

TYPICAL SIGNS AND SYMPTOMS OF PSYCHIATRIC ILLNESS

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I. CONSCIOUSNESS: *state of awareness*

- **Apperception-** perception modified by one's own emotions and thoughts.
- **Sensorium-** state of cognitive functioning of the special senses (sometimes used as a synonym for consciousness).

Disturbances of consciousness are most often associated with brain pathology.

A. DISTURBANCES OF CONSCIOUSNESS

- **Disorientation-** disturbance of orientation in time, place, or person
- **Clouding of consciousness-** incomplete clear-mindedness with disturbances in perception and attitudes
- **Stupor-** lack of reaction to and unawareness of surroundings
- **Delirium-** bewildered, restless, confused, disoriented reaction associated with fear and hallucinations
- **Coma-** profound degree of unconsciousness
- **Coma vigil-** coma in which the patient appears to be asleep but ready to be aroused (also known as *akinetic mutism*)
- **Twilight state-** disturbed consciousness with hallucinations
- **Dreamlike state-** often used as a synonym for complex partial seizure or psychomotor epilepsy
- **Somnolence-** abnormal drowsiness

B. DISTURBANCES OF ATTENTION

Attention- amount of effort exerted in focusing on certain portions of an experience; ability to sustain a focus on one activity; ability to concentrate

- **Distractibility-** inability to concentrate attention; attention drawn to unimportant or irrelevant external stimuli
- **Selective inattention-** blocking out only those things that generate anxiety
- **Hypervigilance-** excessive attention and focus on all internal and external stimuli, usually secondary to delusional or paranoid states

- **Trance-** focused attention and altered consciousness, usually seen in hypnosis, dissociative disorders, and ecstatic religious experiences

C. DISTURBANCES IN SUGGESTIBILITY

Suggestibility- compliant and uncritical response to an idea or influence

- **Folie a deux (or folie a trois)-** communicated emotional illness between two (or three) persons
- **Hypnosis-** artificially induced modification of consciousness characterized by a heightened suggestibility

II. EMOTION: a complex feeling state with psychic, somatic, and behavioral components that is related to affect and mood

A. AFFECT

Observed expression of emotion; may be inconsistent with patient's description of emotion

- **Appropriate affect-** condition in which the emotional tone is in harmony with the accompanying idea, thought, or speech; also further described as broad or full affect, in which a full range of emotions is appropriately expressed
- **Inappropriate affect-** disharmony between the emotional feeling tone and the idea, thought, or speech accompanying it
- **Blunted affect-** a disturbance in affect that is manifest by a severe reduction in the intensity of externalized feeling tone
- **Restricted or constricted affect-** reduction in intensity of feeling tone less severe than blunted affect but clearly reduced
- **Flat affect-** absence or near absence of any signs of affective expression; voice monotonous, face immobile
- **Labile affect-** rapid and abrupt changes in emotional feeling tone, unrelated to external stimuli

B. MOOD

A pervasive and sustained emotion, subjectively experienced and reported by the patient and observed by others; examples include depression, elation, anger

- **Dysphoric mood-** an unpleasant mood
- **Euthymic mood-** normal range of mood, implying absence of depressed or elevated mood
- **Expansive mood-** expression of one's feelings without restraint, frequently with an overestimation of one's significance or importance
- **Irritable mood-** easily annoyed and provoked to anger

- **Mood swings (labile mood)**- oscillations between euphoria and depression or anxiety
- **Elevated mood**- air of confidence and enjoyment; a mood more cheerful than usual
- **Euphoria**: intense elation with feelings of grandeur
- **Ecstasy**- feeling of intense rapture
- **Depression**- psychopathological feeling of sadness
- **Anhedonia**- loss of interest in and withdrawal from all regular and pleasurable activities, often associated with depression
- **Grief or mourning**- sadness appropriate to a real loss
- **Alexithymia**- inability or difficulty in describing or being aware of one's emotions or moods

C. OTHER EMOTIONS

- **Anxiety**- feeling of apprehension caused by anticipation of danger, which may be internal or external
- **Free-floating anxiety**- pervasive, unfocused fear not attached to any idea
- **Fear**- anxiety caused by consciously recognized and realistic danger
- **Agitation**- severe anxiety associated with motor restlessness
- **Tension**- increased motor and psychological activity that is unpleasant
- **Panic**- acute, episodic, intense attack of anxiety associated with overwhelming feelings of dread and autonomic discharge
- **Apathy**- dulled emotional tone associated with detachment or indifference
- **Ambivalence**- coexistence of two opposing impulses toward the same thing in the same person at the same time
- **Abreaction**- emotional release or discharge after recalling a painful experience
- **Shame**- failure to live up to self-expectations
- **Guilt**- emotion secondary to doing what is perceived as wrong

