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### PSYC 532.01: Advanced Psychopathology

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## ADVANCED PSYCHOPATHOLOGY (PSYC 532)

**Instructor: Cindy Rowe, Ph.D.**  
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**E-mail: crowe@selway.umt.edu**  
**Phone: (406) 243-4821**

**Semester: Fall, 2001**  
**Date/Time: MWF, 1:10 – 2:00 p.m.**  
**Room: CPC 121**

Course Description: This course is an advanced seminar covering the major theories and empirical findings on the etiology, diagnosis, and treatment of the adult mental disorders. All members of class are expected to complete all assigned readings, participate in class discussions, and contribute to the process and ultimate success of the class.

Goals and Objectives: The goal of the course is to enable you to begin to develop the knowledge base and conceptual skills necessary to become a clinician as well as a clinical researcher. This broad goal is achieved through:

- careful reading of all assigned materials
- thoughtful reflection and synthesis of the readings in weekly research questions
- participation in class discussions to begin developing skills necessary to present your ideas to your peers
- conceptualization of a research question and formulation of a research plan into a research proposal
- presentation of your research proposal to your peers

Evaluation: Evaluation is based on: 1) weekly research questions; 2) a final research proposal, 3) a 20-minute presentation of your proposal, and 4) participation in class.

(1) Research Questions: -- 20% of course grade -- Readings on each topic will be spread out through the week. You will be asked to prepare one thoughtful, well-justified research question based on two or more sources assigned for the week. You will be required to hand in one research question per week, either on Monday or on Wednesday. Research questions serve several purposes: they motivate students to do assigned readings, guide class discussions, help you to synthesize materials, and enable you begin thinking like a clinical researcher.

(2) Research Proposal: -- 50% of course grade -- Your final paper will be a research proposal in the format specified by the NIH for dissertation proposal grants. We will review the guidelines for the proposal together. This project will serve as a synthesis of your research questions on a particular topic and a first step in actualizing a research plan of your own. Note that topics must be approved by me with a brief 2 page outline no later than November 2<sup>nd</sup>. Papers are due on Monday, December 17<sup>th</sup> at 5 p.m.

(3) PRESENTATION: -- 10% of course grade -- A 20-minute class presentation of your research proposal is required during the last two weeks of class. You may not have the paper completed, but the main ideas, justification for the study, and approach should be very clear by early December. The presentation should clearly articulate your research questions, hypotheses, findings from your literature review, and research plan. It is expected that you will use overheads or other visual aids in your presentation so that it approximates a presentation at a research conference. You will also be required to present a brief handout summarizing your presentation and recommended readings to the class.

(4) **IN-CLASS PARTICIPATION:** -- *20% of course grade* – Class participation by every student is necessary for a successful, interesting learning experience. Obviously the strength of your contributions to class discussions will depend on the extent to which you carefully and thoroughly attend to assigned readings.

Note on Readings:

There is an extensive amount of reading included in your facpac for the course. Although it will be nearly impossible for anyone to complete all readings in the pac, I included the readings for several reasons. First, when it comes time for comps and your licensing exams (down the road a bit) you will need to be familiar with all of the materials covered here. Second, for your research proposals, you will benefit from a wide range of papers on your topic of interest that will guide you in doing further research in the area. Third, each student has his/her own unique interests and background, thus I included a range of writings to hopefully meet each student's needs. Each week we will review the required reading for the next week. All DSM-IV-TR assignments are required. The casebook readings are not required but are highly recommended, as they give you concrete examples of each disorder we will be discussing. Several other papers will also be required, and the remainder will be recommended for you to at least review and explore further for your papers, research questions, and definitely for comps and licensing.

Office Hours:

Mondays and Wednesdays, 11:00 a.m. – 1:00 p.m., or by appointment

Required Texts:

A 4-volume facpac for Psyc 532 is available at the bookstore

American Psychiatric Association. (2000). Diagnostic and Statistical Manual of Mental Disorders, DSM-IV-TR (Text Revision). Washington, DC: American Psychiatric Press.

Spitzer, R. L., Gibbon, M., Skodol, A. E., & First, M. B. (1994). DSM-IV casebook: A learning companion to the Diagnostic and Statistical Manual of Mental Disorders, 4<sup>th</sup> Edition. Washington, DC: American Psychiatric Press.

