

Psychology 020 – April 1, 2008
Chapter 13: Psychological Disorders
Extra Notes

Dissociative disorders

- Breakdown of awareness and integrated memory processes
- 1. Psychogenic amnesia
 - Person responds to a stressful life event with selective memory loss
 - May forget past events, places, people
 - But cognitive processes remain intact
- 2. Psychogenic fugue
 - More profound dissociative disorder
 - Usually triggered by extreme stress
 - Loss all sense of personal identity
 - Lasts from few hours to years
- 3. Dissociative identity disorder
 - “multiple personality disorder”
 - MOST profound dissociative disorder
 - Trauma-dissociation theory explains:
 - Usually extreme trauma in childhood
 - Fragmentation of personal identity and memory
 - Alternate personality
 - Somewhat controversial
 - Research findings
 - With different personalities:
 - Different traits, mannerisms
 - Different illnesses, allergies, visual acuity, voice patterns
 - Different hemisphere dominance
 - Different EEG patterns

Personality disorders

- Causes distress to individual or others
 - A failure of the normal or complete development of the personality
 - Stable, inflexible, maladaptive traits or patterns of behaviour
1. Odd/Eccentric Personality Disorders
 - Paranoid personality disorder:
 - Mistrustful and suspicious
 - Schizoid personality disorder
 - Absence of close interpersonal relationships
 - Schizotypal personality disorder
 - Uncomfortable in close relationships
 - Cognitive and perceptual distortions (no hallucinations)
 - Eccentric behaviour
 2. Anxious/Fearful personality disorders
 - Avoidant personality disorder
 - Feel inhibited and socially inadequate
 - Obsessive compulsive personality disorder
 - Preoccupation with cleanliness and orderliness
 - Distinct from OCD
 - Dependent personality disorder
 - Excessive need to be cared for
 3. Dramatic/Emotional/Erratic Personality disorder
 - Borderline personality disorder
 - Instability in moods, relationships, and self-image
 - Histrionic personality disorder
 - Excessive need for attention (erratic behaviour)
 - Antisocial personality disorder
 - Deceitful, impulsive, aggressive, reckless, failure to conform to social norms, lack of remorse.
 - Narcissistic personality disorder
 - Grandiosity, arrogant, lacks empathy
 - Case study
 - Arnold: 44 year old immigrant
 - Sexually abused (mother)
 - Abandonment by father
 - Later abused (held captive by father)
 - Also severe panic disorder, depression, substance abuse, paranoia, criminal record (sociopath?), unable to work, grandiose personality “THE Arnold”, doesn’t need help or anything from anyone
 - To need = pain, rejection, anger
 - Splendid isolation

- Sexual orientation confusion
- Sadomasochistic sexual practices
- Splitting of thoughts and feelings
- Many contradictions
- Long-term psychodynamic theory
- After 2 years: working, in relationship, no longer alcoholism, or panic attacks.

Borderline Personality disorder

- M:F 3:1
- Some are also psychopaths
- Lack of conscience, empathy, and remorse
- Impulsive, unable to delay gratification
- Lack of emotional attachment to others
- Often charming, intelligent
- Unable to benefit from learning
- Not diagnosed until 18 years
 - But, antisocial behaviour necessary in childhood/adolescence for diagnosis.
- Current Canadian investigation (Picton Farm)
- Jeffrey Dahmer “Milwaukee Monster”
 - The crimes: serial rape and murder, pedophilia, necrophilia, cannibalism
 - The profile: lack of conscience or remorse? Obsessive preoccupation with death (since childhood), sexual fantasies with corpses, compulsive acting out of fantasies, asocial (introverted and lacked social contacts), kept victims as companions
 - Atypical characteristics (for antisocial personality disorder)
 - High anxiety
 - Alcohol abuse

Treatment of personality disorders

- Psychodynamic therapy
 - Focus on integrating personality (thoughts, feelings, behaviour)
 - Focus on integrating past traumatic experiences
 - Develop insight into causes of difficulties
 - Link past experiences to current functioning
- CBT
 - Focus on challenging maladaptive thoughts
 - Develop more adaptive behaviours
- Medication
 - Manage symptoms of anxiety or depression
 - Little long term effectiveness unless combined with psychotherapy