

Treatment of Mental Illness

Treatment Providers

Psychiatrist	MD; focus on mental illness
Neurologist	MD; brain & nerv. system
Clinical Psychologist	PhD / PsyD; psychotherapy
Counseling psychologist	MA or PhD in counseling
Clinical social worker	MA in social work
Eclectic approach	Combine multiple therapies

Psychotherapy

Psychoanalysis Sigmund Freud	Resolve unconscious conflict via <i>free association</i> & <i>dream interpretation</i> ; initial <i>resistance</i> then <i>transference</i>
Humanistic Therapy Abraham Maslow Carl Rogers	<i>Client/person-centered</i> , positive drive for improvement
Unconditional Positive Regard	Acceptance regardless of thoughts or behaviors
Active listening	Clarify client's views to improve awareness/ <i>insight</i>
Gestalt therapy Fritz Perls	Understand whole situation; <i>empty chair technique</i>
Behavioral Therapy	Response to stimuli & rewards / punishments
Aversive conditioning	Form negative associations to reduce a behavior
Counterconditioning Mary Cover Jones	Replace prior negative associations w/ positive
Exposure Therapy Joseph Wolpe	Reduce emotional response via repeated exposure
Systematic desensitization	Relaxation techniques + gradual exposure
Flooding	Immediate exposure to worst-case scenario

Token economy	Tokens for desired behavior; exchanged for rewards
Cognitive therapy Aaron Beck	Neg. thought patterns & distortions; <i>Cognitive Triad</i> (self, others, future)
Rational-Emotive Behavior Therapy Albert Ellis	Direct; challenge irrational beliefs & predictions; <i>cognitive restructuring</i>
Cognitive Behavioral Therapy (CBT)	Focused, transparent, active; use of " <i>homework</i> "
Couples & Family therapy	Resolve relationship issues
Group Therapy	Indiv. issues, group setting; ↓ isolation ↑ social skills; less focus, neg. behaviors
Self-Help & Support groups	Community & support; may lack training; can be insular

Biomedical

Trepanning/Trephining	Hole in skull releases spirits
Psychopharmacology	Drugs modify thoughts, emotions, & behaviors
Neuroleptics / Antipsychotics	Schizophrenia; block dopamine (Thorazine, Mellaril, Haldol)
Deinstitutionalization	Mass release; 2/3 reduction
Anxiolytics / Anti-anxiety	Reduce heart-rate; <i>benzodiazepines</i> (Valium, Ativan, Xanax) addiction risk
Antidepressants	Boost mood; most common SSRI (Prozac, Celexa, Paxil, Zoloft); many other uses
Serotonin Hypothesis	Low serotonin activity related to depressed mood
Neurogenesis	Growth of new neurons
Mood stabilizers	Bipolar Disorder; Lithium

Electroconvulsive therapy	Brief shocks → seizures which modify brain activity
Transcranial Magnetic Stimulation	Stimulation of brain areas via magnetic coil
Psychosurgery	Destruction of brain regions (very rare); <i>Deep brain stimulation</i> (implant electrode in brain)
Leucotomy / Lobotomy Egas Moniz Walter Freeman	Sever frontal lobe connections; now banned in most places

Evaluating Treatments

Spontaneous remission	Course of illness; passage of time relieves symptoms
Regression to the mean	Change from worst → avg looks like improvement
Therapeutic Alliance	Patient & provider believe in treatment & desire results
Placebo Effect	Belief/expectation provides benefits/improvement
Nocebo Effect	Belief/expectation causes negative effects
Malingering	Claim symptoms persist to prolong attention/treatment
Meta-analysis	Combine & analyze results of multiple studies
Relapse	Recurrence of symptoms after prior improvement
Lifestyle factors	Social support, sleep habits, exercise, mindfulness meditation can prevent/relieve symptoms