

# DEGREE CURRICULUM **PSYCHOLOGY**

Coordination: MUR LAIN, MARIA

Academic year 2022-23

## Subject's general information

Subject name	PSYCHOLOGY								
Code	100515								
Semester	2D SEMESTER - DEGREE - JUN/SET								
Туроlоду	Degree		Course Character		Modality				
	Bachelor's Degree in Medicine 3		3	COMMON/CO	RE Attendance- based				
Course number of credits (ECTS)	6								
Type of activity, credits, and groups	Activity type PRALAB			PRAULA	TEORIA				
	Number of credits	0.5		2.5	3				
	Number of groups 6		4		1				
Coordination	MUR LAIN, MARIA								
Department	MEDICINE								
Important information on data processing	Consult this link for more information.								

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## Subject's extra information

Medical Psychology corresponds to a part of psychology and the object of its study is the behavior of the individual in a context constituted by health or illness. From this point of view, medical psychology synthesizes the contributions from different areas: psychology, medicine, health education and communication.

Among the numerous advances in research achieved in these fields, especially in the last two decades, are the knowledge about the biological bases of human behavior and mental disorders, and their psychopharmacological and psychological approach. These developments include a broader understanding of those with mental illnesses, as well as more effective care for them. This perspective must be understood and understood by medical students, regardless of the specialty they will carry out in the future, to assist patients in the 21st century.

In the practical part of the subject, it is intended to acquire knowledge that is necessary for a future doctor to understand and explain the psychological processes inherent to health, when becoming ill and in the doctor-patient interaction. It will work that the doctor has multiple instruments with which to diagnose, evaluate and treat the ailments of his patients. However, to do this medical act process, the physician must have the ability to establish an effective physician-patient relationship. This skill involves a solid understanding of the complexities of human behavior, along with learning the techniques of speaking and listening.

The doctor-patient relationship is a key component of the biopsychosocial model. George Engel has been the most prominent advocate for this biopsychosocial disease model, which outlines an integrated system approach to disease and human behavior. The biopsychosocial model derives from general systems theory. The biological system emphasizes the anatomical, structural and molecular substrate of the disease and its effects on the biological functioning of the patient; the psychological system is centered in the effects of the dynamic factors, motivation and personality in the experience and the reaction to the illness; Finally, the social system deals with cultural, environmental, and family influences on the experience of illness. Engel's model does not consider disease to be the direct result of a person's psychological or sociocultural circumstances, but rather proposes a global understanding of the disease and its treatment.

Therefore, the knowledge of the patient by the doctor should not be limited to his clinical situation, and it should be established to what extent the individual psychology of the patient and his sociocultural environment affect his disease, knowing the emotional responses to it and their relationship with the doctor.

#### Learning objectives

The main objective of this subject is the acquisition of knowledge, skills and attitudes within the field of medical psychology that can be useful for the future doctor and for the practice of medicine.

It includes knowing the biological, psychological and social foundations in the states of health and disease, personality and psychopathology, and studying the interaction between doctor and patient.

#### Psychology

- A. Normal psychic functioning
  - Epistemological bases. The object of study of psychology.
  - Basic psychic functions. Neurophysiology
  - Stages of development: childhood and adolescence.
  - Structure and development of the personality. Normality and pathology.
- B. From normality to Psychopathology
  - · Health and sickness. Mental health: normality and pathology.
  - Homeostasis and stress
  - Psychosomatic medicine
  - General psychopathology. Psychopathological syndromes (Anxiety, Psychosis, Affectivity and Instincts)
- C. Intervention
  - Psychometry
    - o Personality
    - o Intelligence
  - Psychotherapy
  - Psychological factors of therapeutic activity
    - o Adherence and compliance
    - o The Placebo Effect
- D. Doctor-Patient Relationship
  - Psychological aspects of medical practice
  - The doctor-patient relationship, aspects of the care relationship.
  - Specific clinical situations.

#### Competences

#### COMPETENCES

CG8. Recognize the bases of normal human behavior and its alterations.

