

Multiple Personality Disorder Diagnosis Clinical Features And Treatment

Geared to the needs of mental health practitioners unfamiliar with dissociative disorders, this volume presents a comprehensive and integrated approach to diagnosis and treatment. Each step—from first interview to final post-integrative treatment—is systematically reviewed, with detailed instructions on specific diagnostic and therapeutic techniques and examples of their clinical applications. Concise yet thorough, the volume offers expert advice on such topics as how to foster a strong therapeutic alliance, how to manage crises, and what basic errors to avoid.

Increasing numbers of people are moving beyond psychological therapy to seek alternative spiritual perspectives to medical and mental health care such as yoga and meditation. The Psychospiritual Clinician's Handbook: Alternative Methods for Understanding and Treating Mental Disorders provides leading-edge theoretical perspectives and practical applications by recognized experts in positive and integrative psychotherapy. Readers will find helpful illustrations of body positions used in yoga and meditation plus photographs, tables, figures, and detailed case studies that illustrate the process.

Learn about a pioneering alternative to antipsychotic medication for schizophrenia! In *Schizophrenia: Innovations in Diagnosis and Treatment*, Dr. Colin A. Ross—founder of the Colin A. Ross Institute for Psychological Trauma—presents a new theory of the existence of a dissociative subtype of schizophrenia. Dr. Ross determines that some patients diagnosed with schizophrenia have symptoms closely related to dissociative identity disorder—or multiple personality disorder—and have a history of psychological trauma. In these cases, this unprecedented book proposes that the disorder is treatable—perhaps even curable—using psychotherapy rather than drugs. *Schizophrenia: Innovations in Diagnosis and Treatment* will revolutionize the profession of psychology with data, arguments, and a review of previously published literature to support Dr. Ross's theory. Traditionally, schizophrenia is considered manageable only by a lifetime of psychotropic drugs—expensive, harmful, and often ineffectual. This book offers an alternative free of damaging chemicals to improve quality of life for patients with schizophrenia whose symptoms may be trauma-based. *Schizophrenia: Innovations in Diagnosis and Treatment* offers specific, detailed ideas and research on: genetic studies showing that while there is a genetic connection, it is not prevalent enough for biology to be the only predisposing factor in all cases of schizophrenia a comparison of the definitions of psychosis, schizophrenia, and dissociation—from the DSM-IV-TR and other texts—to determine relationships between the three disorders proposed diagnostic criteria for dissociative schizophrenia—dissociative amnesia, depersonalization, the presence of two or more distinct personalities/identities, auditory hallucinations, extensive comorbidity, and severe childhood trauma the principles of psychotherapy for dissociative schizophrenia—when to start therapy, trauma therapy, how to establish communication with the patient, and therapeutic neutrality and more! With an extensive bibliography of literatures on trauma, dissociation, and psychosis, as well as numerous tables and case studies, this volume presents a strong case for a fresh methodology in the treatment of this psychological abnormality. The theory provided by Dr. Ross brings hope for recovery to individuals with dissociative schizophrenia. This one-of-a-kind book is a must-read for psychiatrists, psychologists, and other professionals involved in research and/or treatment of schizophrenia. Its comprehensible text makes it useful for patients with schizophrenia and their family members as well.

Childhood Antecedents of Multiple Personality Disorder includes topics such as the effect of child abuse on the psyche, the development of multiple personality disorder: predisposing, precipitating, and perpetuating factors, and the relationship among dissociation, hypnosis, and child abuse in the development of multiple personality disorder.

This account of multiple personality disorder (MPD) and related dissociative disorders presents the latest findings leading to a new model of MPD and a new therapeutic approach to its treatment. The book examines the large cluster of symptoms and dysfunctions associated with MPD, focusing on diagnosis, clinical features, and the relationship of MPD to other diagnoses. Data and clinical evidence are presented for a widely-accepted, but as yet unproven hypothesis that MPD arises as a dissociative strategy for coping with severe childhood trauma, usually involving physical or sexual abuse.

