

University of Toledo
College of Languages, Literature, and Social Sciences
Department of Psychology
PSY 6250 & 7250 Seminar in Clinical Psychology – Clinical Psychopharmacology
Syllabus - Spring 2013

Instructor: Jason C. Levine, PhD
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Office Hours: TBD
Class Days/Time: Thursdays 0900-1130am
Classroom: UH6400
Prerequisites: Graduate student status, psychobiology or equivalent, coursework in psychopathology

Short Course Description:

Seminar examining psychopharmacological medications, their basic classification, indications, contraindications, and side effects. Suited for non-psychiatry students and providers.

Course Description:

This course will provide an overview of commonly used psychopharmacological medications, their basic classification, indications, contraindications, and side effects. The overarching goal of this seminar is to provide students with basic knowledge and understanding of psychopharmacological treatments in order to communicate more meaningfully and consult with consumers and other healthcare providers. This course is designed for non-psychiatry students and providers that work in a mental health related field or in a primary care medical setting.

Learning Outcomes:

- Students will recognize and articulate common psychotropic medication names and their classifications, indications, contraindications, and side effects.
- Students will recite evidence-based practice guidelines for mood disorders, anxiety disorders, psychotic disorders, insomnia, substance use disorders, and dementia.
- Students will distinguish among psychotherapeutic and medication treatment options and develop appropriate treatment plans for simple case examples.
- Students will demonstrate consultation skills during in classroom role-playing exercises and oral exam.
- Students will demonstrate a basic knowledge of behavioral health integration in medical settings.

- Display critical thinking skills by writing reaction papers to seminal scientific journal articles.

Growth Targets:

Students are expected to increase the number of correct multiple-choice questions by at least 50% on pre and posttest assessments

Students are expected to report higher confidence and mastery of clinical psychopharmacology on pre and posttest assessments.

Recommended Text:

Handbook of Clinical Psychopharmacology for Therapists, 6th ed. by John D. Preston, Psy.D., A.B.P.P.; John H. O'Neal, M.D.; and Mary C. Talaga, R.Ph., Ph.D. New Harbinger Publications, Oakland, Calif., 2010

Journal Articles:

There are a number of required journal articles and supplemental articles associated with each topic. All of the articles are available in full-text through the University of Toledo Carlson Library. Required articles are boldfaced in the Tentative Course Outline.

Classroom Protocol and Course Requirements:

The structure of the course will generally follow a didactic and interactive discussion format. The small classroom size affords us the opportunity to evoke and carryout thoughtful in-depth discussions. Therefore, attendance in this class is essential and you are expected to contribute intelligently. Most of the material on exams will come from class meetings. Frequent absences in this course will certainly have an adverse effect on your learning outcome and ultimately your grade. If you do happen to miss class, it is your responsibility to contact with a fellow classmate to receive that day's notes and announcements.

6. *Academic Honesty:* Department of Psychology Statement on Academic Honesty -

Academic honesty is expected from students enrolled in courses and programs offered by the Department of Psychology; violations of this expectation will not be tolerated.

Violations of tile expectation of academic honesty include, but are not limited to:

- * Obtaining or attempting to obtain a copy of an examination prior to its administration.
- * The unauthorized use of study material or textbooks during an examination.
- * Obtaining unauthorized assistance from and giving unauthorized assistance to another individual during an examination or completion of an assignment.
- * Plagiarism in written assignments. Plagiarism includes: (a) using, copying or paraphrasing another author's materials without appropriate acknowledgement through quotation and citation; (b) unauthorized collaboration in the preparation of reports, term papers, or theses.

In accordance with the Policy Statement in the University Catalog, instructors have the responsibility and right to bring cases of alleged dishonesty to department, college, and university administrative units. Students involved in academic dishonesty may expect to receive a grade of F on specific assignments, as well as in the course where the assignment was made.

