



An Introduction to Psychopathology

Psychopathology Course
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- G. Stanghellini, **Psychopathology Course – Academic Year 2014/15** from personal website giovannistanghellini.it



References

- G. Stanghellini, The Meanings of Psychopathology, CURRENT OPINIONS IN PSYCHIATRY, 2009.
- G. Stanghellini, T. Fuchs: One Century of Karl Jasper's General Psychopathology. OXFORD UNIVERSITY PRESS, 2013.
- G. Stanghellini Psychopathology: re-humanizing psychiatry Psychopathology: Re-Humanizing Psychiatry. ACTA PSYCHIATRICA SCANDINAVICA, 2013.
- G. Stanghellini, The Portrait of the Psychiatrist as a Globally Minded Citizen. CURRENT OPINION IN PSYCHIATRY, 2013.
- G. Stanghellini, Psychopathology: An Agenda For Psychiatry. ACTA PSYCHIATRICA SCANDINAVICA, 2013.
- G. Stanghellini, M.R .Broome Psychopathology as the Basic Science of Psychiatry, BRITISH JOURNAL OF PSYCHIATRY, 2014
- G. Stanghellini, A. Fiorillo, Five Reasons for Teaching

Psychopathology

A logos for pathos

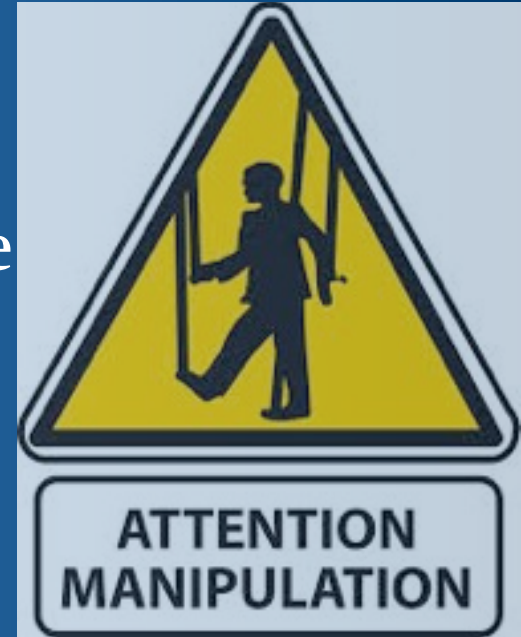
- Psycho-patho-logy is a discourse (*logos*) that articulates the suffering (*pathos*) that troubles the human mind (*psyche*).
- Psychopathology is a *logos* for *pathos* – that is, a discourse about what troubles the human person.
- Psychopathology provides a language to talk and make sense of the phenomena that express the vulnerability of the human person.



Psychopathology:

“Souffrir pour quelque chose
c’est lui avoir accordé
une attention extreme”

Paul Valéry



Attention is capacity to wait, fervent and fearless acceptance of reality.

Attention's purest form is responsibility since every human mistake is, in essence, disattention.

Cristina Campo

Karl Jaspers:

Psychopathology's aims

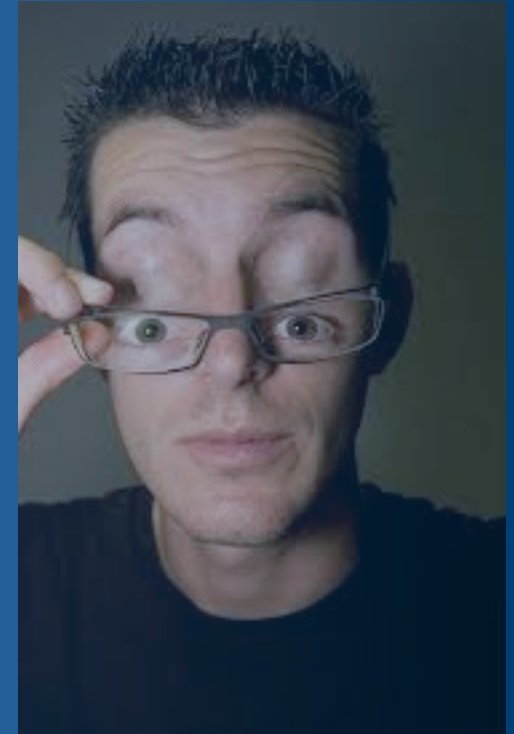
- **‘Clarification, order’:**
concrete descriptions,
suitable terminology,
methodical groupings.
- **‘Psychopathological formation’:**
endowing clinicians with a valid
and reliable methodology.
 - Philosophically sound background for the encounter with patients.
 - Epistemological and ethical awareness of the tools in use when trying to grasp, assess and make sense of the patients’ experiences and behaviours - and of the limitations of these tools.