Approximate Course Organization:

- Week 1 (9/5) -- Introductory readings: Diagnostic Issues  
 Week 2 (9/10) -- Introductory readings: Comorbidity, Frameworks/Etiology, and Special Populations  
 Week 3 (9/17) -- Mood Disorders: Etiology and Diagnosis  
 Week 4 (9/24) -- Mood Disorders: Bipolar Disorder and Suicide/ Treatment and Outcome  
 Week 5 (10/1) -- Mood Disorders: Treatment and Outcome (cont.)  
 Week 6 (10/8) -- Anxiety Disorders: Etiology and Diagnosis

**NO CLASS 10/12**

- Week 7 (10/15) -- Anxiety Disorders: Treatment and Outcome  
 Week 8 (10/22) -- Substance Related Disorders: Etiology and Diagnosis  
 Week 9 (10/29) -- Substance Related Disorders: Treatment and Outcome

**OUTLINES DUE FOR RESEARCH PAPER FRIDAY, 11/2**

- Week 10 (11/5) -- Psychotic Disorders

**NO CLASS 11/12 – VETERAN’S DAY**

- Week 11 (11/14) -- Eating Disorders  
 Week 12 (11/19) -- Personality Disorders: Etiology and Diagnosis

**NO CLASS 11/21 and 11/23 – THANKSGIVING HOLIDAY**

- Week 13 (11/26) -- Personality Disorders: Treatment and Outcome  
 Week 14 (12/3 & 12/5) -- Somatoform and Dissociative Disorders  
 Week 14 (cont.) (12/7) -- Presentations  
 Week 15 (12/10) -- Presentations

**PAPERS DUE ON MONDAY DECEMBER 17<sup>TH</sup> AT 5 PM**

## INTRODUCTORY READINGS

### Diagnostic Issues

DSM-IV-TR: Introduction, Use of the Manual, and Multiaxial Assessment, pp. xxiii-xxxvii; 1-37

Adams, H. E., et al. (2001). The classification of abnormal behavior: An overview. In H. E. Adams & P. B. Sutker (Eds.), Comprehensive handbook of psychopathology, 3<sup>rd</sup> Edition. Plenum.

Garfield, S. L. (2001). Methodological issues in clinical diagnosis. In H. E. Adams & P. B. Sutker (Eds.), Comprehensive handbook of psychopathology, 3<sup>rd</sup> Edition. Plenum.

Rothblum, E. D., Solomon, L. J., & Albee, G. W. (1986). A sociopolitical perspective of DSM-III. In T. Millon & G. Klerman (Eds.), Contemporary directions in psychopathology: Toward the DSM-IV (pp. 167-189). New York: Guilford.

Kessler, R. C., McGonagle, K. A., Zhao, S., Nelson, C. B., Hughes, M., Eshleman, S., Wittchen, H.-U., Kendler, K. S. (1994). Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States. Archives of General Psychiatry, 51, 8-19.

Dawes, R. M., Faust, D., & Meehl, P. E. (1989). Clinical versus actuarial judgement. Science, 243, 1668-1674.

### Comorbidity

Kessler, R. C. (1995). Epidemiology of psychiatric comorbidity. In M. T. Tsuang, M. Tohen, & G. E. P. Zahner (Eds.), Textbook in psychiatric epidemiology (pp. 179-197). New York: Wiley.

Cloninger, C. R., Martin, R. L., Guze, S. B., & Clayton, P. L. (1990). The empirical structure of psychiatric comorbidity and its theoretical significance. In J. D. Maser & C. R. Cloninger (Eds.), Comorbidity of mood and anxiety disorders (pp. 439 – 462). Washington, DC: American Psychiatric Press, Inc.

Lilienfeld, S. O., Waldman, I. D., & Israel, A. C. (1994). A critical examination of the use of the term and concept of comorbidity in psychopathology research. Clinical Psychology: Science and Practice, 1, 71-83.

### General Frameworks and Etiological Factors

Fowles, D. C. (2001). Biological variables in psychopathology: A psychobiological perspective. In H. E. Adams & P. B. Sutker (Eds.), Comprehensive handbook of psychopathology, 3<sup>rd</sup> Edition. Plenum.

