

Psych100



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Drug Treatments for Schizophrenia Traditional drugs for Schizophrenia include antipsychotic medications such as haloperidol, fluphenazine, and chlorpromazine (Grohola para 6). Commonly known as typical antipsychotics or conventional antipsychotics or classical neuroleptics, the medications work by blocking receptors in the dopamine pathways of the brain. These drugs mainly are effective in dealing with the positive symptoms of the disease and act by blocking dopamine receptors. The mild side effects of traditional medications of Schizophrenia include constipation, dry mouth, drowsiness, blurred, dizziness as well as blurred vision. The graver side effects of the drugs include lowered life expectancy, fidgeting or pacing, weight gain, trouble with muscle control, shuffling and tremors of the feet, muscle cramps or spasms in the neck and head, and a myriad of “negative” symptoms (Grohola para 8). Other side effects that occur due to prolonged use of the drugs include grimacing, facial ticks, lip licking, thrusting and rolling of the tongue, and panting (Grohola para 9). Newer antipsychotic medications include Zyprexa, Seroquel, Clozaril and Risperdal. Some of these drugs work on both the negative and positive symptoms of the disease as they work on the both the dopamine and serotonin receptors. By acting on the serotonin receptors, the drugs deal with the negative symptoms of the disease. Atypical antipsychotics treat a wider range of symptoms medications in this category including Abilify, Risperdal, Geodon and Zyprexa among others (Groholb para 4). Atypical antipsychotics work more like the conventional drugs but are less likely to cause in patients extrapyramidal motor control disabilities.

Works Cited

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Personality Disorders

Personality disorders are persistent chronic psychological disorders that can grossly impact an individual's life. Some of these disorders are briefly discussed below.

Paranoid personality disorder – People who have this disorder are normally irrationally suspicious and distrustful of other people, always believing that they are always in danger (Mentalhealth para 1). Those with the condition are also hypersensitive, habitually scanning their environment for suggestions or clues to make valid their biases or prejudicial notions.

People who have Schizoid personality disorder generally have no interest in social relationships (Schizoid 237). They see no value in sharing time with others. The disorder is also characterized by emotional coldness, solitary life and secretiveness.

People with antisocial personality disorder persistently disregard the law and therefore like to infringe on the rights of other people (Moeller and Dougherty 35). Other characteristics of this order include persistent stealing or lying, cruelty to animals, promiscuity, aggression or violent behavior and disregard for safety.

Avoidant personality disorder is a condition that is characterized by feelings of inadequacy, social inhibition, high sensitivity to negative comments and evasion of interaction with other people (Schizoid 233). Personally, people with this disorder regard themselves as being unappealing and socially inept.

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People with dependent personality disorder consistently depend on other people for their psychological wellbeing. People with this condition tend to over-depend on other people for their physical and emotional needs (Schizoid 235).

Borderline personality disorder is characterized by what is considered as extreme white and black thinking. People with this disorder tend to engage in unstable relationships, inconsistency in behavior, identity and self-image.

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Moeller Gerard & Dougherty Donald. " Antisocial Personality Disorder, Alcohol, and Aggression". Alcohol Research & Health. National Institute on Alcohol Abuse and Alcoholism. 2006.

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