12.3 Treating Schizophrenia: Therapies and the Interactionist Approach: 10-minute Pack

AQA 7182 · about 10 minutes

Total Marks

Name: _____ Date: ____ / ____ / _____

Answer ALL questions.

1 Outline how typical antipsychotic drugs, such as chlorpromazine, are thought to reduce symptoms of schizophrenia. Name the neurotransmitter system involved and the basic mechanism of action in the brain.

(Total for Question 1 is 2 marks)

2 Identify two ethical issues specific to using clozapine for treatment-resistant schizophrenia, and state one practical safeguard for one of these issues.

(Total for Question 2 is 3 marks)

3 Describe briefly how modern diathesis-stress models of schizophrenia differ from Meehl's original model, giving one implication of this difference for psychological treatment planning.

(Total for Question 3 is 2 marks)

4 Describe one aim of family therapy for schizophrenia and one way family therapy might reduce relapse rates in patients returning home from hospital.

(Total for Question 4 is 2 marks)

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Mark scheme · 12.3 Treating Schizophrenia: Therapies and the Interactionist Approach: 10-minute Pack

Question 1

identifies the dopamine system as involved, e.g. dopamine oe **B1**

states the mechanism: dopamine antagonism at D2 receptors reduces positive symptoms oe **B1**

Answer: They act on the dopamine system: typical antipsychotics block D2 dopamine receptors (dopamine antagonists), reducing dopamine activity and thereby reducing positive symptoms such as hallucinations and delusions.

Question 2

identifies ethical issue one: risk of agranulocytosis or severe blood disorder oe **B1**

identifies ethical issue two: informed consent and weighing serious risks against benefits for treatment-resistant patients oe **B1**

states a practical safeguard for either issue, e.g. regular blood monitoring (weekly then monthly) and stopping the drug if counts fall; thorough discussion of risks and benefits and ongoing review of consent oe **B1**

Answer: Issue 1: clozapine carries a risk of agranulocytosis. Issue 2: there is an ethical need for fully informed consent because of serious risks. Safeguard (for either): mandatory regular blood monitoring and stopping the drug if counts fall.

Question 3

describes difference: modern models view diathesis as multiple genetic and neurodevelopmental and psychological vulnerabilities rather than a single schizogene oe **B1**

gives implication: allows personalised psychological interventions targeting specific vulnerabilities or stressors, e.g. trauma-focused work or stress-management oe **B1**

Answer: Modern models see diathesis as many possible genetic, neurodevelopmental and psychological vulnerabilities rather than one schizogene. This implies treatment can be personalised, for example combining CBTp with trauma-focused therapy or stress management depending on the individual's vulnerabilities.

Question 4

identifies an aim: reduce family stress, improve communication and reduce expressed emotion oe **B1**

describes mechanism: improving communication and psychoeducation reduces stress on the patient and lowers relapse risk oe **B1**

Answer: An aim is to reduce family stress and expressed emotion by improving communication and providing psychoeducation. This can lower relapse risk by reducing household stress that might trigger symptoms.

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