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# GENERAL PSYHOPATHOLOGY



# Basic Terms in Psychiatry

- **Psychiatry** studies the causes of mental disorders, gives their description, predicts their future course and outcome, looks for prevention of their appearance and presents the best ways of their treatment
- **Psychopathology** describes symptoms of mental disorders
- **Special psychiatry** is devoted to individual mental diseases
- **General psychiatry** studies psychopathological phenomena, symptoms of abnormal states of mind:
  1. consciousness
  2. perception
  3. thinking
  4. memory
  5. mood (emotions)
  6. intelligence
  7. motor
  8. personality

# Disorders of Consciousness

- **Consciousness** is awareness of the self and the environment
- Disorders of consciousness:
  - qualitative
  - quantitative
    - short-term
    - long-term
- **Hypnosis** – artificially incited change of consciousness
- **Syncope** – short-term unconsciousness

# Disorders of Consciousness

- **Quantitative changes of consciousness** mean reduced vigility (alertness):
  - somnolence
  - sopor
  - coma
- **Qualitative changes of consciousness** mean disturbed perception, thinking, affectivity, memory and consequent motor disorders:
  - delirium (confusional state) – characterized by disorientation, distorted perception, enhanced suggestibility, misinterpretations and mood disorders
  - obnubilation (twilight state) – starts and ends abruptly, amnesia is complete; the patient is disordered, his acting is aimless, sometimes aggressive, hard to understood
    - stuporous
    - vigilambulant
    - delirious
    - Ganser sy

# Disturbances of Perception

- Perception is a process of becoming aware of what is presented through the sense organs
- Imagery means an experience within the mind, usually without the sense of reality that is part of reality
- **Pseudoillusions** – distorted perception of objects which may occur when the general level of sensory stimulation is reduced
- **Illusions** are psychopathological phenomena; they appear mainly in conditions of qualitative disturbances of consciousness (missing insight)
- **Hallucination** are percepts without any obvious stimulus to the sense organs; the patient is unable to distinguish it from reality

# Disturbances of Perception

## Hallucinations:

- auditory (acousma)
- visual
- olfactory
- gustatory
- tactile (or deep somatic)
- extracampine, inadequate
- intrapsychic (belong rather to disturbances of thinking)
- hypnagogic and hypnopompic (hypnagogic)

**Pseudohallucinations** - patient can distinguish them from reality



# Disorders of Thinking

- Thinking
- Cognitive functions
- Disorders of thinking:
  - quantitative
  - qualitative



# Quantitative Disorders of Thinking

## **Quantitative (formal) disorders of thinking:**

- pressure of thought
- poverty of thought
- thought blocking
- flight of ideas
- perseveration
- loosening of associations
- word salad - incoherent thinking
- neologisms
- verbigeration

# Qualitative Disorders of Thinking

**Qualitative disorders of thought** (content thought disorders):

- **Delusions:**

- a) belief firmly held on inadequate grounds,

- b) not affected by rational arguments

- c) not a conventional belief

- **Obsessions** (obsessive thought) are recurrent persistent thoughts, impulses or images entering the mind despite the person's effort to exclude them. Obsessive phenomena in acting (usual as senseless rituals – cleaning, counting, dressing) are called **compulsions**.

# Qualitative Disorders of Thinking

## Division of delusions:

- according to onset
  - a) primary (delusion mood, perception)
  - b) secondary (systematized)
  - c) shared (folie a deux)
- according to theme
  - a) paranoid (persecutory) - d. of reference, d. of jealousy, d. of control, d. concerning possession of thought
  - b) megalomaniac (grandiose, expansive) – d. of power, worth, noble origin, supernatural skills and strength, amorous d.
  - c) depressive (micromaniac, melancholic) – d. of guilt and worthlessness, nihilistic d., hypochondriacal d.
  - d) concerning the possession of thoughts
    - thought insertion
    - thought withdrawal
    - thought broadcasting

# Disorders of Memory

- **Sensory stores** - retains sensory information for 0.5 sec.
- **Short - term memory (working memory)** - for verbal and visual information, retained for 15-20 sec., low capacity
- **Long-term memory** – wide capacity and more permanent storage
  - declarative (explicit) memory – episodic (for events) or semantic (for language and knowledge)
  - procedural memory – for motor arts
  - priming – unconscious memory
  - conditioning – classic or emotional



# Disorders of Memory

## Disorders of memory:

- Amnesia – inability to recall past events
- Jamais vu, déjà vu
- Confabulation, amnesic disorientation, Korsakov's syndrome
- Pseudologia phantastica
  