A comprehensive handbook that contains 28 chapters organized into five sections. Part I focuses on theoretical perspectives and includes biological, physiological, ethological, sociological, social psychological, psychoanalytic, and humanistic points of view. Part II considers such general issues as

DSM-IV and ICD-10 both diagnose personality disorders categorically, yet studies indicate that many patients meet criteria for an excessive number of diagnoses, raising the question of whether personality disorders are discrete conditions or rather distinctions along dimensions of general personality functioning. This collection of papers renews long-standing proposals for a dimensional model of personality disorder, describing alternative models, addressing questions about their clinical application and utility, and suggesting that future research seek to integrate such models within a common hierarchical structure. With contributions by preeminent researchers in the field, *Dimensional Models of Personality Disorders* is drawn from a conference series convened by APA, WHO, and NIH in order to plan for the fifth edition of the DSM. The Nomenclature Work Group concluded that consideration should be given to basing part or all of DSM-V on dimensions rather than categories, and recommended that a dimensional model for personality disorders should serve as a basis for exploring dimensional approaches in other areas. Accordingly, the volume opens with a presentation of 18 proposals for dimensional models and proceeds with provocative contributions on a number of related issues ranging from hard science to clinical practice. Among the topics addressed are Behavioral and molecular genetic research supporting an etiologically informed dimensional classification of personality disorders The as-yet tenuous associations between dimensional trait measures of personality as contained in the models of Cloninger, Depue, and Siever-Davis, and specific neurobiological measures, as examined in neurotransmitter research Potential links between

childhood and adolescent temperament and personality dimensions and adult personality psychopathology Studies examining the covariation of personality dimensions across cultures The continuity of Axis I and Axis II disorders and a proposed hierarchical structure of mental disorders that integrates the psychopathology of Axis I disorders with specific personality traits The dual challenges of coverage and cutoffs that must be addressed if dimensional models are to be considered viable alternatives to the existing categorical diagnostic system Although the editors acknowledge that concerns are certain to be raised regarding conversion to a dimensional classification -- such as the disruption to clinical practice by a radical shift in diagnosing personality disorder -- these papers make a strong case for opening the field to alternative ways of enhancing clinical utility and improving the validity of basic classification concepts. Together, they offer stimulating insight into how we approach personality disorders, with the hope of encouraging a new model of diagnosis for DSM-V.

Practical and provocative, this book serves as a guide for those who want a deeper look into the human psyche and a more encompassing vision of the less predictable aspects of the mind.

Dissociative Identity Disorder is a new and more accurate designation for what was formerly known as Multiple Personality Disorder. In this comprehensive and original book, some of the most eminent practitioners in the field offer the most current information on a variety of treatments for this fascinating and yet debilitating disorder.

Covering the range of clinical presentations, treatments, and levels of care, *Borderline Personality Disorder: A Clinical Guide, Second Edition*, provides a comprehensive guide to the diagnosis and treatment of borderline personality disorder (BPD). The second edition includes new research about BPD's relationship to other disorders and up-to-date descriptions of empirically validated treatments, including cognitive-behavioral and psychodynamic approaches. Compelling new research also indicates a much better prognosis for BPD than previously known. A pioneer in the field, author John Gunderson, M.D., director of the Borderline Personality Disorder Center at McLean Hospital, draws from nearly 40 years of research and clinical experience. The guide begins with a clear and specific definition of BPD, informed by a nuanced overview of the historical evolution of the diagnosis and a thoughtful discussion of misdiagnosis. Offering a complete evaluation of treatment approaches, Dr. Gunderson provides an authoritative overview of the treatment options and describes in-depth each modality of treatment, including pharmacotherapy, family therapy, individual and group therapy, and cognitive-behavioral therapies. Unlike other works, this book guides clinicians in using multiple modalities, including the sequence of treatments and the types of changes that can be expected from each mode. The discussion of each treatment emphasizes empirically validated therapies, helping clinicians choose modalities that work best for specific patients. In addition, *Borderline Personality Disorder: A Clinical Guide, Second Edition*, also outlines therapeutic approaches for multiple settings, such as hospitalization, partial hospitalization or day hospital programs, and levels of outpatient care. Complementing the well-organized treatment guide are a series of informative and intriguing sidebars, providing insight into the subjective experience of BPD, addressing myths about therapeutic alliances in BPD, and questioning the efficacy of contracting for safety. Throughout the book, Dr. Gunderson recommends specific do's and don'ts for disclosing the diagnosis, discussing medications, meeting with families, starting psychotherapy, and managing suicidality. A synthesis of theory and practical examples, *Borderline Personality Disorder: A Clinical Guide, Second Edition*, provides a thorough and practical manual for any clinician working with BPD patients.

