Use of Languages

Principal working language: catalan (cat)
Some groups entirely in English: Yes
Some groups entirely in Catalan: Yes
Some groups entirely in Spanish: Yes

Other comments on languages

English will be the language used in 33% of the credits

Teachers

Enric Álvarez Martínez
Miguel Casas Brugué
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Amanda Rodriguez Urrutia
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Lara Grau Lopez
Maria Pilar Lusilla Palacios
Joan de Pablo Rabasso
José Antonio Navarro Sanchís
Gemma Parramón Puig
Josep Salavert Pérez
Marc Ferrer Vinardell

Prerequisites

To have passed the subject of Medical Psychology of 2nd. course.

The student will acquire the commitment of preserving the confidentiality and professional secrecy of the data to which he / she may have access due to the learning in the assistance services. Also to maintain an attitude of professional ethics in all its actions.

Objectives and Contextualisation
The subject of Psychiatry that is taught to the undergraduate students of 5th year has the context of training in
the basic aspects of Psychiatry and Mental Health that every doctor has to know for the correct practice of
medicine, regardless of the final specialty that the student makes.

_ To recognize, diagnose and guide the management of mental disorders.

_ To know the semiology and the technique of the psychopathological exploration that allows to recognize the
main psychiatric syndromes.

_ To know the bases of the relationship between health and environment.

_ To know the biological, psychological and social foundations of personality disorders and abnormal behavior.

_ To recognize, diagnose and guide the management of psychiatric disorders.

_ To know the basics of psychological treatment.

_ To know how to perform a complete psychiatric anamnesis, centered on the patient and oriented to the
different psychopathologies, interpreting their meaning.

_ To know the main groups of drugs, doses, routes of administration and pharmacokinetics, their interactions
and adverse effects, and prescription and pharmacovigilance.

**Competences**

- Demonstrate sufficient supervised clinical experience in hospitals or other healthcare centres, and
familiarity with patient-centred care management and the correct use of tests, medicines and other
resources of the healthcare system.
- Demonstrate understanding of the principles of normal human behaviour and its alterations in different
contexts.
- Demonstrate, in professional activity, a perspective that is critical, creative and research-oriented.
- Establish a diagnostic approach and a well thought-out strategy for action, taking account of the results
of the anamnesis and the physical examination, and the results of the appropriate complementary tests
carried out subsequently.
- Establish the diagnosis, prognosis and treatment, basing decisions on the best possible evidence and a
multidisciplinary approach focusing on the patient's needs and involving all members of the healthcare
team, as well as the family and social environment.
- Identify and measure the affective and emotional components of human behaviour and their disorders.
- Indicate the basic diagnosis techniques and procedures and analyse and interpret the results so as to
better pinpoint the nature of the problems.
- Indicate the most suitable treatment for the most prevalent acute and chronic processes, and for the
terminally ill.
- Obtain and prepare a patient record that contains all important information and is structured and
patient-centred, taking into account all age and gender groups and cultural, social and ethnic factors.
- Obtain and use epidemiological data and assess trends and risks for decision-making on health.
- Perform a general and a system-by-system physical examination appropriate to the patient's age and
sex, in complete and systematic way, and a mental evaluation.
- Perform the basic practical procedures of examination and treatment.
- Put forward suitable preventive measures for each clinical situation.
- Recognise and take action in life-threatening situations and others that require an immediate response.
- Recognize the determinants of population health, both genetic and dependent on gender, lifestyle, and
demographic, environmental, social, economic, psychological and cultural factors.

**Learning Outcomes**

1. Classify the disorders of mood and anxiety.
2. Classify the methodology of psychiatric assessment.
3. Conduct a psychiatric interview and complementary neuropsychological examinations.
4. Define the concept of psychiatry.
5. Demonstrate, in professional activity, a perspective that is critical, creative and research-oriented.
6. Describe psychiatric emergencies.
7. Describe psychiatric prevention, levels and types of action.
8. Describe the care services that attend to the mentally ill.
9. Describe the etiopathogenic bases, the diagnostic process, the clinical evolution and the treatment approaches in the psychiatric nosological entities.
10. Describe the semiology of the main mental disorders.
11. Design guidelines on treatment following current psychopharmacological and biological therapeutic strategies.
12. Detect disorders of thought and judgement for the characterisation of the mental state.
14. Detect the emotional components of organic illness and mental illness.
15. Detect the risk of suicide.
16. Detect the risk of violence.
17. Differentiate between psychopathological manifestations.
18. Establish guidelines for acting in psychiatric emergencies.
19. Explain the biological, psychological and social bases of psychiatry.
20. Explain the procedure for a psychiatric examination.
21. Explain the psychiatry of interconsultation and liaison.
22. Give guidance on the management of psychiatric disorders.
23. Identify epidemiological data in the field of psychiatry.
24. Identify the main classification systems in psychiatry.
25. Identify the symptoms and clinical forms of mood disorders and anxiety.
26. Identify the therapy options for the main mental illnesses.
27. Indicate psychiatric therapy decisions.
28. Integrate knowledge of psychopathology of consciousness, attention and orientation, thought and language, memory, perception, affect, psychomotricity and intelligence.
29. Interpret the results of a psychiatric examination.
30. Perform a complete psychiatric examination in a real medical context.
31. Relate the main techniques in psychotherapy to their indications.
32. Set up a psychiatric medical record for a person with a psychiatric illness and one with an organic illness.