- Hypomnesia
- Hypermnesia



# Disorders of Attention

- Concentration
  - Capacity
  - Tenacity
  - Irritability
  - Vigility
- 
- Hypoprosopexia (global, selective)
  - Hyperprosopexia
  - Paraprosopexia



# Disorders of Mood (Emotions)

Normal affect – brief and strong emotional response

Normal mood – subjective and for a longer time lasting disposition to appear affects adequate to a surrounding situation and matters discussed

Higher emotions:

- intellectual
- aesthetic
- ethic
- social



# Disorders of Mood (Emotions)

**Pathological affect** – very strong, abrupt affect with a short change of consciousness on its peak

**Pathological mood** – two poles:

- manic
- depressive

**Phobia** – persistent irrational fear and wish to avoid a specific situation, object, activity:

- agoraphobia
- claustrophobia
- social phobias
- hipsophobia
- aichmophobia
- keraunophobia

**Depersonalization** – change of self-awareness, the person feels unreal, unable to feel emotion



# Disorders of Mood (Emotions)

- **Pathological mood:**
  - origin – based on pathological grounds, no psychological cause
  - duration – unusually long-lasting
  - intensity – unusually strong, large changes in intensity
  - impossibility to be changed by psychological means
  
- **Pathological features of mood:**
  - euphoria
  - expansive
  - exaltation
  - explosive
  - mania
  - hypomania
  - depression
  - apathy (anhedonia)
  - blunted, flattened affect
  - emotional lability
  - helpless



# Intelligence Disorders

- Intelligence:
  - abstract
  - practical
  - social
- Intelligence quotient (IQ):  
$$\text{IQ} = (\text{mental age} : \text{calendar age}) \times 100$$
- Disorders of intellect:
  - mental retardation
  - dementia

# Motor Disorders

**Motor disorders** occur frequently in mental disorders of all kinds, especially in catatonic schizophrenia.

## ■ quantitative:

- hypoagility
- hyperagility
- agitated behaviour

## ■ qualitative:

- mannerisms
- stereotypies
- posturing
- waxy flexibility
- echopraxia
- schizophrenic impulse
- negativism
- short-circuit behaviour
- automatism
- agitation
- tics
- abulia
- compulsions