Adult patients exhibit core symptoms: voices in the head and ongoing blank spells or periods of missing time. The voices are the different parts of the personality talking to one another and to the main, presenting part of the person who comes for treatment. Periods of missing time occur when aspects of the personality take turns being in control of the body and memory barriers are erected between them. Patients also experience symptoms such as depression, anxiety, eating disorders, substance abuse, sleep disorders, sexual dysfunction, psychosomatic symptoms, and symptoms that mimic schizophrenia. MPD patients have experienced the most extreme childhood trauma of any diagnostic group and therefore exhibit the psychobiology and psychopathology of trauma to an extreme degree. The good news is that once diagnosed, the MPD patient can be brought back to health. This book is important for all mental health professionals, and also for the general reader interested in psychiatric phenomena.

Designed to accompany the SCID-D, this guide instructs the clinician in the administration, scoring and interpretation of SCID-D interview. The Guide describes the phenomenology of dissociative symptoms and disorders, as well as the process of differential diagnosis. This revised edition includes a set of decision trees and four case studies.

In this book, expert contributors address the sequential clinical steps to be taken in treating difficult-to-treat psychiatric patients by offering a blend of evidence-based clinical recommendations, detailed case vignettes, treatment algorithms, and -- when necessary to go beyond the reach of evidence -- the clinical wisdom of leaders in the field.

Building on the comprehensive theoretical model of dissociation elegantly developed in *The Dissociative Mind*, Elizabeth Howell makes another invaluable contribution to the clinical understanding of dissociative states with *Understanding and Treating Dissociative Identity Disorder*. Howell, working within the realm of relational psychoanalysis, explicates a multifaceted approach to the treatment of this fascinating yet often misunderstood condition, which involves the partitioning of the personality into part-selves that remain unaware of one another, usually the result of severely traumatic experiences. Howell begins with an explication of dissociation theory and research that includes the dynamic unconscious, trauma theory, attachment, and neuroscience. She then discusses the identification and diagnosis of Dissociative Identity Disorder (DID) before moving on to outline a phase-oriented treatment plan, which includes facilitating a multileveled co-constructed therapeutic relationship, emphasizing the multiplicity of transferences, countertransferences, and kinds of potential enactments. She then expands the treatment possibilities to include dreamwork, before moving on to discuss the risks involved in the treatment of DID and how to mitigate them. All concepts and technical approaches are permeated with rich clinical examples.

For clinicians, Dissociative Identity Disorder (DID), or its progenitor Multiple Personality Disorder (MPD), is an important but beleaguered syndrome. It is immutably welded to the more general subject of trauma and abuse, and sits in the eye of the media storm. Since 1994 when the controversy surrounding DID culminated in the alteration of its very name and diagnostic criteria, DID (or MPD) has been held up to public and professional scrutiny. Its continued existence in the psychiatric lexicon will depend on the arguments and research that are generated. In the midst of the turmoil, this book offers a thoughtful and occasionally heated forum for skilled clinicians and academicians to grapple with the existence of DID, its prevalence, etiology, treatment modalities, and

related controversies. Clinicians concerned and curious about this intense debate will find a thorough discussion of DID, its theoretical ramifications, and the extreme feelings that it evokes. Encounters with people diagnosed with DID invariably transform therapists into enthusiasts or skeptics. This is a book written by both enthusiasts and skeptics, and it will alternatively enrage and delight readers who themselves struggle with the diagnosis and its treatment.

This book is based on a symposium that was inspired by the late Donald O. Hebb who, in his latter years while an Honorary Professor in the Department of Psychology at Dalhousie University, became very interested in the phenomenon of multiple personality and other dissociative states. Hebb was troubled by the lack of understanding of dissociative behavior and, through his discussions with basic science and clinical colleagues in psychology and psychiatry, he became convinced that the subject would be a figurative gold mine for psychological theory and experimentation. The purpose of the symposium was to bring together clinical and research scientists with an interest and expertise in dissociative phenomena such as multiple personality disorder, hysteria and hypnosis. This group would exchange ideas and findings, discuss theory, and lay the groundwork for an interdisciplinary research program into dissociative phenomena generally, and more specifically into multiple personality disorder and its principal precipitating factor -- physical and sexual abuse in children.

