

Schizophrenia

Psychological Treatments

CBT



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Cognitive Behavioural Therapy

- Psychological treatments, such as cognitive behavioural therapy (CBT), can help people with schizophrenia to cope better with the symptoms of hallucinations or delusions.
- Psychological treatments can also help to treat some of the negative symptoms of schizophrenia, such as apathy or a lack of volition/hedonism.

CBT

- Cognitive behavioural therapy (CBT) is based on the idea that most unwanted thinking patterns, and emotional and behavioural reactions are learnt over a long period of time.

CBT

- The CBT approach to treatment differs slightly from conventional CBT methods. The aims of this therapy are as follows:
- To challenge and modify delusory beliefs
- To help the patient to identify delusions
- To challenge those delusions by looking at evidence
- To help the patient to begin to test the reality of the evidence

CBT

- Most people will require between eight to 20 sessions of CBT over the space of six to 12 months. CBT sessions usually last for about an hour.
- This type of treatment has been shown to be effective for reducing the positive symptoms of schizophrenia, for reducing relapse and for enhancing recovery when schizophrenia is diagnosed early.

CBT

- CBT strategies to challenge & help modify delusory beliefs
 - Identify delusions
 - Challenge evidence on which delusions are based
 - Design 'experiments' to test reality of this evidence

CBT

- Chadwick & Lowe (1993) – significant reductions in delusions in 10 out of 12 patients
- Normalising strategies where patient is taught to understand the nature of schiz. symptoms
 - Challenge ‘catastrophising’ beliefs about schizophrenia
 - Help patient feel that symptoms are understandable and ‘normal’
- Helps 70% of patients although other 30% may deteriorate (Kingdon & Turkington, 1996)

CBT- Evaluation ✓

- ✓ Gould et al. carried out a meta-analysis of seven studies and found a significant decrease in the positive symptoms of Sz.
- ✓ Kuipers et al. found that when combined with antipsychotic drugs there was a lower drop out rate and greater patient satisfaction.

CBT- Evaluation ✕

- ✕ Doesn't work for everybody i.e. not suitable when the patient are deluding as they cannot fully engage with the therapy
- ✕ CBT for Sz works by generating less distressing explanations for negative experiences rather than eliminate them completely.

Behavioural

- **Implosion**- Extinguishing anxiety by inducing the client to imagine intensely anxiety-provoking scenes that, because they produce no harmful consequences, lose their power to induce fear.
- **Flooding**- Extinguishing anxiety by exposing the clients to actual fear-producing situations that, because they produce no harmful consequences, lose their power to induce fear.
- **Modeling**- Exposing clients to desired behaviour that is modeled by an other person, and rewarding the client for imitating that behaviour.

Behavioural

- ✓ Effective treatments
- ✓ Cognitive sense
- ✓ Patient responsible

- × Unethical?
- × Impractical methodology?
- × Restricted application