# Disorders of Volition

## **Disorders of volition:**

- hypobulia
- abulia
- hyperbulia



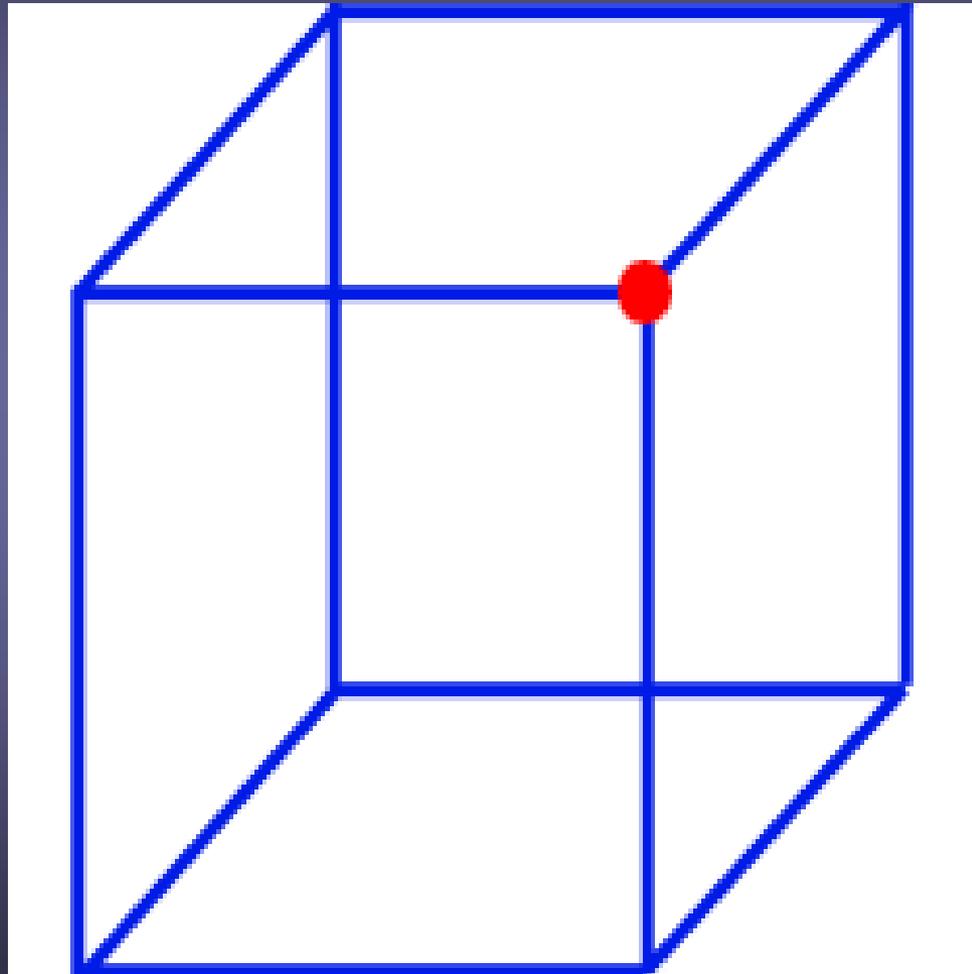
# Disorders of Personality

- **Personality** means a complex of persistent mental and physical traits of a person
- Disturbances of personality:
  - transformation of personality
  - appersonalization
  - multiple personality (alteration of personality)
  - specific personality disorder
  - deprived personality

