



Chapter 14: Psychopathology (psychological disorders)

Module 14.2: "Neuroses"

Psychology 100

Introduction to Psychology

Listen to the audio lecture while viewing these slides

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Psyc 100 – Introduction to Psychology Anxiety Disorders (these and next 2 categories used to be "neuroses")

- Marked by excessive apprehension, worry that impairs normal functioning
- Generalized anxiety disorder: "Free-floating," unrealistic anxiety, chronic worrying lasting over 6 months
 - May involve physical problems such as diarrhea
- Panic disorder: Recurrent discrete episodes or attacks of extremely intense fear or dread
 - Many physical symptoms such as chest pains
 - May be associated with agoraphobia (fear of public places)

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Anxiety Disorders (contd.)

- Obsessive-compulsive disorder: Persistent, uncontrollable thoughts (obsessions) or compelling need to perform repetitive acts (compulsions)
 - Examples: Excessive cleaning, checking
- Phobia: Agoraphobia: places w/o refuge
- Specific phobia disorder: Highly focused fear of a specific object or situation
 - Example: Irrational fear of elevators

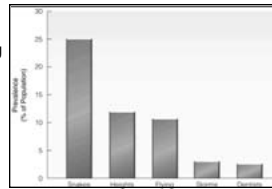


Fig. 14.4

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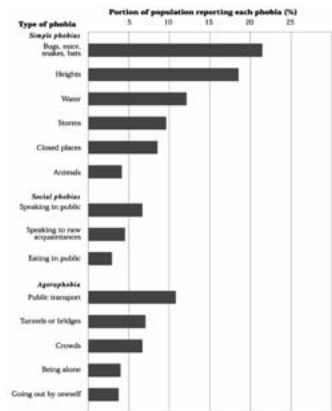


Fig. 14.5

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Somatiform Disorders

- Psychological disorders that focus on the physical body
- Hypochondriasis: Long-lasting preoccupation with idea that one has a serious disease, based on misinterpretation of normal body reactions
- Somatization disorder: Long-lasting preoccupation with body symptoms that have no physical cause
- Conversion disorder: Presence of real physical problems that seem to have no physical cause
 - Examples: Blindness, paralysis

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Fig. 14.6



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Dissociative Disorders

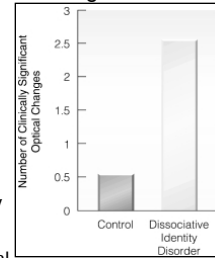
- Characterized by separation, or dissociation, of conscious awareness from previous thoughts or memories
- Dissociative amnesia: Inability to remember important personal information
 - Generally psychological in origin
- Fugue states: Amnesia accompanied by flight

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A Controversial Case: Dissociative Identity Disorder

- Individual alternates between what appear to be two or more distinct identities or personalities
 - Also known as multiple personality disorder
- Recognized by DSM-IV, but not all clinicians believe in it
 - Some symptoms can be faked; others, such as optical changes, less easy to fake
 - Causes unclear, but may relate to sexual or physical abuse in childhood

Fig. 14.7



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Fig. 14.8



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