Plomin, R. (1990). The role of inheritance in behavior. Science, 248, 183-188.

Reiss, D., Plomin, R., and Hetherington, E. M. (1991). Genetics and psychiatry: An unheralded window on the environment. American Journal of Psychiatry, 148, 283-291.

Eaton, W. W. (1995). Studying the natural history of psychopathology. In M. T. Tsuang, M. Tohen, & G. E. P. Zahner (Eds.), Textbook in psychiatric epidemiology (pp. 157-177). New York: Wiley.

### Special Populations

Tsai, J. L., et al. (2001). Culture, ethnicity, and psychopathology. In H. E. Adams & P. B. Sutker (Eds.), Comprehensive handbook of psychopathology, 3<sup>rd</sup> Edition. Plenum.

Hartung, C. M., & Widiger, T. A. (1998). Gender differences in the diagnosis of mental disorders: Conclusions and controversies of the DSM-IV. Psychological Bulletin, 123(3), 260-278.

## MOOD DISORDERS AND SUICIDE

### Etiology and Diagnostic Issues

DSM-IV-TR: Mood Disorders, pp. 345-401.

Flett, G. L., Vredenburg, K., & Krames, L. (1997). The continuity of depression in clinical and nonclinical samples. Psychological Bulletin, *121*(3), 395-416.

Coyne, J. C., & Whiffen, V. E. (1995). Issues in personality as diathesis for depression: The case of sociotropy-dependency and autonomy-self-criticism. Psychological Bulletin, *118*(3), 358-378.

Lewinsohn, P. M., Steinmetz, J. L., Larson, D. W., and Franklin, J. (1981). Depression-related cognitions: Antecedent or consequence? Journal of Abnormal Psychology, *90*, 213-219.

Ehlers, C. L., Frank, E., and Kupfer, D. J. (1988). Social zeitgebers and biological rhythms: A unified approach to understanding the etiology of depression. Archives of General Psychiatry, *45*, 948-952.

Coyne, J. C., Downey, G., & Boergers, J. (1992). Depression in families: A systems perspective. In D. Cicchetti & S. L. Toth (Eds.). Developmental perspectives on depression. Rochester Symposium on Developmental Psychopathology, Vol. 4. (pp. 211-249). Rochester, NY: University of Rochester Press.

Haaga, D. A. F. & Beck, A. T. (1995). Perspectives on depressive realism: Implications for cognitive theory of depression. Behaviour Research and Therapy, *33*(1), 41-48.

Ahrens, A. H. & Alloy, L. B. (1997). Social comparison processes in depression. In B. P. Buunk & F. X. Gibbons (Eds.). Health, coping, and Well-being: Perspectives from Social Comparison Theory. (pp. 389-410). Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

Nolen-Hoeksema, S. (1987). Sex differences in unipolar depression: Evidence and theory. Psychological Bulletin, *101*, 259-282.

Reilly-Harrington, N. A., Alloy, L. B., Fresco, D. M., Whitehouse, W. G. (1999). Cognitive styles and life events interact to predict bipolar and unipolar symptomatology. Journal of Abnormal Psychology, *108*(4), 567-578.

Wendel, J. S., Miklowitz, D. J., Richards, J. A., & George, E. L. (2000). Expressed emotion and attributions in the relatives of bipolar patients: An analysis of problem-solving interactions. Journal of Abnormal Psychology, *109*(4), 792-796.

Abramson, L. Y., Alloy, L. B., Hogan, m. E., Whitehouse, W. G., Gibb, B. E., Hankin, B. L., & Cornette, M. M. (2000). The hopelessness theory of suicidality. In T. E. Joiner & M. D. Rudd (Eds.) Suicide Science: Expanding the Boundaries. (pp. 17-32). Norwell, MA: Kluwer Academic Publishers.

Klerman, G. L. (1987). Clinical epidemiology of suicide. Journal of Clinical Psychiatry, *48*(12), 33-38.