# Multistable perception



# Multistable perception



# Multistable perception



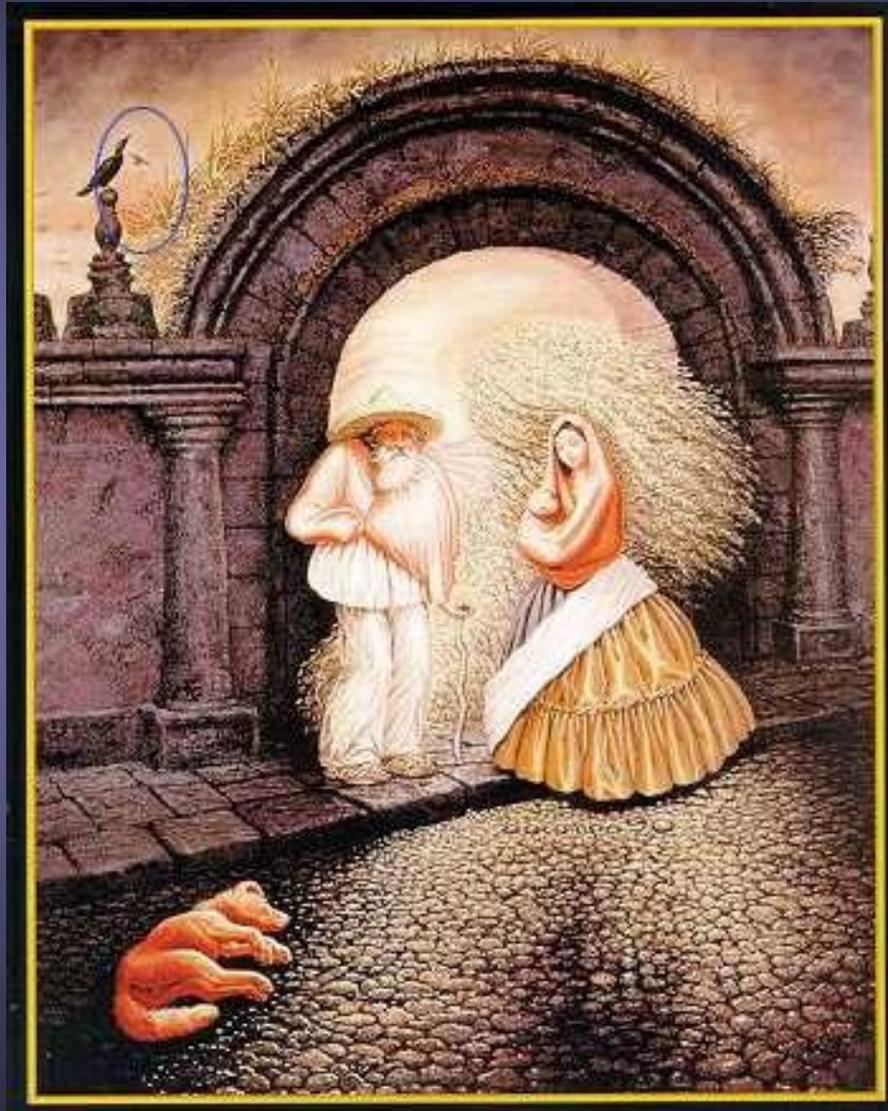
