Disorders of memory, thinking, intellect, motion - will sphere, emotional disorders.



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Memory -

is considered by psychologists as kind of activity, which provides memorizing, keeping, retention, forgetting. It gives opportunity to gather the information and on basis of experience to use it later.

Types of memory:

- figurative possibility to memorise figures according to sense organs.
- Kinesthetic sequence, formule of actions.
- Emotional memory
- Short –term memory. Long term memory

Quantative disorders:

- Hypomnesia decreasing of memory
- Hypermnesia increasing of memory
- Amnesia loss of memory

Qualitive disorders:

- Fixative amnesia loss of capacity to memorise new or certain events. Previous events are kept in memory.
- Amnestic disorientation one of the main components of Korsakoffs psychosis, as result of brain trauma, atherosclerotic changes, poisoning by CO2.

- Retrograde amnesia loss of memory on events which took place before psychosis or disease. Could be on few seconds, minutes, months, years.
- Anterograde amnesia.- on the events, which took place after psychosis or disorder of consciousness.
- Retroanterograde amnesia. before and after psychosis.
- Total a.
- Fragmentive amnesia. during delirium.

- Specific alcoholic amnesia. For its precursor could be special sign for early alcoholism. Its a loss of memory on some details during alcohol drinking.
- Affectogenic amnesia. connected with stress, psychotrauma. During pathological affect, twilight disorder of consciousness.
- One can find amnesias during disorders of consciousness: somnolence, sopor, coma, during twilight conditions, pathologial affects, intoxications, vascular diseases, after traumas, epilepsy, ECT.

- Pseudoreminiscence disorder of events localization in memory, "illusions of memory". Gaps in memory are filled with events which took place in life.
- Confabulations pathological pictures, with which "amnestic windows" are fill in never happen in their life.
- Progressive amnesia gradually decreasing of memory.
- Ekmnesia events from the past are feels as present.

- Disorders of form of thinking:
- Rigidity complicated change of one topic to another, long fixation on first association. Language is slow. Patients with epilepsy retardation.
- stop of thinking. Patients speaks, during conversation shut up on few minutes, after that begin to speak again."emptiness appeares in my head, as someone cut off my thinking".

 Consciousness during it is not disordered. During schizophrenia.

- Productive disorders of thinking.
- Obsessive----overvalued ideas----delusions.
- Obsessive could be thinking, fears (phobias), movements.

- Overvalued ideas when for some fact a very special meaning is given, but there must be a real beginning.
- Dysmorphophobias -which are comes into dysmorphomanias – they are sure that have physical insufficiency, bad smell, think that people are watching on them, discuss them, its accorded by bad mood. One of its syndroms is "anorexia nervosa". Mostly at girls.
 - **Delusions** untruthful thinking, which could not be corrected by any chance, appear on sick basis. Delusions are most often defined as false fixed beliefs that cannot be corrected by reasoning.

- At first person is overwhelmed by anxiety and is not able to distinguish what is inside (thoughts) from what is outside (reality). Therefore, a delusion may stimulate behavior for dealing with confusion and the resulting anxiety.
- When delusional, a person truly believes what he or she thinks to be real is real.
- Ideas of reference misconstruing trivial events and remarks and giving them personal significance. Ex.: When Maria saw the doctor and nurse talking together, she believed they were talking against her. When she heard on the radio that a hurricane was coming she believed this to be a message that harm was going to befall her.

- Ideas of persecution the false belief that someone is singled out for harm by others; this belief often takes the form of a plot by people in power against the person. Ex.: Same belief that the secret service was planning to kill him. He became wary of the food he ate, since he believed that the secret service was poisoning his food.
- Ideas of grandeur the false belief that one is a very powerful and important person. Ex.: Sally believed that she was Maria Magdalene and that Jesus controlled her thoughts and was telling her how to save the world.
- Somatic delusions the false belief that the body is changing in an unusual way, e.g., rotting inside. Ex.: David told that his brain was rotting away.

- Thought broadcasting, the belief that one's thoughts can be heard by others (e.g., "My brain is connected to the world mind. I can control all heads of state thought my thoughts.").
- Thought insertion, the belief that thoughts have been inserted into one's mind by an outside agency (e.g., "They make me think bad thoughts and are rotting my brain".).
- Thoughts withdrawal, the belief that's thoughts has been removed from ones mind by an outside agency (e.g., "The devil takes my thoughts away and leaves me empty.").