Content


Distributive blocks

The content is developed in:

A: 35 theoretical classes of one hour each.

B: 6 specialized seminars (SESP typology) of two hours each.

C: 7 clinical care practices (PCA, PCLI typology) of 3 hours each.

D: Individual work.
Theory

35 theoretical classes of 60 minutes with the following agenda:

Topic 1. Concept of Psychiatry. History of Psychiatry Psychiatry and Medicine
Objectives and evolution of assistance to mental illness from ancient Greece to the present day.

Topic 2. Study methods. Models and psychiatric theories
Most important psychiatric conceptual models: biological, psychological and social.

Topic 3. Psychopathology and psychiatric propaedeutics
Differential learning of the clinical history in psychiatry in relation to the conventional medical clinical history. Introduction to psychopathological exploration and syndromic diagnosis.

Topic 4. Psychiatric nosology
Identification of the large nosological groups. Bases of the classifications.

Topic 5. Organic mental disorders I
Organic mental disorder in current classifications (DSM-5 and ICD-10). Checked identification of Delirium or confusional syndrome.

Topic 6. Organic Mental Disorders II and Cognitive Deterioration
Identification of dementia pictures from the perspective of mental health.

Topic 7. Schizophrenic Disorders I
Concept and description Epidemiology, exploration and bases of diagnosis.

Topic 8. Schizophrenic disorders II
Differential diagnosis Treatment.

Topic 9. Delirious and schizoaffective disorders
Clinical presentation of delusional and schizoaffective disorders. Diagnosis. Referral criteria. Treatment.

Topic 10. Addictive behaviors I
Basic knowledge of disorders related to the consumption of different substances of abuse (alcohol, nicotine). Epidemiology of consumption. Clinic associated with consumption.

Topic 11. Addictive behaviors II
Basic knowledge of disorders related to the consumption of different substances of abuse and behavioral additions. Epidemiology of consumption. Clinic associated with consumption.

Topic 12. Affective disorders I
Diagnosis of depressive and manic episodes. Treatment of first choice in non-specialized areas and referral criteria. Integrated treatments.

Topic 13. Affective disorders II

Diagnosis of depressive and manic episodes. Treatment of first choice in non-specialized areas and referral criteria. Integrated treatments.

Topic 14. Anxiety disorders

Concept and description of the different anxiety disorders. Epidemiology, exploration and bases of diagnosis.

Topic 15. Obsessive and phobic disorders

Concept and description of ruminative and compulsive phenomena, as well as phobias. Epidemiology, exploration and bases of diagnosis. Differential diagnosis and treatment.

Topic 16. Conversion and somatization disorders


Topic 17. Disorders related to traumas and adaptation stress factors.


Topic 18. Sexual response and sexual dysfunctions


Topic 19. Suicidal behavior


Topic 20. Personality Disorders I

Concept and description of the different personality disorders. Epidemiology, exploration and bases of diagnosis.

Topic 21. Personality disorders II

Concept and description of the different personality disorders. Epidemiology, exploration and bases of diagnosis.

Topic 22. Child psychiatry I


Topic 23. Child psychiatry II. Behavioral disorders in preschool, school and adolescence


Evaluation and correct derivation.
Topic 24. Psychosomatic pathology and liaison psychiatry

Study of psychological factors that may affect the presentation and courses of general disorders. Therapeutic maneuvers for its healing or improvement. Psychological factors in the etiology of some medical disorders. Psychotherapeutic resources to associate them with the general treatment.