# Multistable perception



# Multistable perception

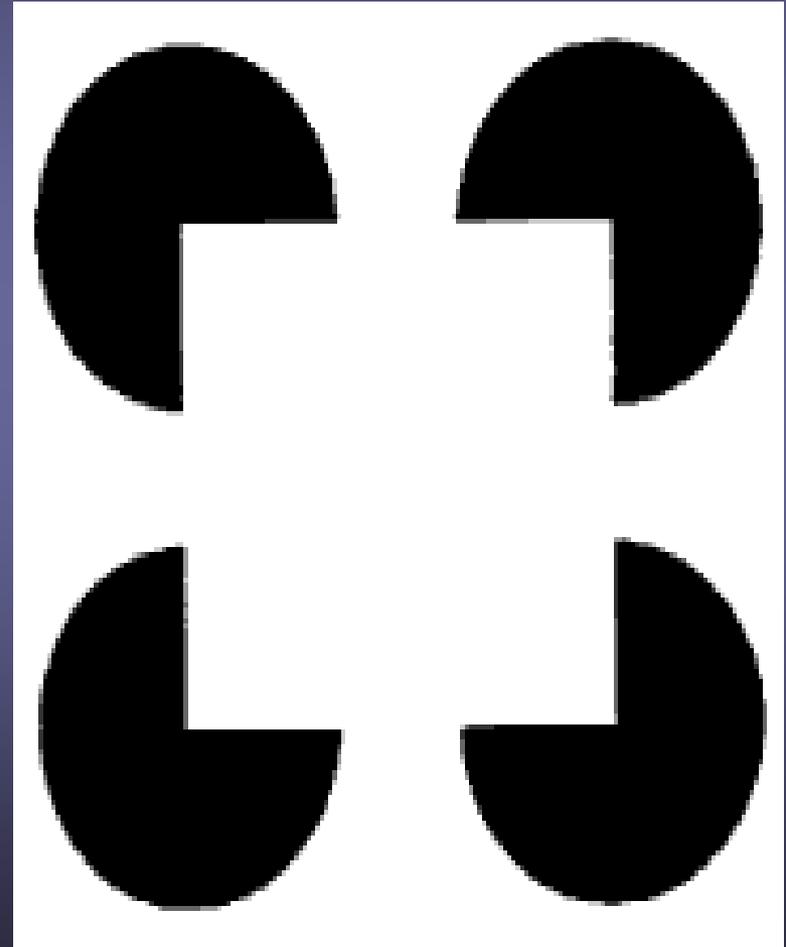
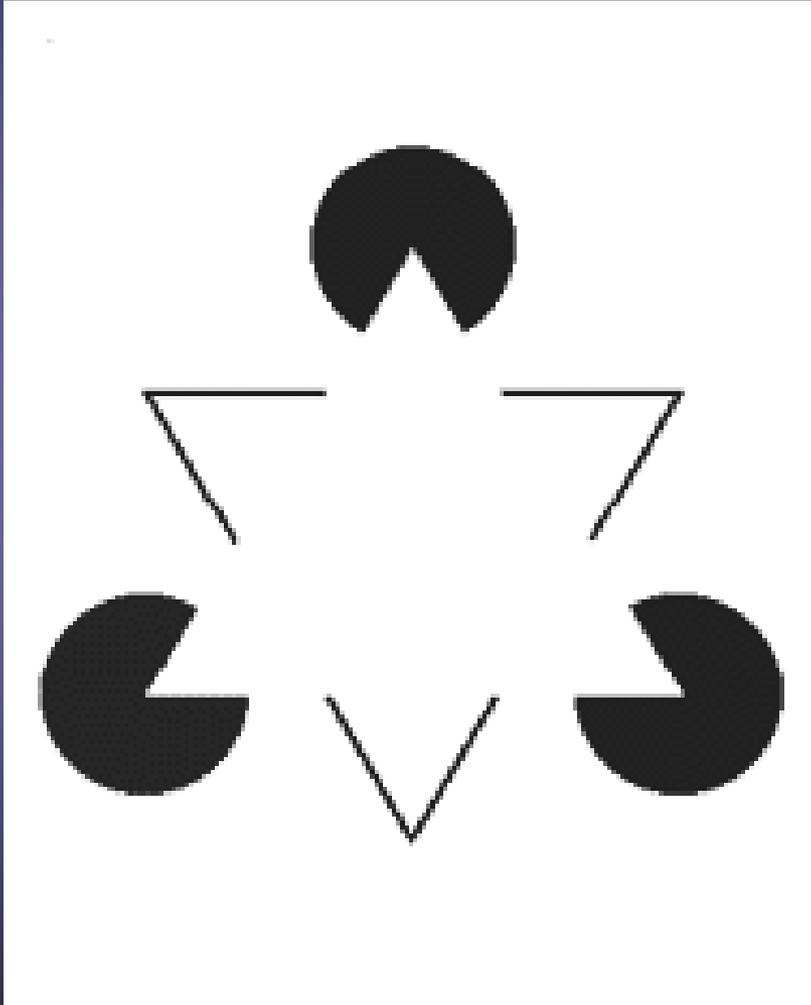