Brent, D. A., Perper, J. A., Goldstein, C. E., Kolko, D. J., Allan, M. J., & Zelenak, J. P. (1988). Risk factors for adolescent suicide: A comparison of adolescent suicide victims with suicidal inpatients. Archives of General Psychiatry, *45*, 581-588.

### Treatment and Outcome

Teasdale, J. D., Taylor, M. J., Cooper, Z., Hayhurst, H., & Paykel, E. S. (1995). Depressive thinking: Shifts in construct accessibility or in schematic mental models? Journal of Abnormal Psychology, *104*(3), 500-507.

Frank, E., Prien, R. F., Jarret, R. B., Keller, M. B., Kupfer, D. J., Lavori, P. W., Rush, A. J., and Weissman, M. M. (1991). Conceptualizations and rationale for consensus definitions of terms in major depressive disorder: Remission, recovery, relapse, and recurrence. Archives of General Psychiatry, *48*, 851-855.

Elkin, I., Shea, T., Watkins, J. T., Imber, S. D., Sotsky, S. M., Collins, J. F., Glass, D. R., Pilkonis, P. A., Leber, W. R., Docherty, J. P., Fiester, S. J., and Parloff, M. B. (1989). National Institute of Mental Health treatment of

depression collaborative research program: General effectiveness of treatments. Archives of General Psychiatry, 46, 971-982.

Thase, M. E. and Kupfer, D. J. (1996). Recent developments in the pharmacotherapy of mood disorders. Journal of Consulting and Clinical Psychology, 64, 646-659.

Jacobson, N. S., Dobson, K. S., Truax, P. A., Addis, M. E., Koerner, K. Gollan, J. K., Gortner, E., Prince, S. E. (2000). A component analysis of cognitive-behavioral treatment for depression. Prevention and Treatment, 64(2), 295-304.

Simoneau, T. L., Miklowitz, D. J., Richards, J. A., Saleem, R., & George, E. L. (1999). Bipolar disorder and family communication: Effects of a psychoeducational treatment program. Journal of Abnormal Psychology, 108(4), 588-597.

Whisman, M. A. (1993). Mediators and moderators of change in cognitive therapy of depression. Psychological Bulletin, 114(2), 248-265.

## ANXIETY DISORDERS: PHOBIAS, GAD, PANIC DISORDER, OCD, AND PTSD

### Etiology and Diagnostic Issues

DSM-IV-TR: Anxiety disorders, pp. 429-476

Barlow, D. H., Blanchard, E. B., Vermilyea, J. A., Vermilyea, B. B., and DiNardo, P. A. (1986). Generalized anxiety and generalized anxiety disorder: Description and reconceptualization. *American Journal of Psychiatry*, *143*, 40-44.

Reich, J. (1986). The epidemiology of anxiety. *The Journal of Nervous and Mental Disease*, *174*, 129-136.

Anderson, D. J., Noyes, R., and Crowe, R. R. (1984). A comparison of panic disorder and generalized anxiety disorder. *American Journal of Psychiatry*, *141*, 572-575.

McNally, R. J. (1990). Psychological approaches to panic disorder: A review. *Psychological Bulletin*, *108*(3), 403-419.

Liebowitz, M. R., Gorman, J. M., Fyer, A. J., and Klein, D. F. (1985). Social phobia: Review of a neglected anxiety disorder. *Archives of General Psychiatry*, *42*, 729-736.

Turner, S. M., Beidel, D. C., Borden, J. W., Stanley, M. A., and Jacob, R. G. (1991). Social phobia: Axis I and II correlates. *Journal of Abnormal Psychology*, *100*, 102-106.

Brown, T. A. and Barlow, D. H. (1992). Comorbidity among anxiety disorders: Implications for treatment and DSM-IV. *Journal of Consulting and Clinical Psychology*, *60*, 835-844.

Steketee, G. (1993). The nature of obsessions and compulsions. In G. Steketee, *Treatment of obsessive-compulsive disorder* (pp. 5-22). New York: Guilford.

Solomon, Z., Mikulincer, M., and Hobfoll, S. E. (1987). Objective versus subjective measurement of stress and social support: Combat-related reactions. *Journal of Consulting and Clinical Psychology*, *55*, 577-583.

