

Andrea Escalera

Chapter 15 Question 21

PSY 342

Fall 2021

Dr. Maret

Delirium is a major disturbance in attention and orientation to the environment.

Concentration is difficult as well and focus is less clear. When a person experiences symptoms of delirium, it may lead to misinterpretations, illusions and occasionally hallucinations. The DSM-5 lists two criteria for diagnosing delirium. The first criteria involves an individual experiencing fast-moving and fluctuating disturbances in attention and orientation to the environment over the course of hours or a few days. The second criteria is the individual also displays significant cognitive disturbances (confusion, forgetfulness). Unfortunately, many cases of delirium go undiagnosed which could lead to earlier death in some cases.

Neurocognitive disorder involves a significant decline in at least one of the areas of cognitive functioning. Areas of cognitive functioning include memory, learning, attention, visual perception, planning and decision making, language ability and social awareness. Depending on the type of neurocognitive disorder, a person may also experience personality changes. A person may experience either major neurocognitive disorder or mild cognitive disorder. This is determined by the severity of the symptoms. If symptoms significantly impacts independence then it is major. If a person experiences milder symptoms, but is able to function independently than it is mild. Neurocognitive disorder due to Alzheimer's disease has 4 criteria listed in the DSM-5 for diagnosis. The first criteria is the individual displays the features of major or mild neurocognitive disorder. The second criteria is that memory impairment is a prominent feature.

The third criteria for diagnosis is genetic indications or family history of Alzheimer's disease is present and underscore diagnosis, but are not essential to diagnosis. Lastly, the fourth criteria for diagnosis is the symptoms are not due to other types of disorders or medical problems. Reading the criteria for diagnosis, I recall my grandmother showing signs of Alzheimer's disease earlier in her aging season of life, yet she was able to still live independently for some time until other medical issues like congestive heart failure interfered. Alzheimer's disease seemed to progress more noticeably following that experience.

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Given the importance of a health-maintenance or wellness-promotion approach to aging, there are several important steps I would advise young people to take to avoid mental health problems as they age. One of the first things I would recommend is preventative medicine. It seems that this is the best course of action a person can take in their overall health and well-being. Being proactive by going to annual physicals, seeing specialists as needed and taking an active role in healthcare is key. I would also encourage physical exercise such as aerobics including walking, running, dancing, biking, etc. Anything that raises the heart rate steadily and safely is a good form of aerobics. The heart is a muscle and needs moments of good stress, where the rate increases for a short period of time steadily. Along with aerobics, strength training of some sort, nothing too strenuous, will also be helpful and useful as a developed habit. Studies show that it has an impact on brain structure in positive ways. Learning new information and skills is also very helpful in cognitive development. Lastly I would recommend some form of psychotherapy and/or mindfulness training, even if just seasonally, to help keep things in perspective and as a support during middle-age and aging. Developing these habits, including psychotherapy, earlier in life as a younger adult will set a person up for success in middle-adulthood and beyond.

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Stress in later life is usually associated with issues of aging. Such issues or challenges may be physical ability (loss of), general cognitive decline, memory loss (not related to neurocognitive disorders), loss of employment or retirement, loss of peers and family, loss of roles and activities, as well as hearing and vision loss. A lot of loss occurs as people age.

Another source of stress for some elderly may be a regret of how one lived their life. Maybe they do not feel fulfilled, or lose their sense of purpose. Stress is a universal presence, however, when it occurs in later life it can take a different toll. It can progress illness or even cause an illness to develop. If it is in excess, stress can even more so affect the structure of the brain in an older individual and cause other cognitive issues to arise. This impact can occur much more quickly and even be more damaging in the aging population. I often wonder how this process must feel, as my mother just turned 67 years old. To have to deal with all of these pressures all at once, and to face them with the understanding that one's abilities may not allow for the resilience they once had must be daunting. At the same time, it was interesting to read how some elderly people use their emerging challenges as opportunities for learning and growth. That was pretty inspiring to read. This suggests that perspective plays a big role in resilience.

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There are potential benefits and limits of animal studies in psychology. One benefit of using animals in research studies is the avoidance of human casualty or possible damage to humans. Another benefit is the availability of animals that allow for trials of different treatments for different ailments that plague human beings. A limitation in animal studies is that they are not human. Humans and animals may not respond the same way to medication therapy. There may be a positive reaction in animals, but then once the study moves to human clinical trials, researchers may find that there are adverse reactions in humans, contrary to the responsiveness of bodies and brains of the animals. This program on Alzheimer's illustrates that everything psychological is simultaneously biological. We see that Lola began showing noticeable cognitive disturbance when she would forget what she spoke about in her phone calls. Then she noticed moments of confusion that were distinguishable enough to cause her some distress. However, the program gives a visualization of what happens to the brain in early stages of the disease as these changes occur in people's everyday lives. This illustrates an interplay on what happens psychologically with us as human beings, is automatically going to coincide with a biological response. Some behavioral strategies for decreasing the risk of getting Alzheimer's disease may include healthy diet and exercise, cognitive exercise, and reduction of stress. I often found animal studies to be sad, but I realize more and more how essential animal studies are in the

development of medicine and medical interventions that are life altering and life saving to many human beings.