# Multistable perception

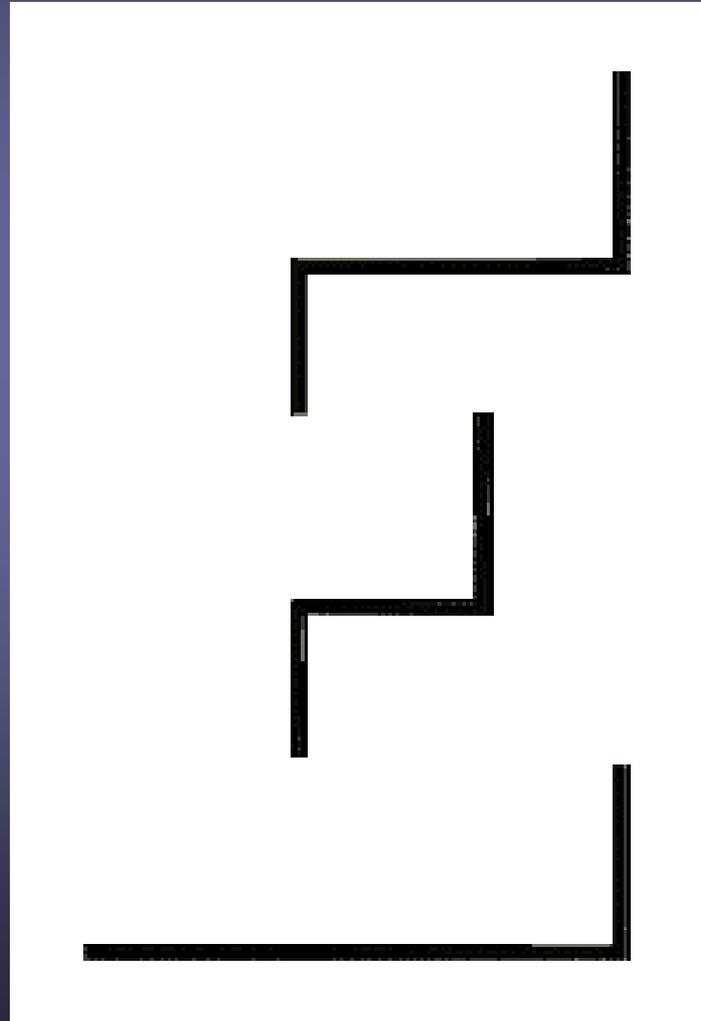


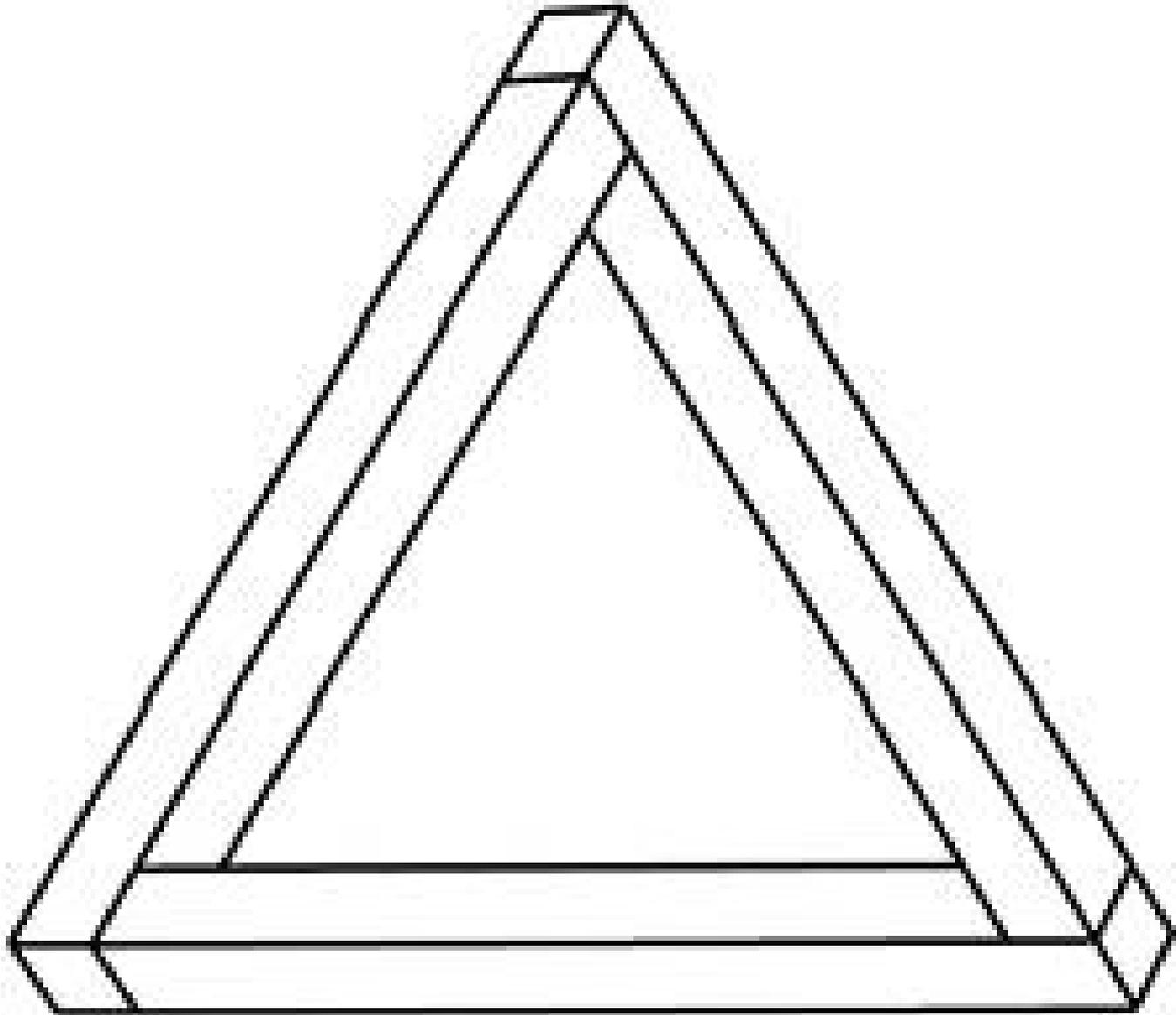


