PSYCHOPATHOLOGY

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DEFINITION.

The study of abnormal states of mind is known as psychopathology.

Approaches to psychopathology.

- psychodynamic psychopathology
- Phenomenological or descriptive psychopathology

Phenomenological psychopathology

This is concerned with the objective description of abnormal states of mind. It avoids preconceived ideas.

- According to Jaspers (1963), it is the preliminary work of representing, defining and classifying psychic phenomena as an independent activity.
- It involve the patient describing their morbid mental experiences and the doctor observing any abnormalities.
- It is also referred to as Descriptive psychopathology.

Phenomenological or descriptive psychopathology

- Significance of individual symptoms
- Form and content
- Various types of psychopathology

Significant of individual symptoms.

- Individual psychological symptoms are not necessarily evidence of pathology.
- Even hallucinations that are often regarded as hallmarks of mental illness are sometimes experienced by healthy people;
- e.g. when falling asleep hypnogogic hallucinations
- or when waking up hynoponmpic hallucinations.

- It is therefore important to consider the intensity and persistence of symptoms, even when intense and persistence, single symptoms does not necessarily indicate illness.
- It is the characteristic grouping of symptoms in to the syndrome that is important., e.g. the syndrome of depression, what are the symptom

Form and content of symptoms.

- This can best be described by an example.
- If a patient hears voices calling him a homosexual;
- -Then the form of the experience is an auditory hallucination.
- -The content is the statement that he is a homosexual.

Form and content

- A second person might hear voices saying he is about to be killed. The form is still an auditory hallucination, but the content is different (that he is to be killed).
- It is important to know not only the form but also the content of the symptom since it helps you in the management of the patient.

Abnormal states of mind

- Disorders of perception
- Disorder of thought
- Disorder of emotion
- Disorder of motor function
- Disorder of memory
- Disorder of consciousness
- Disorders of speech.

Perceptual disorders

 Perception is the process of becoming aware of ones surrounding.

Disorders of perceptions include;

Hallucinations.

- Defination; This are perceptions without an external stimuli. They may involve any of the 5 senses namely;
- Auditory
- Visual
- Gustatory
- Olfactory
- tactile

Auditory

- When they affect hearing.
- This may be experienced as noises, voices or music.
- They may commentary, second or third person.
- Third person auditory hallucinations is a symptom of schizophrenia

Visual

when a person can visualize objects (people without an external object/people).

The hallucinatory object may be of normal size or abnormal sizes

- e.g. minute or giant sizes .
- Always rule out organic brain disorders or pathway tumors

Tactile

- involving sensations of being touched pricked or strangled.
- Many also be experienced as clawing under the skin which patient usually interpreted as insects.
- Common in patients abusing cocaine and also in schizophrenia

GUSTATORY

- Gustatory involving taste, usually a bitter taste.
- common in schizophrenia or in epilepsy or pathway tumors.

OLFACTORY

- Olfactory smells without external stimuli.
- May be body odours, smell of burning flesh
- Common in schizophrenia

Somatic hallucinations

- These are hallucinations involving deep sensation
- -e.g sexual stimulation or intestines been pulled upon.

Illusions

Definition

 Misperception or misinterpretation of external stimuli.

- They occur commonly when the general level of sensory stimulation is reduced. Thus at dusk a common illusion is to misperceive the outline of a bush as a man.
- They are more likely to occur when level of consciousness is reduced as for example in an acute brain syndrome. (Resulting from medical condition e.g. cerebral malaria).

Disorder of thoughts

Definition of thinking

 Goal directed flow of ideas, symbols and associations initiated by a problem or a task and leading towards a realityoriented conclusion.

- Thought disorders are usually recognized from patient's speech or writings.
- It can also be interfered from action
- -e.g. a previously efficient librarian who developed schizophrenia became unable to classify books because each one seemed to belong to many different categories.

Thought

Thought disorders can be divided into

- Disorder of thought content
- Disorder of thought form
- Disorder of thought process.

DISORDERS OF THOUGHT CONTENT

- reflects the patient's belief and interpretations of stimuli an example of disorder of thought content is a delusion
- -Delusions are false beliefs that are not in keeping with persons education or cultural background.

Disorder of thought form

 This can de detected in patients spoken and written language. The patient cannot logically construct ideas i.e. cannot link thoughts together.

For example:

 Perseveration; i.e inappropriate and persistent repetition of same thought

- 2. Loosening of association; i.e loss of normal structure of thinking
- 3. Flight of ideas; patients thoughts and conversation move quickly from one topic to the other, so that one train of thought appears before the other appears.

Disorders of stream or thought process

In these disorders the amount and speed of thoughts are changed.

This includes:

1. Pressure of thought

 This occurs when ideas arise in unusual variety and abundance and pass through the mind rapidly. This occurs in mania and also in schizophrenia.

2. Poverty of thought

 The patient has few thoughts, which lack in variety and richness and seems to move through the mind slowly. This occurs in depression and sometimes schizophrenia

Thought block

This is abrupt and complete interruption
 of stream of thought (and thus flow of
 conversation) minor degree of this
 experience is common particularly in
 tired or anxious individuals.

However complete abrupt interruption
suggests schizophrenia (it should
therefore be identified only when there is
no doubt about its pressure. The patient
describes the experience as an abrupt and
complete emptying of mind.

Disorder of memory

- Failure of memory is called amnesia. There is four-memory process.
- Registration- ability to ad new material to existing store of memories.
- Retention is the ability to retain memory
- Recall is the ability to bring it back to awareness.
- Recognition is a feeling of familiarity indicating correct, that a particular person, object or event has been encountered before.

Disorder of consciousness.

 Conscious is awareness of self and environment. The level of consciousness can vary between the extremes of alertness and coma.