THREE MISTAKES ABOUT PSYCHOPATHOLOGY

Psychopathology is not:

- Mental pathology
- Symptomatology
- Nosography





1. Psychopathology as 'Mental Pathology'

Example 1:

Eating disorder psychopathology does not predict the overweight severity in subjects seeking weight loss treatment.

Castellini G, et al., Compr Psychiatry. 2008 Jul-Aug;49(4):359-63.

Example 2:

To assess psychopathology in transsexuals at different phases of sex reassignment, we administered the Spanish adaptation of the MMPI-2 (...)

The results show that **the majority of patients were free of psychopathology**

Gómez-Gil E, Vidal-Hagemeijer A, Salamero M., J Pers Assess. 2008 Jul;90(4):368-74.



Psychopathology is not Mental Pathology

- The concept of 'mental pathology' confusingly overlaps with distinct orders of abnormal phenomena (e.g. symptom, syndrome, etc.) that should not be conflated.
- It overlooks basic epistemological distinctions, e.g. it conflates different concepts ('illness', 'disease', 'disorder', etc.) to be kept rigorously separate (Fulford 1989).
- It evades the problem of defining the nature of the entities that are being diagnosed and classified.



Psychopathology is not Mental Pathology

- Psychopathology is not the *opus operatum* of Psychiatry/Clinical Psychology.
- Rather, it is a *discipline* – a science – that provides clinicians with
 - basic knowledge about the phenomena that affect the human mind
 - an appropriate *modus operandi*, that is a valid and reliable method to appraise these phenomena.



2. Psychopathology as

- Symptomatology is the study of *isolated symptoms in view of their clinical*, i.e., diagnostic and aetiological, significance.
- A symptom is
 - the epiphenomenon of an underlying dysfunction
 - and an index for diagnosis.
- Symptomatology is strictly *morbus* oriented since it deals with symptoms in a strict biomedical sense,
- Psychopathology is also *person* oriented since
 - it attempts to describe the special modes of experience and behaviour of a patient
 - and his relationship to himself and to the world.

Psychopathology is not

- Biomedical science was built on the transformation of complaint into symptom (Mooij, 2012).
- This allowed medical science to see in a complaint – e.g. exhaustion – the effect of a cause situated in the human body – e.g. a morbid process as a biochemical imbalance.
- This move from complaint to symptom overshadowed the fact that a complaint,
 - next to a *cause* (which may remain unknown)
 - has a *meaning*, expressing a question, request, or desire.
- Psychopathology is not merely about assessing symptoms as manifestations of bodily malfunctioning and as diagnostic pointers.
- To Psychopathology, being sick is a subjective experience of the person.
 - The psychopathological discourse is about understanding a given type of experience.
 - This obviously does not exclude seeing abnormal phenomena as symptoms



3. Psychopathology as 'Nosography'

- The aim of Nosography is the description of disorders to allow their diagnosis.
- Psychopathology is about the bricks, Nosography about the entire building.
- Nosography addresses syndromes,
 - that is groups of symptoms that are empirically and statistically aggregated,
- Psychopathology is about
 - single abnormal phenomena.
 - In view of their structural aggregation (i.e., on the basis of meaningful connections).
- To be clear: the DSM's are not books of



Psychopathology is not Nosography

- Psychopathology, although it is the most secure basis for nosographical diagnosis, is not merely about diagnosis.
- If Psychopathology is conflated with Nosography, only those symptoms that are supposed to have diagnostic value are investigated, in a sort of nosography-focused twilight state (Rossi Monti and Stanghellini 1996).
- The dominant focus on diagnosis disregards the attention to real people's experiences.
- As a consequence, clinical utility is confined to *ad hoc* bits of information useful for clinical decision-making. This excludes the scrutiny of the manifold manifestations of what is really there in the patients' experience, the essential prerequisite to understand