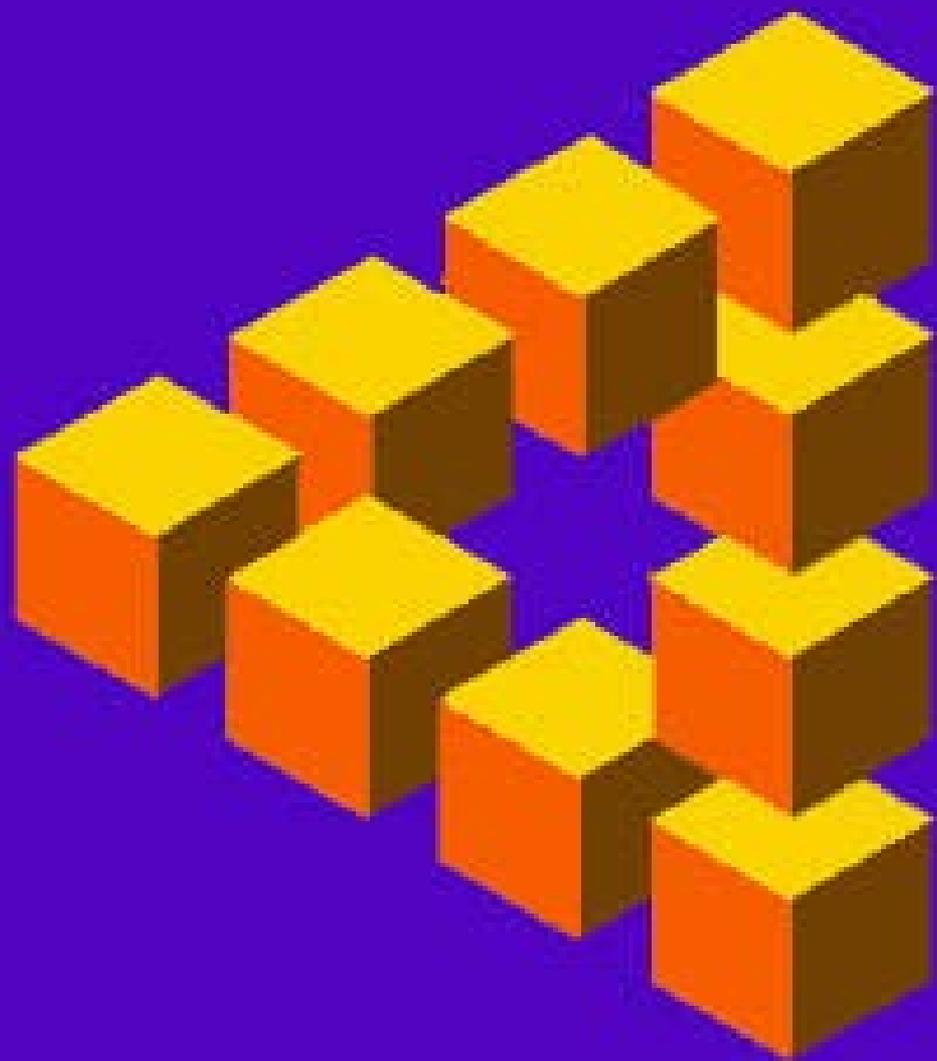
# Mental construction

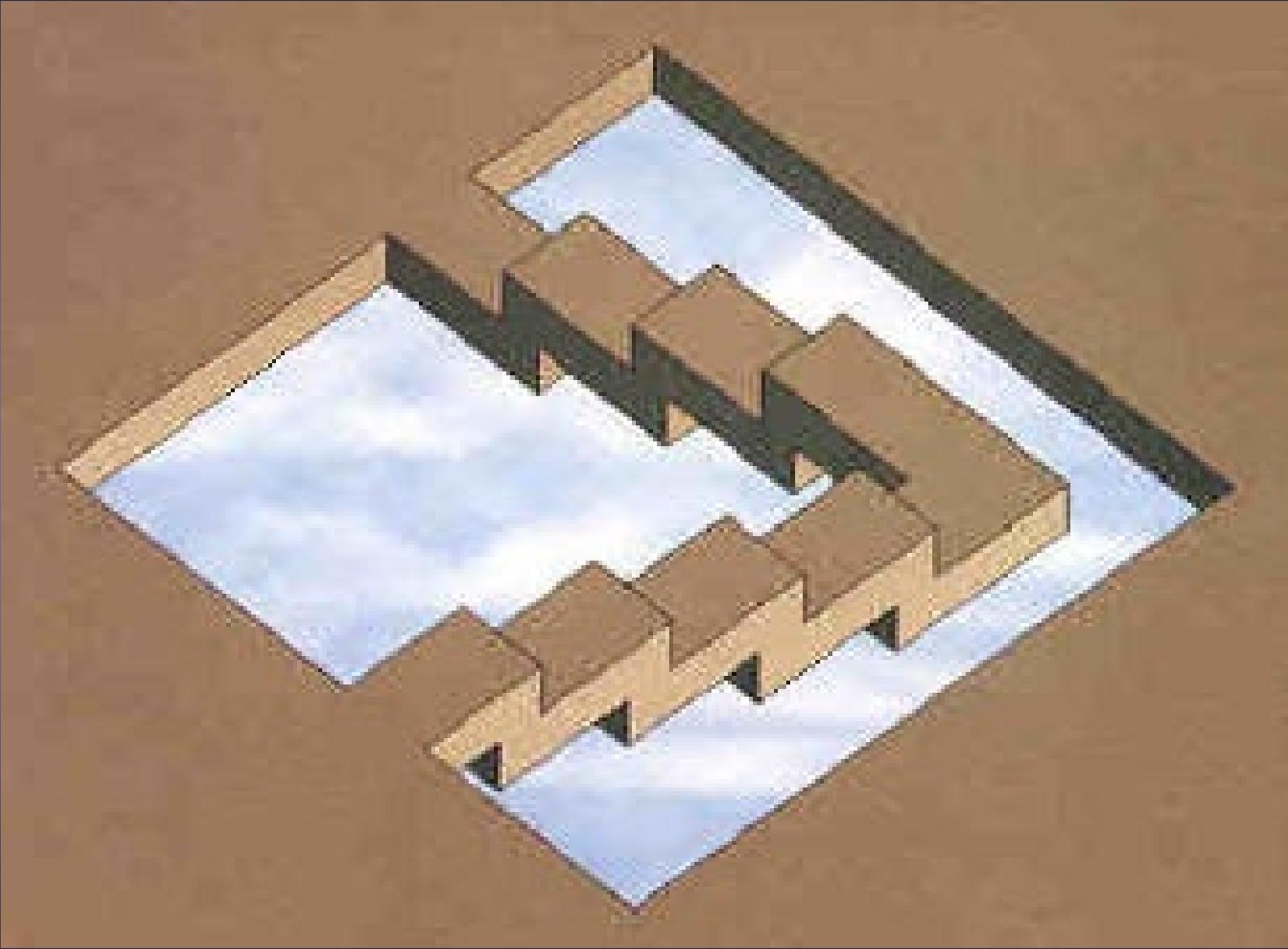


