Course description: Psychologists in the workplace are frequently called upon to discuss the joint effects of psychological interventions and medications. These discussions may take place with clients, other mental health staff, and researchers, to name a few. Further, over the past 25 years there has been a movement within the profession to acquire prescription privileges (RxP), with legal prescriptive authority available in two states (LA and NM), and legislation in development in numerous others. Finally, familiarity with drug action is useful in a general sense, for treatment planning and for developing suitable research protocols where medications may substantially impact the topic under study. Given these developments, the need for professionals in psychology to have familiarity with drug action and commonly prescribed medications is considerable. This is likewise applicable to professionals working in private practice where clients present with problems that may either be ameliorated or exacerbated by psychotropic medications and psychologists are uniquely positioned to comment and consult on these effects in the context of therapy. Therefore, the goals of this course are threefold:

Aim 1: Gain a basic understanding of medications commonly used in everyday mental health practice, the sites/symptoms of effect, and side effect profiles.

Aim 2: Develop a working understanding of the way in which medications can enhance or impede psychological treatment, and develop skill in communicating this effectively.

Aim 3: Develop a working knowledge of the efficacy of medication relative to other psychosocial interventions, and to also be able to communicate this effectively.

Readings will reflect these aims. In specific reference to Aim 3, careful attention will be paid to findings on the relative value of medication, compared to its costs, in ameliorating psychiatric symptoms. This will be culled from the Whitaker text, as well as periodic reference to the sites www.madinamerica.com and 1boringoldman.com.

In order to achieve these goals, there are a number of required readings and two exams.

Diversity: It is also important to note that, in many instances, psychiatric medications have varied effects on different members of the population based on gender, culture, ethnicity, race, and age. These factors will be considered for classes of medications covered, side effects, and in relation to controversies in prescribing practices.

Attendance & Participation: There will be considerable discussion in this course, some of it potentially controversial. Your participation greatly enhances your own experience and that of your classmates. Since this course meets a total of 10 times, it is expected that you attend all classes. If you cannot make it for more than 3 classes, the fulfillment of the basic expectations of the course would be considered unmet.

Evaluation: As noted above, there will be two non-cumulative exams upon which grades will be based. One can guess at the percent contribution for each test.

Required texts:


Course outline:

July 5  Introductions; Brief history
Contemporary issues in psychopharmacology for psychologists
P, O’N, & T: Ch. 1, 2
July 10  Neurobiological and psychopharmacological overview
  Side effects (general) and management
  P, O’N, & T: Ch. 3, 4
  W: Part 1 (chapters 1 and 2)

July 12  Schizophrenia and psychotic disorders
  P, O’N, & T: Ch. 10, 18

July 17  Side effects and management in antipsychotic medications
  Common additional uses of antipsychotic medications and management
  Bipolar Disorder Drug Treatment
  P, O’N, & T: Ch. 7, 16

July 24  Midterm Exam (first half of class)
  Antidepressants in adult anxiety disorder treatment
  P, O’N, & T: Chs 8,9,11
  W: Part 2 (chapters 3-5)

July 26  Antianxiety medications
  P, O’N, & T: Ch. 17

July 31  Antidepressants in depression treatment
  P, O’N, & T: Ch. 6, 15
  W Part 3 (chapters 6-12)

Aug 2  Cognitive modifiers and other new directions in psychopharmacology
  W Part 4 (chapter 13)

Aug 7  Final Exam and Wrap up Discussion