106. Cognitive, emotional and psychosocial development in childhood and adolescence.

107. Know the biological, psychological and social foundations of personality and behavior.

109. Psychotherapy

#### Competencies

#### A. ACQUIRING KNOWLEDGE

• Know the biological, psychological and social foundations of personality and behavior in states of health and disease.

• Describe the cognitive, emotional and psychosocial development in the different stages (from childhood, adolescence to the elderly).

- Distinguish the concept, foundations and applications of psychosomatic pathology.
- Describe and analyze the doctor-patient relationship.

#### **B. ACQUIRE SKILLS**

- Clinical Skills

• Management of the doctor-patient relationship in different healthcare settings and appropriate to each clinical situation.

- Predisposition to interpersonal relationships, communication and team cooperation.
- · Assumption of responsibilities and decision-making.
- Know how to recognize risk situations and those that require immediate attention.
- · Acquire bases of clinical management centered on the patient and adequate use of health resources
- Know how to carry out an anamnesis that includes a psychopathological examination, interpreting its meaning.

• Approach to psychosomatic pathology, with the ability to make a diagnostic judgment and establish an approach and a reasoned therapeutic strategy.

- Communication skills
- Obtain and prepare a psychopathological medical history that contains the relevant information.
- Carry out an assessment of the mental state and a psychopathological examination.
- Write stories and reports in a way that is understandable to others.
- · Communicate effectively and clearly, orally and in writing, with patients or other professionals.
- Establish good interpersonal communication, to address patients and families efficiently and with empathy.
- Know aspects of communication with patients, relatives and their social environment.

• Know the clinical interview models, verbal and non-verbal communication. Write histories, reports and other records in a way that is understandable to patients, family members and other professionals.

· Make a presentation in public, oral and written, of scientific works and / or professional reports

#### C. DEVELOP PROFESSIONAL ATTITUDES AND VALUES

• Understand and apply the essential principles of the medical profession, such as ethical principles, legal

responsibilities, and professional secrecy.

- Develop a professional practice with respect for the autonomy of the patient, their beliefs and culture.
- Update one's professional competence, giving importance to the acquisition of new knowledge and techniques.
- Acquire teamwork skills, especially in multidisciplinary teams.

## Subject contents

A. Normal psychic functioning

1. Epistemological bases. The object of study of psychology.

From natural knowledge to scientific knowledge. Scientific models

Scientific models in psychology

Complex thinking

- The object of study of psychology
- Psycho (duck) logical clinical models
- Medical-biological model
- Cognitive-behavioral model
- Psychodynamic model
- Systemic model
- 2. Basic psychic functions. Neurophysiology
  Conscience
  Attention. Orientation
  Sense-perception
  Thought and language
  Affectivity
  Intelligence. Mental retardation
  Motivation and will
  Learning and memory
  General aspects of learning
  Conditioning. Operant conditioning
  Memory: general aspects. Types. Sensory. In the short and long term.
  Neuropsychology
  Processing and neuroanatomy

3. Stages of development: childhood and adolescence.
Evolutionary Psychology. Childhood and adolescent psychology.
Reaction to illness. Risk factors in childhood and adolescence
Externalized and internalized disorders

4. Structure and development of the personality. Normality and pathology.

Normal personality.

Pathological personality

EPQ-A.

Clinical cases

B. From normality to Psychopathology

5. Health and illness. Mental health: normality and pathology
Health and sickness
Mental health and mental normality
Mental illness
Adaptive habits and lifestyles: concept, relevance and genesis
Modification and factors of habits and lifestyles
Evaluation and intervention on habits: model of change by stages
Life cycle: concept and structure
Stages of the life cycle
Vulnerability and resilience
6. Homeostasis and stress

Stressful events

Adaptive resources

Stress and illness

Illness causes stress

Stress management

7. Psychosomatic medicine

History of psychosomatics. Biological and psychosocial paradigm.
Psychoanalytic, psychophysiological, sociocultural and systems theory school.
Current concept of psychosomatic medicine. Comprehensive approach to current medicine.
Diagnostic criteria of psychological factors that affect the physical state.
Cultural factor
Interview models to modify adaptive habits and lifestyles.

