

Psychological disorders :



The causes of psychological disorders have been to many theories. Most mainstream thought in the fields of psychology, neurobiology and related specialties relates each disease to a combination of genetic and environmental factors. There are also illnesses caused wholly by physical trauma. Many psychological diseases can be classified as syndromes, consistent groups of symptoms that do not always have a single cause. Physical causes include major brain trauma, accidental head injury, and drug use, such as alcohol and narcotics. In addition, certain kinds of toxic substances, such as heavy metals, can induce psychological disorders. Lastly, there are illnesses that are not usually classified as mental illnesses that can have psychological side effects, such as AIDS-related psychosis. Immediate effects have been conclusively traced to these causes.

There are two important historical examples of psychological illnesses traceable to immediate and well-understood physical causes. General paresis of the insane is known to be caused by advanced syphilis and pellagrous insanity is caused by niacin deficiency. Ironically neither of these are any longer thought of as psychological disorders, primarily because, as in this case, when a very clear and well-understood physical cause, coupled with a widely-accepted and standard treatment, becomes available for an illness, it generally moves under the heading of another medical specialty, such as neurology. There are psychological problems that are related to heavy exposure to chemical causes, such as amphetamine psychosis, and lead poisoning, which can result in mental retardation. Again, these are often treated by specialists in the field of neurology. Finally, there are diseases related to immediate head trauma. Bleeding inside the skull can put pressure on the brain, which can result in any number of symptoms, including

paralysis, depression, and psychosis (Hockenbury 2004).

For disorders such as depression, causation is still somewhat controversial.

The most widely-accepted theory is that subtle, possibly hereditary, disturbances in brain chemistry cause depression. The evidence for this view is a statistical correlation between brain chemistry and symptoms. In addition, many studies looking for genetic roots to mental illness, have found strong statistical links showing that certain mental illnesses seem to run in families. Some controversy exists over whether this is due to genetics, or simply from being raised by or with someone who is mentally ill, but evidence from studies examining siblings, especially twins, who were raised separately, seems to indicate strong genetic factors. Further evidence is the apparent success of medical treatment (such as the use of Prozac and other selective serotonin re-uptake inhibitors (SSRIs)), which often results in both changes in brain chemistry and alleviation of symptoms. On the other hand, many studies have found that placebos are equally effective, but it should be noted that placebo effects tend to disappear over time in many patients, and that the placebo effect also exists in treatments for diseases like cancer (Hockenbury 2004).

Traditionally various things such as stress, upbringing, and other "environmental" causes have been blamed for psychological illness. While such things may possibly influence or induce neurotic illnesses, such as anxiety and minor depression, there is no evidence that there are non-physical causes for major psychological illnesses such as schizophrenia, bipolar disorder and psychotic depression. However, there is evidence that, even for psychotic disorders, certain environmental factors may play a role not in causing the disease, but in triggering acute symptoms, in the same

<https://assignbuster.com/psychological-disorders-essay-samples-2/>

way that stress does not cause influenza, but it can exacerbate the symptoms. Psychological patients often do not cope well with stress, but that does not mean stress causes psychological illness.

For instance, schizophrenia is regarded as an illness with a susceptibility (probably genetic, but in some cases could be due to other things such as a vertically transmitted retrovirus,) and an environmental cause. The majority of environmental causes are likely to be infections (most likely viruses), although toxins remain a remote possibility in some cases. However, the estimates of heritability of schizophrenia from twin studies varies a great deal, with some notable studies, using very large sample sizes and excellent methodology, show rates as low as 11.0 to 13.8% among monozygotic twins, and 1.8 to 4.1% among dizygotic twins.

People with mental illness may or may not have a characteristic pre-illness personality. Those in which genetic features dominate are more likely to have a pre-illness personality profile (such as the autism spectrum) and those predominantly relate to an environmental insult such as infection are more likely to have a normal pre-illness personality. Studies have shown characteristic personality traits in schizophrenia patients 1-2 years before a psychosis but "predisposing" traits are not seen when you look at personality earlier, say 3 - 4 years before first psychosis. This may reflect a slow buildup of environmentally-related damage that finally spills over into full-blown illness.

There are some illnesses, such as post traumatic stress disorder, that clearly relate to some specific stress-inducing event, but even then it is thought that the stressful event simply triggers a disease already latent in the patient's genes, as evidenced by the fact that many people have been raped, been in

war, and so on, but only a few of them get stress-related disorders. Most mental health care professionals nowadays don't really understand psychological disorders at a biological level. Psychological research is a very active field, just like immunology, oncology, and neurobiology.

References:

Hockenbury, Don and Sandy (2004). *Discovering Psychology*, Worth Publishers.