Creamer, M., Burgess, P., and Pattison, P. (1992). Reaction to trauma: A cognitive processing model. *Journal of Abnormal Psychology*, *101*, 452-459.

### Treatment and Outcome

Chambless, D. L. and Gillis, M. M. (1993). Cognitive therapy of anxiety disorders. *Journal of Consulting and Clinical Psychology*, *61*, 248-260.

Barlow, D. H. and Lehman, C. L. (1996). Advances in the psychosocial treatment of anxiety disorders. *Archives of General Psychiatry*, *53*, 727-735.

Lydiard, R. B., Brawman-Mintzer, O., & Ballenger, J. C. (1996). Recent developments in the psychopharmacology of anxiety disorders. *Journal of Consulting and Clinical Psychology*, *64*(4), 660-668.

Foa, E. B., Grayson, J. B., Steketee, G., S., Doppelt, H. G., Turner, R. M., and Latimer, P. R. (1983). Success and failure in the behavioral treatment of obsessive-compulsives. *Journal of Consulting and Clinical Psychology*, *51*, 287-297.

Steketee, G. (1993). Behavioral conceptualization and treatment of OCD. In G. Steketee, *Treatment of obsessive-compulsive disorder* (pp. 23-38). New York: Guilford.

Solomon, S. D., Gerrity, E. T., and Muff, A. M. (1992). Efficacy of treatments for posttraumatic stress disorder: An empirical review. *Journal of the American Medical Association*, *268*, 633-638.

Dye, E. and Roth, S. (1991). Psychotherapy with Vietnam veterans and rape and incest survivors. *Psychotherapy*, *28*, 103-120.



## SUBSTANCE RELATED DISORDERS

### Etiology and Diagnostic Issues

DSM-IV-TR: Substance-related disorders, pp. 191-214.

McLellan, A. T., Lewis, D. C., O'Brien, C. P., & Kleber, H. D. (2000). Drug dependence, a chronic medical illness: Implications for treatment, insurance, and outcomes evaluation. Journal of the American Medical Association, 284(13), 1689-1695.

Shedler, J. & Block, J. (1990). Adolescent drug use and psychological health. American Psychologist, 45(5), 612-630.

Cloninger, C. R. (1983). Genetic and environmental factors in the development of alcoholism. Journal of Psychiatric Treatment and Evaluation, 5, 487-496.

Tarter, R. E., & Vanyukov, M. (1994). Alcoholism: A developmental disorder. Journal of Consulting and Clinical Psychology, 62(6), 1096-1107.

Babor, T. F., Hofmann, M., DelBoca, F. K., Hesselbrock, V., Meyer, R. E., Dolinsky, Z. S., & Rounsaville, B. (1992). Types of alcoholics, I: Evidence for and empirically derived typology based on indicators of vulnerability and severity. Archives of General Psychiatry, 49, 599-608.

Zucker, R. A. and Gomberg, E. S. L. (1986). Etiology of alcoholism reconsidered: The case for a biopsychosocial process. American Psychologist, 41, 783-793.

Kessler, R. C., Crum, R. M., Warner, L. A., Nelson, C. B., Schulenberg, J., and Anthony, J. C. (1997). Lifetime co-occurrence of DSM-III-R alcohol abuse and dependence with other psychiatric disorders in the National Comorbidity Survey. Archives of General Psychiatry, 54, 313-321.

### Treatment and Outcome

Miller, W. R., & Brown, S. A. (1997). Why psychologists should treat alcohol and drug problems. American Psychologist, 52(12), 1269-1279.

O'Brien, C. P. (1996). Recent developments in the pharmacotherapy of substance abuse. Journal of Consulting and Clinical Psychology, 64(4), 677-686.

Brownell, K. D., Marlatt, G. A., Lichtenstein, E., & Wilson, G. T. (1986). Understanding and preventing relapse. American Psychologist, 41, 765-782.

Liddle, H.A. & Dakof, G.A. (1995). Efficacy of family therapy for drug abuse: Promising but not definitive. Journal of Marital and Family Therapy, 21(4), 511-544.

McLellan, A. T., Luborsky, L. Woody, G. E., O'Brien, C. P., & Durley, K. A. (1983). Predicting response to alcohol and drug abuse treatments: Role of psychiatric severity. Archives of General Psychiatry, 40, 620-625.