Student Behavior - Students are expected to follow University policy with regards to proper conduct in the classroom, as detailed in the University of Toledo Student Handbook. Disciplinary action for violation of these policies will be decided on a case-by-case basis and will be in accord with University policy.

7. Class Communication: the Instructor will communicate to students by email about class announcements, changes to the course schedule (including class cancellations), and grades. It is the student's responsibility to check their UT email account daily for such announcements.

8. Additional Ground Rules: 1) Grade disputes must be submitted in writing in order to be considered. 2) Grievances about the course and/or instructor should be brought up with that individual first in order to resolve the matter, prior to discussing the matter with the department/university's administration.

9. Office of Accessibility: Students registered with the Office of Accessibility for a disability must discuss possible accommodations with the Instructor during the first week of class in order to allow such accommodations to occur.

Changes to the Syllabus:

The information in this syllabus, including the schedule of course activities and examinations, is subject to change. Changes will be announced in class.

Assignments and Grading Policy

Assessment Items			
	#	Points Each	% of Final Grade
Written Exam	2	100	40%
Oral Exam	1	100	20%
Reading Response	10	10	20%
Drug Name Quiz	1	100	20%
Psychiatry Response	1	-	Clinical students only
Total		500	100%

Assigned Readings Policy:

You are required to do the weekly readings before coming to each class. Required readings are boldfaced in the course outline. If it appears through class discussion that you have not thoroughly done the weekly reading, I will institute a pop-quiz strategy. If we end up having pop-quizzes, they will be counted toward your grade. To encourage you to do the difficult reading, a take home “quiz” will be required for those book chapters, and Reading Responses are required for those additional articles assigned. Although we will not cover all of the reading material in class, you are nonetheless responsible for its content.

Reading Responses:

Written responses to each assigned journal reading shall consist of a summary paragraph AND a paragraph consisting of your evaluation, synthesis, or analysis of the material. These written responses are expected to expand your knowledge of psychopharmacological concepts and issues, as well as provide an opportunity to practice critical thinking skills. Responses should be typed, *single-spaced*, 12-font, and emailed to me no later than the day of class before class.

Psychiatry Shadowing (Clinical Psychology Students Only):

Students in the UT’s Clinical Psychology Doctoral Program are required to spend at least one half-day shadowing a psychiatrist or psychiatry resident in the Psychiatry Outpatient Clinic on the UT Health Sciences Campus. Dates and times are coordinated between the instructor and the Department of Psychiatry. Clinical Students will meet with the Instructor at the beginning of the Term to schedule their shadowing times. Clinical students are expected to write a 1 page summary and reaction paper about their experience. This paper is to be submitted to the Instructor within 1 week after their last scheduled session.

Tentative Course Outline:

Date	Topic	Readings
Jan 10/17/24	Overview, Introduction, Pharmacokinetics, Pharmacodynamics	<p>Preston Text 1/2/3/4</p> <p>Antonuccio, D. O., Danton, W. G., & McClanahan, T. M. (2003). Psychology in the prescription era: Building a firewall between marketing and science. <i>American Psychologist, 58</i>, 1028–1043.</p> <p>Miller, G.A. (2010). Mistreating psychology in the decades of the brain. <i>Perspectives on Psychological Science, 5</i>, 716-743.</p> <p>Baker, C. B., et al. (2003). Quantitative analysis of sponsorship bias in economic studies of antidepressants. <i>British Journal of Psychiatry, 183</i>, 498-506.</p> <p>Drug List Handout</p>
Jan 24/31	Antipsychotic Medications <u>Drug Name Quiz</u>	<p>Preston Text 10/18/20</p> <p>Tandon, R. & Jibson, M. D. (2003). Efficacy of newer generation antipsychotics in the treatment of schizophrenia. <i>Psychoneuroendocrinology 28</i>, 9–26.</p> <p>Leucht, S., Pitschel-Walz G., Abraham D, & Kissling, W. (1999). Efficacy and extrapyramidal side-effects of the new antipsychotics olanzapine, quetiapine, risperidone, and sertindole compared to conventional antipsychotics and placebo: A meta-analysis of randomized controlled trials. <i>Schizophrenia Research, 35</i>, 51–68.</p> <p>Freedman, R. (2003). Schizophrenia. <i>New England Journal of Medicine, 349</i>, 1738-49.</p>
Feb 7/14	Antidepressant Medications	<p>Preston Text 6/15</p> <p>Dimidjian, S., Hollon, S. D., Dobson, K. S., Schmalings, K. B., Kohlenberg, R. J., Addis, M. E., et al. (2006). Randomized trial of behavioral activation, cognitive therapy, and antidepressant medication in the acute treatment of adults with major depression. <i>Journal of Consulting and Clinical Psychology, 74</i>, 638-670.</p> <p>Anderson, I.M., Ferrier, N., Baldwin, R., et al., (2008). Evidence-based guidelines for treating depressive disorders with antidepressants: A revision of the 1993 British Association for Psychopharmacology guidelines. British Association for Psychopharmacology. <i>Journal of</i></p>