Delusions of being controlled, beliefs that ones body or mind is controlled by an outside agency (e.g., "There is a man from darkness who controls my thoughts with electrical waves.").

- Grandious ideas all nature processes are goes on their will;
- Immortality idea they always lived and will live forever;
- nihilistic delusion.(sure in absence of inner organs)

- Disorders of some kinds of thinking.
- Unlogical thinking process of abstracting, generalisation, selection of main part is disordered.
- Symbolic thinking some symbol becomes some sign for patients, which are understandable only for them.
- Neologisms patients makes new words, which are understandable only for them.

- Concrete thinking implies overemphasis on specific details and an impairment in the ability to use abstract concepts. For ex.: during an assessment, you might ask what brought the client to the hospital. The client might answer "a cab" rather than explaining the need for seeking medical or psychiatric aid. When asked to give the meaning of the proverb "people in glass house shouldn't throw stones", the person might answer, "Don't throw stones or the windows will break." The answer is literal; the ability to use abstract reasoning is absent.
- **Echolalia** is the pathological repeating of another's word by imitation and is often seen in people with catatonia.
- Echolalia is the counterpart of echopraxia, mimicking the movements of another, and is also seen in catatonia.

- Clang association is the meaningless rhyming of words, often in a forceful manner, "On the track...have a Big Mac...or get the sack," in which the rhyming is often more important that the context of the word.
- Word salad is a term used to identify a mixture of phrases that is meaningless to the listener and perhaps to the speaker as well. It may include a string of neologisms, as in the following example: "Birds and fishes...framewoes...mud and stars and thumpbump going."

speech with abrupt changes from topic to topic that are usually based on understandable associations or plays on words. At times, the attentive listener can keep up with the changes, even though direction changes from moment to moment. Speech is rapid, verbose, and circumstantial (including minute and unnecessary details). When the condition is severe, speech may be disorganized and incoherent.

Disorders of emotions:

- Hypotymia, hypertymia depends on mood.
- Hypopathia, hyperpathia according to emotional background.
- Hyperpathia with pain tint, have unpleasant character, different from daily feelings.. (exaggerated pain)
- Hypopathia in process of acknowledge, decreasing of feeling from inner receptors "became insensitive". (diminished response to pain)
- Apathia absence of emotional accompaniment in feelings, dissappearing of social feelings, but they are not reflected in patient's complains.

Disorders of emotions:

- Hypertymia is seen in form of various symptoms euphoria without any reason increased mood. Translated as "bring good". It can be seen at alcoholic psychosis.
- Hyperbulia-higher activity, higher need in conversation, they are not tired, sleep is disturbed, main instincts are absent.

Disorders of emotions:

- Depressive syndrome mood is decreased, bradyphrenia, hypobulia. it gain vital character disappearance of sleep, appetite, sexual functions; feeling of pain, pressure mostly in heart. Feeling of quilt appear, they begin to remember their previous life, fixate their attention on negative things, self-appraisal decreased, they can't concentrate, thinking and associative functions are decreased. Suicide ideations.
- Anxiety undifferential feeling of coming danger. Waiting of bad end.
- Fear general, projective on modern time on life threat.

- Abulia absence of motivation, passivity, motionless. It can be manifested by incapability to make decision.
- Hypobulia is manifested with hypodynamia, decreasing of impulses.
- Hyperbulia condition of increased activity, aspiration to immediately reaching of aim.
- Dypsomania impulsive drawing to drinking.
- Dromomania drawing to vagrancy, to change places.
- Pyromania drawing to burn something.
- Kleptomania aimless steeling.

- Myphomania need in lie.
- Koprolalia unbreakable using of slang (bad words).
- Transvestitism eager to wear cloth of opposite sex;

- Pathology of psychomotorics.
- Akinesia absence of movements.
- Catatonic stupor accompanied with mutism, increasing of vital muscle tonus.
- **Negativism** is equivalent to resistance. In *active negativism*, the person do the opposite of what they are told to do. When people do not do things they are expected to do *passive negativism*.

- Pathology of psychomotorics.
- "wax flexibility " or "catalepsy" which posture we put them – they will take it, doesn't react on speech, doesn't to contradict on putting him in that posture, can stay for a long time. Can be accompanied with negativism – that he make opposite things.
- Hallucinative stupor under hallucinations.
- Automatic obedience a catatonic patient may perform, without hesitation, all simple commands in a robot-like fashion.



Thank you for attention!