



EA0110032 –Psychiatry

Block of 60 hrs., credit + exam

Anotation:

Basic psychopathological phenomena in psychiatry. Examination of the mental state. Psychotic disorders. Mood disorders. Organic brain syndromes. Delirium. Anxiety disorders and neuroses. Child and adolescent psychiatry. Stress reaction and adjustment disorders. Psychological first aid in acute states. Prevention of mental illness. Social work in psychiatry. Neuroleptic malignant syndrome. Serotonin syndrome. Suicide. Aggression and violence in psychiatry. Labeling (stigmatization), destigmatization. Practicals in the ward. Visit of mental health hospital in Dobřany. Visit of mental health centre – community based service in Ledovec organization.

Sylabus:

1. Phenomenology of mental disorders

Basic psychopathological phenomena in psychiatry. Explanation of those basic phenomena such as vigility (alertness) and lucidity (consciousness), disorders of thinking, disorders of perception, mood disorders, appropriate and inappropriate (incongruous) emotions. Anxiety, phobia (fear) obsessional state, compulsion. Sleeping disorders. Cognitive functions, executive functions, memory impairment. Aggression, suicide, self-harm. Craving, addiction. Specific psychopathology in childhood, adolescence, adulthood and older people.

2. Diagnostic methods in psychiatry

Present mental state examination, clinical interview, how to interview the patient. Observation. Empathy. Transference & counter-transference. Objective examination methods in psychiatry. Position of neuroimaging in psychiatry – magnetic resonance (MRI) and computer tomography (CT). Functional neuroimaging, such as SPECT, BOLD MRI, PET. Use of diagnostic scales in psychiatry. Structured diagnostic interview. Self-rating scales. Psychological examination. Different types of psychological testing.



3. Psychopharmacology

Basic groups of psychiatric medication. Antidepressants. Antipsychotics. Anxiolytics. Hypnotic and sedative medications. Anti-dementia medications. Stimulants. Basic mechanisms of action. Issues associated with iatrogenically induced addiction. Important interactions of medications. Off label prescription.

4. Organic mental disorders

Memory impairments. Neurodegenerative type and vascular type of dementia. Dementia in other diseases classified elsewhere. Organic amnesic syndrome. Delirium. Mild cognitive disorder. Problems associated with legal capacity in persons with dementia. Pharmacological treatment of delirium. Regimen approach in delirium. The use of restraint measures. Anti-dementia medications. Cognitive training in persons with dementia.

5. Addictions

Definition of addiction and drug abuse. Tolerance & withdrawal syndrome. Craving. Social impact of addiction. List of the most commonly abused psychotropic substances. Behavioral and regimen treatment of addiction, cue – exposure therapy. Basic principles of harm reduction approach. Aversion therapy.

6. Psychotic disorders

Phenomenology of schizophrenia. Clinical manifestation, prevalence, heritability. Positive & negative symptoms. Catatonic state. Delusional disorder. Differential diagnostic of psychotic disorders. Antipsychotic pharmacological treatment. Depot medications. Neuroleptic malignant syndrome. Relaps prevention programmes.

7. Mood disorders

Phenomenology of depression and mania. Prevalence and aetiology of unipolar depression (major depression). Antidepressants. Bright light therapy, electroconvulsive therapy, vagus nerve stimulation, transcranial magnetic stimulation. Psychotherapy of depression. Bipolar affective disorder, aetiology & prevalence. Mood stabilizers, lithium. Persistent mood disorders.



8. Anxiety disorders and neuroses

Phenomenology of anxiety disorders. Aetiology and pathophysiology of anxiety disorders, „flight & fight reaction“. Phobias. Panic disorder, generalized anxiety disorder. Obsessive compulsive disorder. Posttraumatic stress disorder. Acute stress reaction. Adjustment disorders. Somatoform disorders, somatization disorder. Psychotherapy in anxiety disorders with emphasis on cognitive – behavior approach. Medication in anxiety disorders, anxiolytics.