		<p>Psychopharmacology. 14. 3-20.</p> <p>Jacobson NS, Hollon SD. Cognitive behavior therapy vs pharmacotherapy: Now that the jury's returned its verdict, it's time to present the rest of the evidence. <i>Journal of Consulting and Clinical Psychology</i>, 64, 74-80, 1996.</p>
Feb 21	<u>EXAM 1</u>	
Feb 28	NO CLASS	
Mar 7	NO CLASS	Spring Break
Mar 14	Mood Stabilizing Medications, cont.	<p>Preston Text 6/7/16</p> <p>Belmaker, R. H.(2004). Bipolar disorder. <i>New England Journal of Medicine</i>, 351, 476-86.</p> <p>Lingam, R. & Scott, J. (2002) Treatment non-adherence in affective disorders. <i>Acta Psychiatrica Scandinavica</i>, 105(3), 164-172.</p> <p>Brondolo E. & Mas, F. (2001) Cognitive behavioral strategies for improving medication adherence in patients with bipolar disorder. <i>Cognitive and Behavioral Practice</i>, 8(2), 137-147.</p>
Mar 21/28	Anxiety Disorders and Sleep Aid Medications	<p>Preston Text 8/11/17</p> <p>Rothbaum, B.O., Cahill, S.P., Foa, E.B., Davidson, J.R.T., Compton, J., Connor, K., Astin, M., & Hahn, C. (2006). Augmentation of sertraline with prolonged exposure in the treatment of PTSD. <i>Journal of Traumatic Stress</i>, 19, 625-638.</p> <p>Simpson, H.B., Foa, E.B., Liebowitz, M.R., Ledley, D.R., Huppert, J.D., Cahill, S.P., et al. (2008). A randomized controlled trial of cognitive-behavioral therapy for augmenting pharmacotherapy in obsessive-compulsive disorder. <i>American Journal of Psychiatry</i>, 165, 621-630.</p> <p>Mitte, K. (2005). A meta-analysis of the efficacy of psycho- and pharmacotherapy in panic disorder with and without agoraphobia. <i>Journal of Affective Disorders</i> 88, 27 - 45.</p> <p>Kan, C. C., et al. (2004). Determination of the main risk factors for benzodiazepine dependence using a multivariate and multidimensional approach. <i>Comprehensive Psychiatry</i>, 45, 88-94.</p> <p>Morin, A. K. (2006). Strategies for treating chronic insomnia.</p>

		<i>The American Journal of Managed Care, 12, 230-235.</i>
Apr 4	Miscellaneous Medications; ADHD meds, Beta-blockers, PTSD meds, substance use disorders	TBD
Apr 11	Childhood and Adolescent Medications Geriatric Psychiatry	TBD
Apr 18	<u>EXAM 2 – Cumulative</u>	
Apr 25	NO CLASS	
May 5	EXAM WEEK	Oral Exams