Within the last decade there has been a tremendous explosion in the clinical, theoretical, and empirical literature related to the study of dissociation. Not since the work done at the turn of the century by Pierre Janet, Morton Prince, William James, and others have the psychological and medical communities shown this great an interest in describing and understanding dissociative phenomena. This volume is the result of this significant expansion. Presently, interest in the scientific and clinical progress in the field of dissociation is indicated by the following: 1. The explosion of conferences, workshops, and seminars devoted to dissociative disorders treatment and research. 2. The emergence of NIMH-supported investigations that focus on dissociation. 3. The burgeoning literature on dissociation. According to a 1992 bibliographic analysis of the field by Goettman et al. (1992), 72% of all writings on the topic have appeared in the past decade, with about 1000 published papers scattered across diverse disciplines and journals. 4. Current interest in dissociation as reflected in the appearance of major articles and special issues in respected psychology and psychiatry journals. 5. The initiation of a journal entitled Dissociation (Richard Kluft, MD, Editor) devoted to the area.

Its previous edition hailed as "the best reference for the majority of practicing psychiatrists" (Doody's Book Reviews) and a book that "more than any other, provides an approach to how to think about psychiatry that integrates both the biological and psychological" (JAMA), The American Psychiatric Publishing Textbook of Psychiatry has been meticulously revised to maintain this preeminence as an accessible and authoritative educational reference and clinical compendium. It combines the strengths of its three editors -- Robert Hales in clinical and community psychiatry, Stuart Yudofsky in neuropsychiatry, and new co-editor Glen Gabbard in psychotherapy -- in recruiting outstanding authors to summarize the latest developments in psychiatry and features 101 contributors, 65 of whom are new to this edition. The book boasts a new interior design, with more figures and color throughout to aid comprehension. Each chapter ends with 5-10 key points, 5-10 recommended readings, and helpful Web sites not only for the clinician but also for patients and family members. The book also includes complimentary access to the full text online. Online benefits include powerful searching, electronic bookmarking, and access by username and password from wherever you have Web access -- especially convenient for times when the print copy of your textbook is not where you are. The online version is accompanied by a downloadable PowerPoint presentation, which contains a wealth of material to enhance classroom presentation, study, and clinical use. Among the improvements to this edition's content: • Of the text's 44 chapters, 23 either feature new topics or have new authors, making this the most completely revised edition yet. • New basic-science chapters on cellular and molecular biology of the neuron and on neuroanatomy for the psychiatrist conveniently distill essential information on the biological foundations of psychiatric disorders for clinicians. • A new chapter on human sexuality and sexual dysfunctions, and another new chapter on treatment of gay, lesbian, bisexual, and transgender patients, equips clinicians to address the entire spectrum of sexual issues and their attendant mental health concerns. • New chapters on nonpharmacological somatic treatments, supportive psychotherapy, and combination psychotherapy and pharmacotherapy augment the section on psychiatric treatments. • A new chapter on the assessment of dangerousness -- an individual's propensity to commit violent acts -- presents helpful guidelines for appropriately evaluating and minimizing the risk of violence in both outpatient and inpatient settings. Why The American Psychiatric Publishing Textbook of Psychiatry will be your first choice among comprehensive psychiatry textbooks: • Complimentary Access to the Full Text Online -- Online benefits include powerful searching, electronic bookmarking, and download to PDA. • PowerPoint Presentation -- Online version is accompanied by a downloadable PowerPoint presentation, which contains a wealth of material to help you enhance classroom presentation, study, and in clinical use. • Self-Assessment -- An interactive online Self-Assessment allows you to assess your knowledge of each chapter, with links back to the textbook when more study is needed. • Summary Points -- Each chapter ends with 5-10 key points, 5-10 recommended readings, and helpful web sites not only for the clinician but also for referral to patients and family members. • Co-Editor Glen O. Gabbard, M.D. -- As the third Co-Editor, Dr. Gabbard adds depth and perspective to psychotherapeutic approaches. • Chapter Authors -- Partnership of senior and junior faculty brings fresh insights tempered by wisdom and experience. • Peer-Reviewed -- Rigorously peer reviewed and updated to reflect the rapidly changing profession. • Disclosure of Interest Statements -- Disclosure from each chapter author assures you that potential biases have been removed. • Comprehensive But Concise -- Inclusion of essential information eases information overload. • Better Layout -- Larger type for text makes book easier to read and color figures are provided throughout the text. It's no wonder that this text has established itself as both a leading scholarly reference and an indispensable clinical resource. The American Psychiatric Publishing Textbook of Psychiatry is a proven teaching tool and an essential component of every practitioner's library.