Carroll, K. M., Rounsaville, B. J., Nich, C., Gordon, L. T., Wirtz, P. W., and Gawin, F. (1994). One-year follow-up of psychotherapy and pharmacotherapy for cocaine dependence: Delayed emergence of psychotherapy effects. Archives of General Psychiatry, 51, 989-997.

Crits-Christoph, P., Siqueland, L., Blaine, J., Frank, A. Luborsky, L. Onken, L., et al. (1999). Psychosocial treatments for cocaine dependence: National Institute on Drug Abuse Collaborative Cocaine Treatment Study. Archives of General Psychiatry, 56(6), 493-502.

Project Match Research Group. (1997). Matching alcoholism treatments to client heterogeneity: Project MATCH posttreatment drinking outcomes. Journal of Studies on Alcohol, 58, 7-29.

Quimette, P. C., Finney, J. W., & Moos, R. H. (1997). Twelve-step and cognitive-behavioral treatment for substance abuse: A comparison of treatment effectiveness. Journal of Consulting & Clinical Psychology, 65, 230-240.

## PSYCHOTIC DISORDERS

### Etiology and Diagnostic Issues

DSM-IV-TR: Schizophrenia and other psychotic disorders, pp. 297-311.

Asarnow, J. R. (1988). Children at risk for schizophrenia: Converging lines of evidence. Schizophrenia Bulletin, 14, 613-631.

Hooley, J. M. (1985). Expressed emotion: A review of the critical literature. Clinical Psychology Review, 3, 119-139.

Heinrichs, R. W. (1993). Schizophrenia and the brain: Conditions for a neuropsychology of madness. American Psychologist, 48(3), 221-233.

Penn, D. L., Corrigan, P. W., Bentall, R. P., Racenstein, J. M., & Newman, L. (1997). Social cognition in schizophrenia. Psychological Bulletin, 121(1), 114-132.

Nicholson, I. R., & Neufeld, R. W. J. (1993). Classification of schizophrenia according to symptomatology: A two-factor model. Journal of Abnormal Psychology, 102(2), 259-270.

Miklowitz, D. J., Velligan, D. I., Goldstein, M. J., Nuechterlein, K. H., Gitlin, M. J., Ranlett, G., & Doane, J. A. (1991). Communication deviance in families of schizophrenic and manic patients. Journal of Abnormal Psychology, 100(2), 163-173.

### Treatment and Outcome

Mueser, K. T., Sengupta, A., Schooler, N. R., Bellack, A. S., Xie, H., Glick, I. D., & Keith, S. J. (2001). Family treatment and medication dosage reduction in schizophrenia: Effects on patient social functioning, family attitudes, and beliefs. Journal of Consulting and Clinical Psychology, 69(1), 3-12.

Tarrier, N., Kinney, C., McCarthy, E., Humphreys, L., Wittkowski, A., & Morris, J. (2000). Two-year follow-up of cognitive-behavioral therapy and supportive counseling in the treatment of persistent symptoms in chronic schizophrenia. Journal of Consulting and Clinical Psychology, 68(5), 917-922.

Benton, M. K. and Schroeder, H. E. (1990). Social skills training with schizophrenics: A meta-analytic evaluation. Journal of Consulting and Clinical Psychology, 58, 741-747.

Goldstein, M. J., & Miklowitz, D. J. (1995). The effectiveness of psychoeducational family therapy in the treatment of schizophrenic disorders. Journal of Marital and Family Therapy, 21, 361-376.

## EATING DISORDERS

### Etiology and Diagnostic Issues

DSM-IV-TR: Eating disorders, pp. 583-595.

Hsu, L. K. G. (1996). Epidemiology of the eating disorders. Psychiatric Clinics of North America, 19, 681-700.

Strauman, T. J., Vookles, J., Berenstein, V., Chaiken, S., & Higgins, E. T. (1991). Self-discrepancies and vulnerability to body dissatisfaction and disordered eating. Journal of Personality and Social Psychology, 61(6), 946-956.