D. PHYSIOLOGICAL DISTURBANCES ASSOCIATED WITH MOOD

Signs of somatic (usually autonomic) dysfunction of the person, most often associated with depression (also called vegetative signs)

- **Anorexia**- loss of or decrease in appetite
- **Hyperphagia**- increase in appetite and intake of food
- **Insomnia**- lack of or diminished ability to sleep
 - *Initial*: difficulty in falling asleep
 - *Middle*: difficulty in sleeping through the night without waking up and difficulty in going back to sleep
 - *Terminal*: early morning awakening
- **Hypersomnia**- excessive sleeping

- **Diurnal variation**- mood is regularly worst in the morning, immediately after awakening, and improves as the day progresses
- **Diminished libido**- decreased sexual interest, drive, and performance (increased libido is often associated with manic states)
- **Constipation**- inability or difficulty in defecating

III. MOTOR BEHAVIOR (conation): *The aspect of the psyche that includes impulses, motivations, wishes, drives, instincts, and cravings, as expressed by a person's behavior or motor activity*

- **Echopraxia**- pathological imitation of movements of one person by another
- **Catatonia**- motor anomalies in nonorganic disorders (as opposed to disturbances of consciousness and motor activity secondary to organic pathology)
 - **Catalepsy**: general term for an immobile position that is constantly maintained
 - **Catatonic excitement**: agitated, purposeless motor activity, uninfluenced by external stimuli
 - **Catatonic stupor**: markedly slowed motor activity, often to a point of immobility and seeming unawareness of surroundings
 - **Catatonic rigidity**: voluntary assumption of a rigid posture, held against all efforts to be moved
 - **Catatonic posturing**: voluntary assumption of an inappropriate or bizarre posture, generally maintained for long periods
 - **Cerea flexibilitas (waxy flexibility)**: the person can be molded into a position that is then maintained; when the examiner moves the person's limb, the limb feels as if it were made of wax
- **Negativism**- motiveless resistance to all attempts to be moved or to all instructions
- **Cataplexy**- temporary loss of muscle tone and weakness precipitated by a variety of emotional states
- **Stereotypy**- repetitive fixed pattern of physical action or speech
- **Mannerism**- ingrained, habitual involuntary movement
- **Automatism**- automatic performance of an act or acts generally representative of unconscious symbolic activity
- **Command automatism**- automatic following of suggestions (also called automatic obedience)
- **Mutism**- voicelessness without structural abnormalities
- **Overactivity**
 - **Psychomotor agitation**: excessive motor and cognitive overactivity, usually nonproductive and in response to inner tension
 - **Hyperactivity (hyperkinesis)**: restless, aggressive, destructive activity, often associated with some underlying brain pathology
 - **Tic**: involuntary, spasmodic motor movement

- **Sleepwalking (somnambulism):** motor activity during sleep
- **Akathisia:** subjective feeling of muscular tension secondary to antipsychotic or other medication, which can cause restlessness, pacing, repeated sitting and standing; can be mistaken for psychotic agitation
- **Compulsion:** uncontrollable impulse to perform an act repetitively
 - *Dipsomania:* compulsion to drink alcohol
 - *Kleptomania:* compulsion to steal
 - *Nymphomania:* excessive and compulsive need for coitus in a woman
 - *Satyriasis:* excessive and compulsive need for coitus in a man
 - *Trichotillomania:* compulsion to pull out one's hair
 - *Ritual:* automatic activity, compulsive in nature, anxiety reducing in origin
- **Ataxia:** failure of muscle coordination; irregularity of muscle action
- **Polyphagia:** pathological overeating
- **Hypoactivity (hypokinesia)-** decreased motor and cognitive activity, as in psychomotor retardation; visible slowing of thought, speech, and movements
- **Mimicry-** simple, imitative motor activity of childhood
- **Aggression-** forceful goal-directed action that may be verbal or physical; the motor counterpart of the affect of rage, anger, or hostility
- **Acting out-** direct expression of an unconscious wish or impulse in action; unconscious fantasy is lived out impulsively in behavior
- **Abulia-** reduced impulse to act and think, associated with indifference about consequences of action; association with neurological deficit