This diagnostic interview is specific to the assessment of DSM-IV dissociative disorders and acute stress disorder. The SCID-D is sold as a package of 5. * documents posttraumatic dissociative symptoms for psychological reports and medical records* makes DSM-IV diagnosis of dissociative amnesia, depersonalization disorder, dissociative disorder not otherwise specified and also new DSM-IV categories: acute stress disorder and dissociative trance disorder* is field-tested by rigorous NIMH standards* is widely used by clinicians and researchers

The accurate diagnosis of multiple personality disorder (MPD) has been a problem for many years. Though numerous articles have been written on the subject few have been buttressed by research evidence.

The existence and characteristics of multiple personality disorder (MPD) have been debated from the time of the first case reports

in the 19th century. The dispute has never been resolved, and MPD has become the most controversial syndrome known to mental health professionals. Currently, very little balanced academic material on this disorder is available, and much of the literature aims to disprove its existence as a psychiatric disorder. In the past, general understanding of MPD was guided largely by this medical literature, but in recent decades the disorder has been widely exposed to both professionals and the public through the mass media. This timely work examines MPD from an empirical viewpoint, describing the research that has been done on the disorder, as well as providing in-depth analysis of how MPD has developed over the years in relation to the media. The book identifies the earliest origins of MPD in published literature and traces the course of its development as a concept to the present. Existing data on MPD are presented in a detailed review of the current state of knowledge of the disorder including clinical description, delineation from other disorders, family history studies, follow-up studies, and laboratory documentation. The authors also point out specific areas of research that is needed before psychiatry can consider MPD an adequately validated diagnosis. This critical approach is designed to provide direction to researchers in the pursuit of a better understanding of MPD and to provide clinicians with a valuable guide.

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Much has changed in the critical interval since the last edition of *The Psychiatric Interview in Clinical Practice* was published. This new, third edition provides an up-to-date examination of the psychiatric interview that reflects changes introduced in DSM-5, while continuing to recognize that describing symptoms and establishing a diagnosis should command only a portion of the clinician's attention, and that a patient's personal history must be elicited and character structure addressed in the clinical engagement. Significant advances have been made in biological psychiatry, and research in genetics, cognitive neuroscience, psychopharmacology, brain imaging, and the neurosciences in general continues apace, informing the culture of psychiatry and providing growing insight into the etiology of mental illnesses. However, the book reflects the authors' belief that virtually all major psychiatric disorders are complex amalgams of genetic disposition and environmental influences. In this context, the psychiatric interview is a vitally important dialogue, and effective strategies are modeled through the use of clinical vignettes taken from the authors' experience. Topics and features of this new edition include: An updating of diagnostic considerations to reflect the publication of DSM-5. A chapter on interviewing the patient with dissociative identity disorder (DID), which is now recognized as an entity distinct from other psychopathological conditions and rooted in childhood trauma. The frequency of DID in the ambulatory setting has been repeatedly demonstrated and speaks to the need to accurately diagnose and treat this often-debilitating disorder. An entirely updated chapter on interviewing the traumatized patient. A section on interviewing the patient of different background. The book emphasizes that the subjective experience of being "different" is universal and that psychiatry is enriched by recognizing and exploring that experience, validating its existence, and attempting to understand how it influences the patient's life. Continued emphasis on and inclusion of relevant case vignettes drawn from the authors' clinical experiences. Structural consistency across chapters, with sections on psychopathology and psychodynamics, differential diagnosis, management of the interview, transference and countertransference, and so forth, which reinforces skills acquisition and makes the text easy to use. By creating a text that is aligned with DSM-5 while continuing to stress the importance of eliciting the patient's subjective experience and achieving a therapeutic dialogue, the authors of *The Psychiatric Interview in Clinical Practice* have done a great service to the profession and provided much-needed guidance to mental health clinicians and trainees.

