

- Pleasure principle
 - Entirely unconscious
- Ego
 - Reality principle
 - Mediate id and superego
 - Repression defense mechanism
 - Ego defenses adaptive in childhood but maladaptive later in life
- Superego
 - Morality principle
 - Conscience
- Psychoanalytic techniques/ therapy
 - Help uncover past trauma & unconscious conflicts
 - Promote insight
 - Techniques
 - Free association
 - Interpretation
 - Catharsis
 - Reliving past repressed feelings to resolve conflicts
 - Have to achieve emotional insight as well as intellectual insight
- Object Relations Traditions
 - Rejected Freud's biologism
 - Emphasis on early attachment figures
 - Introjects- internalized representations of the self
 - More focus on fostering emotional safety
 - Corrective emotional experience
- Self Psychology
 - Many problems that other theories don't fully explain
 - Clients describe
 - Feelings of emptiness
 - Problems w/ narcissism and chronic need for validation
 - Problems in sense of self and self-esteem
 - Heinz kohut
 - Defenses protect from anxiety and help self-esteem stay intact
 - Attachment figures idealized first, then gradually and non-traumatically deidealized

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- Many disease exhibit depressive symptoms that are associated with the illness
- Unipolar Depression Prevalence
 - 20% of all adults experience an episode at some point in their life
 - Average age of onset is 19
 - Rates of depression higher among poor than wealthy people
 - Hispanic americans and African americans are 50% more likely to have recurrent episodes
 - Twice as likely in females than males
- Biological Models
 - Genetics
 - Family pedigree, twin studies
 - Gene studies
 - Biochemical
 - Low levels of neurotransmitters
 - Serotonin
 - Norepinephrine
 - Hypothalamic pituitary adrenal pathway tends to be overly reactive in depressed people
 - Causes excessive release of cortisol and related hormones
 - Brain Circuitry
 - Depression-related brain circuit
 - Prefrontal cortex, hippocampus, amygdala, subgenual cingulate
 - Operates abnormally in depressed people
 - Activity and blood flow unusually low and high in other parts of prefrontal cortex
 - Undersized hippocampus and production of new neurons is low
 - High activity and blood flow in amygdala
 - Problematic communication between structures
- Biological Treatments
 - Antidepressants
 - Monoamine oxidase inhibitors (MAOIs)
 - Phenelzine
 - Slows production of enzyme that degrades serotonin and norepinephrine

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- Have to avoid consumption of foods that have tyramine which can elevate blood pressure (cheese, wine, bananas)

■ Tricyclics

- Share a three-ring structure
- Act on neurotransmitter reuptake mechanisms
- Take time for improvements to go into effect
- High rate of relapse after stopping use

■ Second-Generation Antidepressants

- Rival tricyclics in effectiveness and speed of action

- Fewer side effects

- Weight gain

- Drowsiness

- Reduced libido

- Target fewer neurotransmitters

- Selective Serotonin Reuptake Inhibitors (SSRIs)

- e.g. prozac, zoloft, lexapro

- Increase serotonin specifically, w/o affecting other neurotransmitters

- Selective Norepinephrine Reuptake Inhibitors (SNRIs)

- e.g. strattera

- Increases norepinephrine activity only

- Serotonin-Norepinephrine Reuptake Inhibitor

- e.g. effexor

- Brain Stimulation

■ Electroconvulsive Therapy (ECT)

- Two electrodes pass 65-140 volts of electricity through the brain for half a second or less
- Causes a brain seizure
- 6-12 treatments over 2-4 weeks
- Patients given strong muscle relaxants to minimize convulsions and prevent broken bones
- Can be very effective and fast-acting
- 50-80% of patients show improvement
- Potential for memory loss and neurological damage

■ Vagus Nerve Stimulation

- Attempts to mimic ECT without the undesired trauma
- Pulse generator implanted under skin of chest

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- Confronting avoidance
 - Imagining exposure, in vivo exposure
 - Eliminating worry behaviors
 - Anxious behaviors to prevent something bad from happening
 - Reassurance seeking
- Biological explanations
 - Neurochemical
 - 1950s discovery of benzos decrease anxiety
 - Receive GABA
 - Brain circuitry
 - Fear circuit v active
 - Low GABA activity
 - Prefrontal cortex, amygdala
- Pharma treatment
 - Benzos
 - Less addictive, less side effects, bind to receptor sites in fear circuit increase GABA
 - Short-lived
 - Physical dependence
 - Bad interactions w/ alcohol + antidepressants
 - Antidepressants
 - Not as fast acting
 - Increase serotonin and norepinephrine
 - Improve function of fear circuit

Social Anxiety

- Severe, persistent, irrational
- Fear of being negatively evaluated
- Social situations provoke anxiety
- Lasts at least 6 months
- Causes avoidance of social situations
- High prevalence
 - Late childhood to early adolescence onset
- cog/behav exp
 - Dysfunctional beliefs
 - Unrealistic high social standards
 - Believe they're socially unskilled/ awkward
 - Believe behavior will have bad consequences
 - Can be caused by low self-esteem
 - Behavioral