

UNIT 13: PSYCHOTHERAPY

Psychotherapy: psychological technique used to facilitate positive changes in a person's px, bx, or adjustment

Dimensions of

Individual/Group: One patient, one therapist / Many patients, one therapist

Insight/Action: lead patient to deeper understanding of thoughts / direct changes to bxs

Directive/Non-Directive: therapist led / patient led

Time-Limited: set number of sessions

Supportive: day-to-day support from therapist

Eclectic: from a variety of perspectives

History of: review the history

Philippe Pinel: removed the shackles

Jean Martin Charcot: hypnosis to treat hysteria

Josef Breuer: cathartic method. Precursor to Freudian therapy

Psychoanalysis: Based on Freud's beliefs

Insight: knowing will set you free

Free Association: talk about whatever is on your mind

Dream Analysis: looks for symbols in manifest vs latent content

Resistances: attempts to block therapy

Transference: patient transfers feelings to therapist

Humanistic: Clients and facilitators. Conscious insight. Human potential

Roger's Client Centered Therapy (And Conditions For): non-directive. Atmosphere of growth. Ppl are good

Existential Therapy: Problems of existence. Frankl's logotherapy. Confrontation.

Behavioral: learning techniques to tx illness.

Counterconditioning: Replace response with a more desirable one.

Aversion Therapy: experience negative feeling instead of positive.

Exposure Therapy -> Systematic Desensitization: use relaxation technique to abate anxiety.

Desensitization hierarchy

Extinction Therapy: weaken maladaptive responses

Flooding: expose to carefully controlled envt

Implosion: imagine the controlled envt/situation

Operant Conditioning (Token Economy, Bx Contracting): based on rewards/punishers

Modeling: Social learning, vicarious learning, observational learning...

Cognitive Therapy: maladaptive thoughts as source of illness

Ellis' REBT: ABCs. Ppl recite maladaptive thoughts. Point out those thoughts.

Beck's Cognitive Therapy: self-defeating thoughts. Teach more adaptive thoughts to replace these.

Biotherapies: use medical science to tx psychopathology

Psychosurgery (Lobotomy, Deep Lesioning): sever the frontal lobe. / remove portions of brain

ECT: Electric shock passed through brain to reduce depression.

Psychotropics: alter psychological processes and state of mind, specifically to tx psychopathology

Antipsychotics (Neuroleptics): tx delusions, hallucinations, agitation. Phenothiazines. Haldol. Block DA. (side effects: dry mouth, tremors, tardive dyskinesia...)

Anti-Depressants: reduce sadness, hopelessness of depression. SSRI (Prozac, Zoloft. Block reuptake), Tricyclics (Elavil. Increase NE and 5hT), MAOI (Marplan, Nardil. Increase NE and 5hT, inhibit MAO). Side effects

Anti-Anxiety: reduce tension, anxiety, agitation. Barbiturates. Muscle Relaxers. Benzodiazepines (Valium, Ativan. Increase GABA). (Habit forming, OD potential)

Mood Stabilizing Drugs - Lithium: Bipolar only. Reduces highs and lows.

Others

Cognitive-Behavioral Therapy: aims to change thoughts and bxs

Hospitalization: although trend for Deinstitutionalization

Community Mental Health: Target envt and community as whole. Primary, secondary, tertiary

Self Help: books, tapes, etc...

Group Therapy: advantages and disadvantages

Couples/Family Therapy: systems perspective

♥ Don't should on yourselves. Don't should on others.