Handbook for the Assessment of Dissociation: A Clinical Guide is the first book to offer guidelines for the systematic assessment of dissociation and posttraumatic syndromes. This book provides a comprehensive overview of dissociative symptoms and disorders, as well as an introduction to the use of the SCID-D, a diagnostic interview for the dissociative disorders includes chapters on differential diagnosis, a discussion of the relationship between dissociation and trauma, and a sample patient interview serves the needs of novices in the field as well as experienced clinicians and researchers

This is the first major text designed to help professionals and students evaluate the merits of popular yet controversial practices in clinical psychology, differentiating those that can stand up to the rigors of science from those that cannot. Leading researchers review widely used therapies for alcoholism, infantile autism, ADHD, and posttraumatic stress disorder; herbal remedies for depression and anxiety; suggestive techniques for memory recovery; and self-help models. Other topics covered include issues surrounding psychological expert testimony, the uses of projective assessment techniques, and unanswered questions about dissociative identity disorder. Providing knowledge to guide truly accountable mental health practice, the volume also imparts critical skills for designing and evaluating psychological research programs. It is ideal for use in advanced undergraduate- and graduate-level courses in clinical psychology, psychotherapy, and evidence-based practice.

Multiple Personality Disorder (MPD) has become a fad. It was once so uncommon that investigators had discovered barely 200 cases by 1980. No longer. After that year, the number of cases exploded as therapist after therapist began to report seeing dozens, scores, hundreds of MPD patients. However, Dr. August Piper asserts that the surge in MPD cases is largely generated by the doctors themselves, by their over-inclusive diagnostic criteria and self-fulfilling therapeutic techniques.

How is psychological abnormality recognised? How many different mental disorders are there, and what are their characteristics? Although there are established guidelines for clinicians working in this area, these have been subject to many criticisms. Exploring how views on this subject have changed over time, and how they vary in different societies, poses important questions about our current practices. This book provides a brief overview of the current definitions and various explanations for psychological abnormality and then focuses on how society diagnoses and classifies behaviour that is deemed to be 'unusual'. Three key areas of the topic are covered: the procedures involved in the diagnosis and classification of mental disorders (such as schizophrenia); research into the history and origins of multiple personality disorder; and a discussion of the implications of cultural variability (including culture-bound syndromes) for the classification and diagnosis of psychological abnormality. *Classification and Diagnosis of Abnormal Psychology* is an introductory text suitable for students and teachers of the AQA Psychology A2 specification and is also useful for other groups who work in the field of mental disorder, such as nurses, social workers and therapists.

The book thoroughly examines the complex and disturbing disorder popularly known as Multiple Personality Disorder, renamed Dissociative Identity Disorder in the new DSM-IV. It covers the diagnosis, dynamics, assessment, differential diagnosis, and treatment of this disorder and presents significant new research findings.

The diagnosis of multiple personality disorder (MPD) entered the clinical mainstream with a rapidity and in a manner atypical for new descriptions of psychiatric illness. This book contains the most up-to-date information on MPD available written by experts in this field. The first section is a memorial to Cornelia B. Wilbur, M.D., a pioneer in MPD treatment. It is full of personal accounts

from people who knew her well. The second section deals with general issues in the treatment of MPD. It discusses basic principles in conducting the psychotherapy of MPD, posttraumatic and dissociative phenomena in transference and countertransference, and treatment of MPD as a posttraumatic condition. The third section goes on to give case studies that illustrate the application of techniques, approaches, and insights that are considered important in the treatment of MPD patients but are difficult to learn because they have not been documented in detail in the literature. Methods discussed include the use of Amytal interviews, play therapy, ego-state therapy, and the use of sand trays. The last section of the book discusses some of the contemporary concerns in the field (including consultation in the public psychiatric sector and the incidence of eating disorders in MPD patients), and on the recent history of the study of MPD.

First published in 2001. Routledge is an imprint of Taylor & Francis, an informa company.

This book covers the multiple personality disorder.