IV. THINKING: *goal-directed flow of ideas, symbols, and associations initiated by a problem or a task and leading toward a reality-oriented conclusion; when a logical sequence occurs, thinking is normal; parapraxis (unconsciously motivated lapse from logic is also called Freudian slip) considered part of normal thinking*

A. GENERAL DISTURBANCES IN FORM OR PROCESS OF THINKING

- **Mental disorder-** clinically significant behavioral or psychological syndrome, associated with distress or disability, not just an expected response to a particular event or limited to relations between the person and society
- **Psychosis-** inability to distinguish reality from fantasy; impaired reality testing, with the creation of a new reality (as opposed to **neurosis:** mental disorder in which reality testing is intact, behavior may not violate gross social norms, relatively enduring or recurrent without treatment)
- **Reality testing-** the objective evaluation and judgment of the world outside the self
- **Formal thought disorder-** disturbance in the form of thought, instead of the content of thought; thinking characterized by loosened associations, neologisms,

and illogical constructs; thought process is disordered and the person is defined as psychotic

- **Illogical thinking**- thinking containing erroneous conclusions or internal contradictions; it is psychopathological only when it is marked and when not caused by cultural values or intellectual deficit
- **Dereism**- mental activity not concordant with logic or experience
- **Autistic thinking**- preoccupation with inner, private world; term used somewhat synonymously with dereism
- **Magical thinking**- a form of dereistic thought; thinking that is similar to that of the preoperational phase in children (Jean Piaget), in which thoughts, words, or actions assume power (for example, they can cause or prevent events)
- **Primary process thinking**- general term for thinking that is dereistic, illogical, magical; normally found in dreams, abnormally in psychosis

B. SPECIFIC DISTURBANCES IN FORM OF THOUGHT

- **Neologism**- new word created by the patient, often by combining syllables of other words, for idiosyncratic psychological reasons
- **Word salad**- incoherent mixture of words and phrases
- **Circumstantiality**- indirect speech that is delayed in reaching the point but eventually gets from original point to desired goal; characterized by an overinclusion of details and parenthetical remarks
- **Tangentiality**- inability to have goal-directed associations of thought; patient never gets from desired point to desired goal
- **Incoherence**- thought that, generally, is not understandable; running together of thoughts or words with no logical or grammatical connection, resulting in disorganization
- **Perseveration**- persisting response to a prior stimulus after a new stimulus has been presented, often associated with cognitive disorders
- **Verbigeration**- meaningless repetition of specific words or phrases
- **Echolalia**- psychopathological repeating of words or phrases of one person by another; tends to be repetitive and persistent, may be spoken with mocking or staccato intonation
- **Condensation**- fusion of various concepts into one
- **Irrelevant answer**- answer that is not in harmony with question asked (patient appears to ignore or not attend to question)
- **Loosening of associations**- flow of thought in which ideas shift from one subject to another in completely unrelated way; when severe, speech may be incoherent
- **Derailment**- gradual or sudden deviation in train of thought without blocking; sometimes used synonymously with loosening of associations
- **Flight of ideas**- rapid, continuous verbalizations or plays on words produce constant shifting from one idea to another; the ideas tend to be connected, and in the less severe form a listener may be able to follow them

- **Clang association-** association of words similar in sound but not in meaning; words have no logical connection, may include rhyming and punning
- **Blocking-** abrupt interruption in train of thinking before a thought or idea is finished; after a brief pause, the person indicates no recall of what was being said or was going to be said (also known as thought deprivation)
- **Glossolalia-** the expression of a revelatory message through unintelligible words (also known as speaking in tongues); not considered a disturbance in thought if associated with practices of specific Pentecostal religions