Topic 25. Eating behavior disorders

Knowledge of eating behavior disorders to be able to diagnose or detect a case practicing in any non-psychiatric specialty.

Topic 26. Psychiatry in older adults

Application of the characteristics of the elderly to psychiatric pathology. Identification of psychiatric disorders typical of old age. Application of the corresponding treatments, taking into account the conditions and the age of the person.

Topic 27. Sleep disorders

How to perform sleep exploration. Neurophysiological bases of sleep disorders, mainly those that occur in psychiatric diseases.

Topic 28. Biological treatments: psychodrugs I (anxiolytics and antidepressants)

Basic notions of psychopharmacology. General knowledge about psychotropic drugs: when they have to be used, how and what are the main advantages and disadvantages.

Topic 29. Biological treatments: psychotropic drugs II (antipsychotics) Basic notions of psychopharmacology.

Topic 30. Biological treatments: psychotropic drugs III (mood stabilizers and other psychotropic drugs) Basic notions of psychopharmacology.

Topic 31. Other biological treatments

Biological treatments in psychiatry. Basic notions of electroconvulsive therapy (ECT), psychosurgery and other treatments.

Topic 32. Psychological treatments I

Main modalities of psychological treatments and their indications in the context of psychiatric treatments.

Topic 33. Psychological treatments II

Main modalities of psychological treatments and their indications in the context of psychiatric treatments.

Topic 34. Psychiatric emergencies

Identify the characteristics of a psychiatric emergency. Crisis intervention. Emergency treatment in disorders due to anguish and affective disorders.

Topic 35. Brain and behavior

Basic applications of neuroimaging techniques in psychiatry.

Seminars
The seminars will be adapted to the reality and assistance of each of the Hospital Teaching Units (UDH), which will make explicit the first day of class of the subject, through the teachers responsible for the subject in the UDH. There will be a total of 6 seminars (SESP typology) of 2 hours each:

Seminar 1: Psychopathology and psychiatric propaedeutics.

Seminar 2: Addictive behaviors.

Seminar 3: The doctor before mental illness.

Seminar 4: Specific populations.

Seminar 5: Intervention in critical situations.

Seminar 6: The psychiatric dimension of medicine.

Clinical practices

21 hours of compulsory internship

The clinical practices aim to approach and experience the practice of psychiatry to the student, who, always accompanied by the teacher, will receive the appropriate explanations for a better understanding of the subject and the learning of skills. The practices are especially useful for the student to learn and develop the skills of the doctor-patient interview in general and the interview of the psychiatric patient in particular to facilitate the performance of a psychopathological exploration and a syndromic diagnosis. It is proposed a rotation by different psychiatric care devices or multimedia activities, in order to make contact with the different aspects of psychiatric and mental health care. Thus, it is proposed that the student accompany the teacher in the course of clinical assistance in any of the following devices:

- Unit of acute Psychiatry

- Addictions Unit (unit of admission and / or ambulatory)

- Mental health Center

- Specific program of each of the Hospital Teaching Units (for example, affective disorders, interconsultation, neurodevelopmental disorders, suicide prevention program, child and youth psychiatry, etc.)

The final organization of the practices will be adapted to the actual attendance of each of the Hospital Teaching Units (UDDDHH), which will be made explicit on the first day of class of the subject, through the professors responsible for the subject at the UDH.

Methodology

This Guide describes the framework, contents, methodology and general rules of the subject, in accordance with

The final organization of the subject with respect to the number and size of groups,

distribution in the calendar and dates of exams, specific criteria for evaluation and review of exams,

will be specified in each of the Hospital Teaching Units (UDH), which will make it explicit through its web pages.
through the professors responsible for the subject at the UDH.

The vehicular language will mainly be Catalan and 33% of the hours of the subject will be done in English. The parts in English will be autonomous work such as the preparation of papers, reading articles, interesting reports, as well as theoretical classes. At the beginning of each course each teaching unit will determine with the students the theoretical classes that will be done in English.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Responsible</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>UDHSP</td>
<td>Dr. Enric Álvarez</td>
<td><a href="mailto:ealvarez@santpau.cat">ealvarez@santpau.cat</a></td>
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</tr>
</tbody>
</table>

General teaching methodology:
Credits subject: 6 ECTS = 150 hours

AUTONOMOUS WORK (50% total = 75 hours).

Comprehensive reading of texts and articles, study and realization of schemes, summary and conceptual assimilation of the contents.

Preparation of presentations and deliveries.

EVALUATION (approximate 5%, total = 7.5 hours): 1 final synthesis exam, evaluation of practices and continuous evaluation.