A Personality Disorder Reader offers a comprehensive and accessible collection of papers that will be practically useful to practitioners working in secure and non-secure settings with patients who have personality disorders. This book brings together fourteen classic papers, which address the impact that working with personality disorder patients can have on staff. It also offers theoretical explanations for personality disorder, and explores other issues such as the concept of boundaries in clinical practice, psychiatric staff as attachment figures and the relationship between severity of personality disorder and childhood experiences. Each paper is introduced with contextual material, and is followed by a series of questions that are intended to be used as educational exercises. This book will be essential reading for clinical and forensic psychologists, psychiatrists, community psychiatric nurses, social workers and students.

Although clinicians once considered Multiple Personality Disorder (MPD) a rare and obscure phenomenon, they are now diagnosing and treating it with increasing frequency. The exponential increase in the number of articles and books appearing in print documents the growing interest in this disorder. However, the vast majority of professionals remained uninformed about recent developments and research in this area. Led by such pioneers as Ralph Allison, Bennet Braun, Richard Kluft, and Cornelia Wilbur, a growing number of clinicians have undertaken the difficult task of identifying the etiology, phenomenology, and clinical manifestations of this most elusive disorder. The etiology of MPD lies in the defensive efforts of a young child to cope with severe physical and sexual abuse. The dissociative defenses employed to block out overwhelming pain become crystallized into a chronic maladaptive process leading to discontinuities in the child's experience. A pathological family system, further trauma, and the personality predispositions of the individual all serve to influence the subsequent development of the condition. The presumed rarity and a professional community which often regards the condition as fallacious dissuade most clinicians from making the diagnosis. Research and clinical experience have shown that MPD is, in almost every case, misdiagnosed as another more common psychiatric disorder. As a result, most individuals spend years in unproductive treatment. The correct diagnosis and differential therapeutics show MPD to be quite responsive to treatment and to have an excellent prognosis. Thus, it is incumbent upon the clinician to diagnose this condition accurately. This dissertation attempts to facilitate the correct diagnosis of MPD. The author reviews its historical and theoretical conceptualizations, as well as the diagnostic criteria, clinical manifestations, and phenomenology. He discusses and critiques the uses of psychological tests and questionnaires. Presenting a case representative of MPD, he applies the aforementioned criteria and methods to this case to illustrate both the technique and the difficulties involved in making the diagnosis of MPD. The author discusses the impact of making the diagnosis in terms of both the process and the outcome of the case.

Dissociative identity disorders are typically caused by trauma occurring at less than nine years of age. This book provides essential information on Dissociative Disorders, but also serves as a historical survey, by providing information on the controversies surrounding its causes, and first-person narratives by people coping with Dissociative Disorders. Patients, family members, or caregivers explain the condition from their own experience. The symptoms, causes, treatments, and potential cures are explained in detail. Essential to anyone trying to learn about diseases and conditions, the alternative treatments are explored. Each essay is carefully edited and presented with an introduction, so that they are accessible for student researchers and readers.

Winner of ISSTD's 2009 Pierre Janet Writing Award for the best publication on dissociation in 2009! Dissociation and the Dissociative Disorders is a book that has no real predecessor in the dissociative disorders field. It reports the most recent scientific findings and conceptualizations about dissociation; defines and establishes the boundaries of current knowledge in the dissociative disorders field; identifies and carefully articulates the field's current points of confusion, gaps in knowledge, and conjectures; clarifies the different aspects and implications of dissociation; and sets forth a research agenda for the next decade. In many respects, Dissociation and the Dissociative Disorders both defines and redefines the field.

This valued resource helps practitioners and students evaluate the merits of popular yet controversial practices in clinical psychology and allied fields, and base treatment decisions on the best available research. Leading authorities review widely used therapies for a range of child, adolescent, and adult disorders, differentiating between those that can stand up to the rigors of science and those that cannot. Questionable assessment and diagnostic techniques and self-help models are also examined. The volume provides essential skills for thinking critically as a practitioner, evaluating the validity of scientific claims, and steering clear of treatments that are ineffective or even harmful. New to This Edition *Reflects the significant growth of evidence-based practices in the last decade. *Updated throughout with the latest treatment research. *Chapter on attachment therapy. *Chapter on controversial interventions for child and adolescent antisocial behavior. *Addresses changes in DSM-5.

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