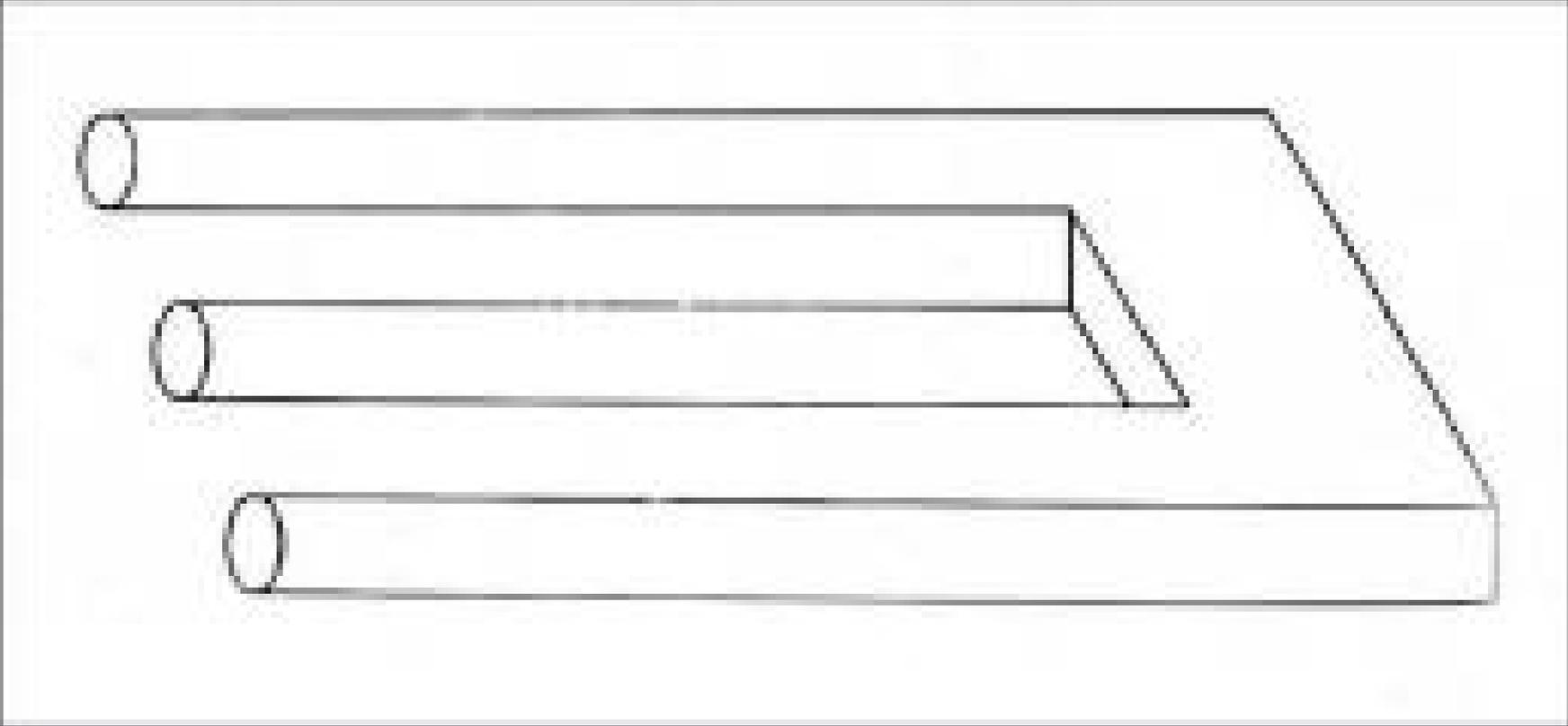
# Mental construction











# Instruction to manufacturing (straight from the hell ...)