Relationship between psychiatric symptoms and medical illness

8. General psychopathology. Psychopathological syndromes.

Psychopathological syndrome Anxiety syndrome Neurotic disorders Depressive syndrome Depressive disorders Affective disorders Psychosis: concept and types Schizophrenic psychosis Conservation instincts of the individual and the species Instinct psychopathology (sleep and eating)

C. Intervention

9. Psychometry

Personality

Intelligence

10. PsychotherapyDynamic psychotherapyBehavioral therapy. Cognitive therapyGroup psychotherapy. Family therapy. Couple therapy

#### Brief psychotherapy

11. Psychological factors of the therapeutic activity:
Adherence and compliance.
The placebo effect. History of the placebo
Concept of placebo, placebo effect and nocebo effect
Factors conditioning the placebo effect
Mechanisms of the placebo effect
Field of use of the placebo
Placebo-like effects

#### D. Doctor-Patient Relationship

12. Psychological aspects of medical practice

Introduction The process of getting sick The psychological component of the disease process Behaviors of getting sick Emotional and behavioral responses to illness Coping with the disease Experience of the disease by the patient Healthcare filters Doctor-sick communication. The diagnostic process Approach from different healthcare settings and specialties. Social conditions of medical practice 13. The doctor-patient relationship, aspects of the care relationship. Information and communication Information: generalities. Information and the patient. Procedures for obtaining information Communication: basic principles. Human communication: components and functions

Communication in the doctor-patient relationship. The clinical interview The clinical / psychological interview: skills Emotional aspects in the doctor-patient relationship Hopes and fears in the doctor-patient relationship Reflections on the different clinical situations The doctor-patient relationship as a helping relationship

14. Specific clinical situations. Types of patients

Therapeutic non-compliance: predictive factors and intervention

Specific clinical situations: Chronic pain. Duel. Psychosocial transitions.

### Methodology

This subject will be semester, will be given to the 3rd year (2nd semester) and is compulsory. Hourly distribution.

	ECTS	Actividades Prese	nciales (40'%)	Actividades no	Dedication of the student
SUBJECT		Single group theory and practice	Small group practice and work	presenciales (60%)	
Psychology	6	30 hours	30 hours	90 hours	150 hours

## Development plan

A) PRESENTIAL ACTIVITIES (40%)

A.1. MASTER CLASSES (Single group):

The acquisition of the knowledge that is necessary for a future doctor to understand and explain the psychological processes inherent to health, illness, and in the doctor-patient interaction. This general objective is articulated in the following components:

• Apply the principles and methods of psychology to the study of the interaction of the individual with the socially constructed environment.

• Apply the principles and methods of psychology in the study of normal behavior, following a criterion based on habits and lifestyles.

• Understand the healthy and sick individual, as the result of the interaction of psychosocial variables and strictly biological variables. Understand the cost of the disease and of the treatments in terms of the effect on habits and quality of life

• Acquire strategies and skills to obtain information from patients and other professionals, not limited to pathological information, but through special attention to adaptive and problem-solving resources.

• Acquire strategies to identify and recognize normal psychic functioning up to psychopathology, and also the role of psychological factors in therapeutic intervention.

A.2. PRACTICAL TEACHING (Small Group):

a. THEORETICAL-PRACTICAL SEMINARS:

• Complement of the master classes where more practical aspects related to the subject are studied in depth and exercised.

· Clinical cases, discussion of cases on the different topics of the subject.

- Problem resolution
- · Audiovisual sessions, facilitating documentaries or film clips,

#### b. TECHNICAL SKILLS DEMONSTRATIONS

- · Assessment, psychometric evaluation and psychosocial interview
- Techniques of psychological approach,

• Mental state assessment interviews (screening of cognitive functions, detecting health risk habits, evaluating emotional state and personality)

#### c. SMALL GROUP

• Clinical cases, discussion of cases about the doctor-patient relationship, establishing approaches, handling the interview, more appropriate actions, and others.