Leon, G. R., Fulkerson, J. A., Perry, C. L., & Cudeck, R. (1993). Personality and behavioral vulnerabilities associated with risk status for eating disorders in adolescent girls. Journal of Abnormal Psychology, 102(3), 438-444.

Cole-Detke, H., & Kobak, R. (1996). Attachment processes in eating disorder and depression. Journal of Consulting and Clinical Psychology, 64(2), 282-290.

Lucas, A. R., Beard, C. M., O'Fallon, W. M., and Kurland, L. T. (1991). 50-year trends in the incidence of anorexia nervosa in Rochester, Minn.: A population-based survey. American Journal of Psychiatry, 148, 917-922.

Striegel-Moore, R. H., Silberstein, L. R., and Rodin, J. (1986). Toward an understanding of risk factors for bulimia. American Psychologist, 41, 246-263.

### Treatment and Outcome

Collings, S. and King, M. (1994). Ten-year follow-up of 50 patients with bulimia nervosa. British Journal of Psychiatry, 164, 80-87.

Fairburn, C. G., Jones, R., Peveler, R. C., Hope, R. A., and O'Connor, M. (1993). Psychotherapy and bulimia nervosa: Longer-term effects of interpersonal psychotherapy, behavior therapy, and cognitive behavior therapy. Archives of General Psychiatry, 50, 419-428.

Wilson, G. T., & Fairburn, C. G. (1993). Cognitive treatments for eating disorders. Journal of Consulting and Clinical Psychology, 61(2), 261-269.

Heatherton, T. F., Mahamedi, F., Striepe, M., Field, A. E., & Keel, P. (1997). A 10-year longitudinal study of body weight, dieting, and eating disorder symptoms. Journal of Abnormal Psychology, 106(1), 117-125.

## PERSONALITY DISORDERS

### Etiology and Diagnostic Issues

DSM-IV-TR: Personality disorders, pp. 685-729

Linehan, M. (1993). Borderline personality disorder: Concepts, controversies, and definitions. In M. Linehan, Cognitive-behavioral treatment of borderline personality disorder. (pp. 3-27). New York: Guilford.

Lenzenweger, M. F., & Clarkin, J. F. (1996). The personality disorders: History, classification, and research issues. In J. Clarkin & M. Lenzenweger (Eds.), Major theories of personality disorder. (pp. 1-35). New York: Guilford.

Livesley, W. J., Schroeder, M. L., Jackson, D. N., and Lang, K. L. (1994). Categorical distinctions in the study of personality disorder: Implications for classification. Journal of Abnormal Psychology, *103*, 6-17.

Tyrer, P. and Ferguson, B. (1987). Editorial: Problems in the classification personality disorder. Psychological Medicine, *17*, 15-20.

Nigg, J. T., & Goldsmith, H. H. (1994). Genetics of personality disorders: Perspectives from personality and psychopathology research. Psychological Bulletin, *115*(3), 346-380.

Widiger, T. A., Cadoret, R., Hare, R., Robins, L., Rutherford, M., Zanarini, M., et al. (1996). DSM-IV antisocial personality disorder field trial. Journal of Abnormal Psychology, *105*(1), 3-16.

Livesley, W. J., Schroeder, M. L., Jackson, D. N., & Jang, K. L. (1994). Categorical distinctions in the study of personality disorder: Implications for classification. Journal of Abnormal Psychology, *103*(1), 6-17.

Weaver, T. L., Clum, G. A. (1993). Early family environments and traumatic experiences associated with borderline personality disorder. Journal of Consulting and Clinical Psychology, *61*(6), 1068-1075.

Herbert, J. D., Hope, D. A., & Bellack, A. S. (1992). Validity of the distinction between generalized social phobia and avoidant personality disorder. Journal of Abnormal Psychology, *101*(2), 332-339.

Funtowicz, M. N., & Widiger, T. A. (1999). Sex bias in the diagnosis of personality disorders: An evaluation of the DSM-IV criteria. Journal of Abnormal Psychology, *108*(2), 195-201.

Simeon, D., Stanley, B., Frances, A., Mann, J. J., Winchel, R., & Stanley, M. (1992). Self-mutilation in personality disorders: Psychological and biological correlates. American Journal of Psychiatry, *149*(2), 221-226.

### Treatment and Outcome

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