DIRECTED TEACHING TYPOLOGIES:

45% total 67.5 hours Theory (lectures, TE typology).

Group size: registration group. Scheduled sessions 35 (1 h per session).

Specialized seminars (SESP typology). The standard size is 20 and the splittings are established from 25 students per group.

Scheduled sessions: 6 sessions of 2 hours or 12 sessions of 1 hour (total: 12 hours).

CLINICAL PRACTICES (PCA):

Clinical care practices (PCA). They will be held in a group of 2-5 students. Total: 21 hours.

The students will go to the facilities of the hospitalization rooms, operating theaters, outpatient clinics or examination cabinets.

Activities

<table>
<thead>
<tr>
<th>Title</th>
<th>Hours</th>
<th>ECTS</th>
<th>Learning Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type: Directed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CLINICAL ASSISTANCE PRACTICES (PCA)</td>
<td>21</td>
<td>0.84</td>
<td>32, 20, 30, 3</td>
</tr>
<tr>
<td>SPECIALIZED SEMINARS</td>
<td>12</td>
<td>0.48</td>
<td>14, 13, 17, 28, 29, 22</td>
</tr>
<tr>
<td>THEORY</td>
<td>35</td>
<td>1.4</td>
<td>1, 2, 4, 8, 7, 10, 9, 6, 12, 15, 16, 11, 18, 21, 19, 23, 24, 25, 26, 27, 31</td>
</tr>
</tbody>
</table>

Type: Autonomous

| WORK PREPARATION / PERSONAL STUDY / READING ARTICLES / REPORTS OF INTEREST / MOODLE DEPRESSION COURSE | 74.5 | 2.98 | 5 |

Assessment

All the contents exposed in the theoretical classes and seminars may be subject to evaluation. At the end of the subject there will be an evaluation of the theoretical part that will consist of multiple choice questions (PEM) and restricted questions (50% contingency).
The practices will be evaluated with a clinical case and an online depression course (in total continuity 30%). In the evaluation of the clinical case a psychopathological, diagnostic and therapeutic evaluation will be requested (with a weight of 20% of the final grade of the subject).

On the other hand, within the evaluation of practices, students must take an online course on depression that will count 10% of the final grade of the subject. You must have done and passed the online depression course to have access to 30% of the final grade that the practices represent.

There will be a continuous evaluation of the progress of the student in the subject (total contingency 20%) through participation in the theoretical classes and seminars (5% of the final grade of the subject) and through short questions throughout the course at the end the classes (15% of the final grade of the subject). The procedure for completing the questions at the end of the theoretical classes and/or seminars will be explained in each Teaching Unit at the beginning of the course.

Students who, after the evaluation process, have not passed the theoretical assessment exam of the subject, will have the option of a recovery test in February. The different scores of the continuous assessment and practices cannot be recovered in this final evaluation in February.

Students who do not take the theoretical and practical assessment tests will be considered as not evaluated, exhausting the rights to the registration of the subject.

## Assessment Activities

<table>
<thead>
<tr>
<th>Title</th>
<th>Weighting</th>
<th>Hours</th>
<th>ECTS</th>
<th>Learning Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theory: Assistance and active participation in class and seminars</td>
<td>5%</td>
<td>0.38</td>
<td>0.02</td>
<td>26, 28, 22</td>
</tr>
<tr>
<td>Theory: Written evaluations through objective tests: Trial tests; Of restricted questions</td>
<td>15%</td>
<td>1.12</td>
<td>0.04</td>
<td>5, 7, 30</td>
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<tr>
<td>Practices: Written evaluations through objective tests: Essay tests; Of restricted questions</td>
<td>20%</td>
<td>1.5</td>
<td>0.06</td>
<td>11, 32, 20, 30, 26, 27, 28, 29, 3</td>
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<tr>
<td>Practices: Written evaluations through objective tests: Selection items; Multiple choice items</td>
<td>10%</td>
<td>0.75</td>
<td>0.03</td>
<td>14, 17, 30, 25, 27, 28, 29, 22</td>
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<tr>
<td>Theory: Evaluations written through objective tests: Selection items; Multiple choice items</td>
<td>50%</td>
<td>3.75</td>
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</tr>
</tbody>
</table>

## Bibliography


– Stern, Theodore A; Rosenbaum, Jerrold F; Fava, Maurizio; Biederman, Joseph; Rauch, Scott. Comprehensive Clinical Psychiatry. Massachusetts General Hospital 2008.