• Deepen the doctor-patient relationship, through the work presented by the students and providing an interactive development with the students, based on the demonstrative cases.

• Students are invited to observe the doctor-patient relationship, assisting for a minimum of 10 hours in the development of the care work of a doctor of their choice.

• Afterwards, students will be asked to communicate, within a seminar context, the description of their observations together with interventions, comments and questions from the other students to facilitate this exchange for the teacher, providing the necessary theoretical reflections.

#### B) NON-PRESENTIAL ACTIVITIES (60%)

#### B.1. PROGRAMMED TEACHING AND SIMULATION (SELF-LEARNING)

Large groups of students access and has high teaching profitability. There are several examples:

- Virtual activities: These activities will be carried out through the UdL Virtual Campus (SAKAI)
- Computerized clinical cases
- Oriented reading: Facilitation of bibliographic references (in book format, scientific journal, websites, etc).

#### **B.2 WORKS**

**B.3. TUTORIALS** 

#### **Evaluation**

- A. Delivery and oral presentation of the work doctor-patient relationship
- Oral presentation and delivery of printed version to the small group seminars.
- It will represent 20% of the final grade for the subject
- B. Examination of the theoretical contents
- 40 Test-type questions, with 5 possible answers. They compute: hits- (errors x 0.25)
- It will represent 50% of the final grade for the subject
- C. Examination of the contents of the seminar
- 24 Test-type questions, with 5 possible answers. Compute: hits- (errors x 0.25)
- It will represent 30% of the final grade for the subject

## Bibliography

#### Books:

- BENEDETTI F. The patient's brain : the neuroscience behind the doctor-patient relationship. New York : Oxford University Press; 2011.
- BELLOCH, Manual de Psicopatología. Mc Graw Hill. 2 volúmenes.
- GAZZANIGA MS, IVRY RB, Mangun GR. Cognitive Neurosciences. The biology of the mind. 3 edition WW Norton and Company. New York 2009.
- KANDEI ER, Schwartz JH, Jessell TM. Principios de neurociencia. 4a ed. Madrid: McGraw-Hill Interamericana; c2001.
- KAPLAN HI, Sadock BJ. Sinopsis de Psiquiatría. 9ªEd Waverly Hispanica, 2004
- MACHLEIDT W. Psiquiatria, trastornos psicosomàticos y psicoterapia. Ed. Masson 2004.
- MORA TERUEL F. Neurocultura. Madrid. Alianza Editorial 2007.
- MYERS, DG. Psicología. 9a ed. Madrid: Médica Panamericana; 2011.
- PENZO W. Psicologia per a les ciències de la salut. Barcelona: Universitat de Barcelona; 1999.
- SILVERMAN J, Kurtz S, Draper J. Skills for comunicating with patients. 3rd ed. Abingdon: Radcliffe; cop. 2013.

#### Publicaciones periódicas:

- Internal Journal of Clinical & Health Psych.
- Clínica y salud
- Internat Journal of Psychology & Psy. Therapy
- Revista de Psicopatología y Psic. Clínica
- Cuadernos Med. Psicosom. y Psiq. Enlace

#### psicología Médica en la red:

- Sociedad española de Medicina psicosomàtica y psicología médica http://www.psicociencias.com/
- Fundación Cerebro y Mente http://www.cermente.com/
- Google Mental Health <u>http://directory.google.com/Top/Health/Mental\_Health/</u>
- American Psychiatric Association <a href="http://www.psych.org/">http://www.psych.org/</a>
- National Institute of Mental Health <a href="http://www.nimh.nih.gov/">http://www.nimh.nih.gov/</a>
- NIMH Información al público <u>http://www.nimh.nih.gov/publicat/index.cfm</u>
- Expert Consensus Guidelines http://www.psychguides.com/
- Oxford University Press <a href="http://www4.oup.co.uk/">http://www4.oup.co.uk/</a>
- American Psychiatric Press <a href="http://www.appi.org/">http://www.appi.org/</a>
- PubMed <u>http://www.ncbi.nlm.nih.gov/sites/entrez?db=pubmed</u>