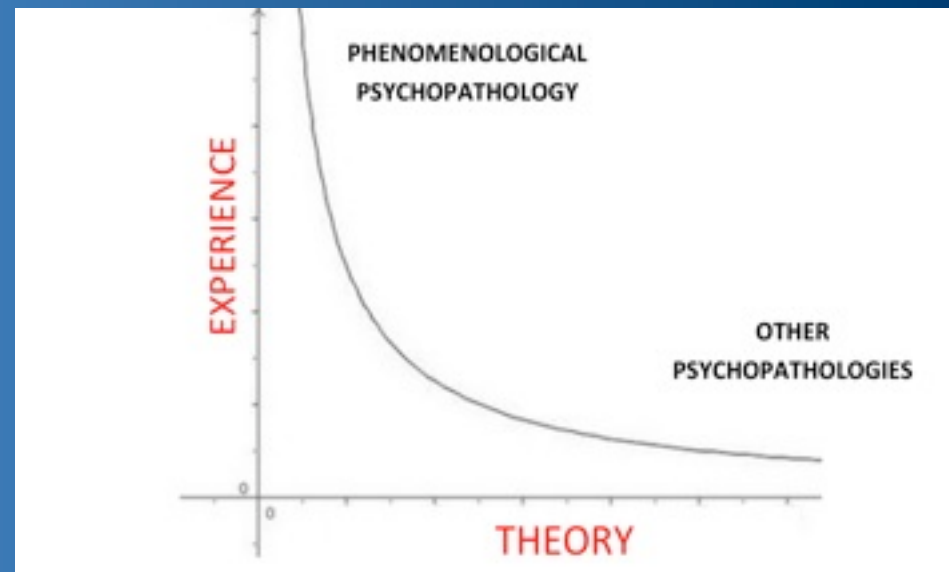
AND SIX REASONS TO PRACTICE PSYCHOPATHOLOGY



Common Ground
Focus on Subjectivity
Rigorous Diagnosis
Understanding
Care
Bridging Humanities and Neurosciences

Common Ground

- **Psychiatry/Clinical Psychology** are heterogeneous disciplines.
- Clinicians adopt many different approaches
 - neurosciences, depth psychologies, sociology, philosophy, etc. – each of which has its own language, methodology, and practice.
- **Psychopathology** provides the common ground and a shared language *koiné*.





Subject matter

- **Psychiatry/Clinical Psychology's** main facts are disturbing mental phenomena – the psychiatric object *par excellence*
- **Psychopathology** addresses abnormal human subjectivity.



Diagnosis

- **Psychiatry/Clinical Psychology's** aims at establishing rigorous diagnoses.
- **Psychopathology** is still highly useful in a field where all disorders *cannot* be neuroscientifically defined as disease entities,
 - But exclusively *syndromes* that can be defined according to characterising symptoms (notably, abnormal experiences, especially their formal features).



Understanding

- **Psychiatry/Clinical Psychology** are about understanding disturbed human experience, rather than simply diagnosing and classifying it.
- **Psychopathology** bridges human sciences and clinical sciences,
 - providing the basic tools to make sense of mental suffering.
 - Attempting to define what is abnormal (rather than taking for granted commonsense views)
 - And to grasp what is human in apparently non-human (e.g. irrational or nonsensical) phenomena.



Care

- **Psychiatry/Clinical Psychology** are about caring for troubled human existence,
 - rather than judging, marginalising, punishing, or stigmatising it.
- **Psychopathology** connects understanding with caring,
 - and endeavours to establish an epistemological as well as ethical framework for this.



Bridging Humanities with

- **Psychiatry/Clinical Psychology** are in search for a way to connect, or at least think together, first-person subjective experience with impersonal brain/mind functioning.
- **Psychopathology** is about bridging understanding (*Verstehen*) and explaining (*Erklären*) in research as well as in clinical settings.

Incomprehensibility

PLUS ONE ETHICAL PRINCIPLE





“All practice on the basis of knowledge must rely on the unseen Encompassing (*das Umgreifende*): medical treatment must rely on un-understood life”

Karl Jaspers, *Philosophy of Existence*