibility that began, once again, with Hippocrates: "Do no more harm."

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