9. Child & adolescent psychiatry

Attention-deficit/ hyperactivity disorder (ADHD), its aetiology, prevalence, clinical manifestation. Autism spectrum disorders. Tics disorder, Gilles de la Tourette syndrome. Eating disorders. Overlaps of child & adolescent psychiatry with school psychology, behavioral and psychosocial interventions in conduct disorders, social work for children & adolescents. Specific developmental disorders of scholastic skills. Psychoterapy in children & adolescents. Specific psychiatric medications used in children & adolescents with the emphasis on stimulants. Child abuse & neglect syndrome. State children welfare institution and its cooperation with child & adolescent psychiatry.

PRACTICALS

1. Demonstration of a patient with neurosis

How to carry out a psychiatric interview, analysis of psychopathology, feedback.

2. Demonstration of a patient with psychosis

How to carry out a psychiatric interview, analysis of psychopathology, feedback.

3. Psychological examination

Indication for psychological examination, formulation of the principle goals of such an examination Particular types of psychological testing. The role of clinical psychologist in psychiatric team. The role of psychologist in a healthcare facility.

4. Social work in psychiatry



Social aspects of mental disorders. Work disability from psychiatric indication, types of social support. Legal capacity in psychiatric patients, lacking legal capacity in people with mental illness, the role of a guardian. Field service.

5. Destigmatization, psychiatric care reform, history psychiatry

Meaning of stigma (label). Multidisciplinary team. Mental health centre – community based service. Psychiatric care milestones in modern medicine.

6. Child & adolescent psychiatry

Examination of a patient hospitalized in the children's ward, analysis of psychopathology, feedback.

7. Personality disorders

Basic clusters of personality psychopathology. Specific personality disorders. Therapeutic feasibility in personality disorders. Legal capacity and responsibility in people with personality disorders. Communication with a patient with the diagnosis of personality disorder.

8. Delirium, acute psychosis

Aetiology of different delirious states, the role of psychiatrist in the management of delirium. Interdisciplinary cooperation in the medical care about a patient in delirium. Specificity of „delirium tremens“ being a part of alcohol withdrawal. Pharmacological management of delirious states. Regimen measures, the use of restrictions. Acute psychotic states, pharmacological intervention in acute psychosis.

9. Suicide, aggression

Main reasons for suicide. Emergency care in people with high suicide risk or committing suicide. Main reasons of aggression against others. De-escalation.



Learning outcomes, form of course completion

Basic orientation in the classification of mental disorders. Deepening knowledge of psychopharmacology. Ability to perform a psychiatric examination and prepare a protocol of psychiatric examination. Ability to recommend psychotherapy. Basic orientation in the mechanism of action of particular psychotherapeutic directions. Deepening the ability to communicate with the patient. Ability to communicate with a person with mental illness.

Recommended literature:

Goldberg David, Gask Linda and Morris Richard. 2008. Psychiatry in Medical Practice 3rd Edition. Routledge. ISBN 978-0-415-42544-5

Sadock, Benjamin J., Virginia Alcott Sadock, Pedro Ruiz, and Harold I. Kaplan. 2017. *Kaplan and Sadock's Comprehensive Textbook of Psychiatry*. 10th ed. Surrey, UK: Wolters Kluwer.

Requirements for student's self-study: Recommended literature, preparation of presentations on the chosen topic

Way of communication with students: SIS, individual communication, at the time of distance learning MS Teams

Structure and form of regular bed-side teaching:
(description characterizing the teaching process)

- independent processing of patient's history and examination of present mental state
- assessment of present mental state, differential diagnostic consideration
- diagnosis and treatment proposal
- reporting to a consultant
- possibility to access patients' medical records
- communication with patients
- training in communication with a mentally ill person
- principles of processing medical records in psychiatry



Assessment of students' knowledge

Oral exam, written elaboration of a psychiatric examination of an assigned patient.

To be awarded the credit, it is necessary to participate in practical classes and to write a protocol of the psychiatric examination of the assigned patient. The protocol is defended by the student. The submitted psychiatric examination has the appropriate structure:

history (anamnesis), current disease, status praesens psychicus (present mental state), differential diagnosis, probable diagnostic conclusion and therapeutic plan.

The oral exam consists of answering questions from three clusters of topics.