C. SPECIFIC DISTURBANCES IN CONTENT OF THOUGHT

- **Poverty of content-** thought that gives little information because of vagueness, empty repetitions, or obscure phrases
- **Overvalued idea-** unreasonable, sustained false belief maintained less firmly than a delusion
- **Delusion-** false belief, based on incorrect inference about external reality, not consistent with patient's intelligence and cultural background, that cannot be corrected by reasoning
 - **Bizarre delusion:** an absurd, totally implausible, strange false belief (for example, invaders from space have implanted electrodes in the patient's brain)
 - **Systematized delusion:** false belief or beliefs united by a single event or theme (for example, patient is being persecuted by the CIA, the FBI, the Mafia, or the boss)
 - **Mood-congruent delusion:** delusion with mood-appropriate content (for example, a depressed patient believes that he or she is responsible for the destruction of the world)
 - **Mood-incongruent delusion:** delusion with content that has no association to mood or is mood- neutral (for example, a depressed patient has delusions of thought control or thought broadcasting)
 - **Nihilistic delusion:** false feeling that self, others, or the world is nonexistent or ending
 - **Delusion of poverty:** false belief that one is bereft or will be deprived of all material possessions
 - **Somatic delusion:** false belief involving functioning of one's body (for example, belief that one's brain is rotting or melting)
 - **Paranoid delusions:** includes persecutory delusions and delusions of reference, control, and grandeur (distinguished from paranoid ideation, which is suspiciousness of less than delusional proportions)
 - **Delusion of persecution:** false belief that one is being harassed, cheated, or persecuted; often found in litigious patients who have a pathological tendency to take legal action because of imagined mistreatment

- *Delusion of grandeur*: exaggerated conception of one's importance, power, or identity
 - *Delusion of reference*: false belief that the behavior of others refers to oneself; that events, objects, or others have a particular and unusual significance, usually of a negative nature; derived from idea of reference, in which one falsely feels that one is being talked about by others (for example, belief that persons on television or radio are talking to or about the patient)
 - ***Delusion of self-accusation***: false feeling of remorse and guilt
 - ***Delusion of control***: false feeling that one's will, thoughts, or feelings are being controlled by external forces
 - *Thought withdrawal*: delusion that one's thoughts are being removed from one's mind by other persons or forces
 - *Thought insertion*: delusion that thoughts are being implanted in one's mind by other persons or forces
 - *Thought broadcasting*: delusion that one's thoughts can be heard by others, as though they were being broadcast into the air
 - *Thought control*: delusion that one's thoughts are being controlled by other persons or forces
 - ***Delusion of infidelity (delusional jealousy)***: false belief derived from pathological jealousy that one's lover is unfaithful
 - ***Erotomania***: delusional belief, more common in women than in men, that someone is deeply in love with the patient (also known as Clerambault-Kandinsky complex)
 - ***Pseudologia phantastica***: a type of lying, in which the person appears to believe in the reality of his or her fantasies and acts on them; associated with Munchausen syndrome, repeated feigning of illness
- **Trend or preoccupation of thought**- centering of thought content on a particular idea, associated with a strong affective tone, such as a paranoid trend or a suicidal or homicidal preoccupation
- **Egomania**- pathological self-preoccupation
- **Monomania**- preoccupation with a single object
- **Hypochondria**- exaggerated concern about one's health that is based not on real organic pathology but rather on unrealistic interpretations of physical signs or sensations as abnormal
- **Obsession**- pathological persistence of an irresistible thought or feeling that cannot be eliminated from consciousness by logical effort, which is associated with anxiety (also termed rumination)
- **Compulsion**- pathological need to act on an impulse that, if resisted, produces anxiety; repetitive behavior in response to an obsession or performed according to certain rules, with no true end in itself other than to prevent something from occurring in the future
- **Coprolalia**- compulsive utterance of obscene words

- **Phobia**- persistent, irrational, exaggerated, and invariably pathological dread of some specific type of stimulus or situation; results in a compelling desire to avoid the feared stimulus
 - **Specific phobia**: circumscribed dread of a discrete object or situation (for example, dread of spiders or snakes)
 - **Social phobia**: dread of public humiliation, as in fear of public speaking, performing, or eating in public
 - **Acrophobia**: dread of high places
 - **Agoraphobia**: dread of open places
 - **Algophobia**: dread of pain
 - **Ailurophobia**: dread of cats
 - **Erythrophobia**: dread of red (refers to a fear of blushing)
 - **Panphobia**: dread of everything
 - **Claustrophobia**: dread of closed places
 - **Xenophobia**: dread of strangers
 - **Zoophobia**: dread of animals
- **Noesis**- a revelation in which immense illumination occurs in association with a sense that one has been chosen to lead and command
- **Unio mystica**- an oceanic feeling, one of mystic unity with an infinite power; not considered a disturbance in thought content if congruent with patient's religious or cultural milieu

V. SPEECH: ideas, thoughts, feelings as expressed through language; communication through the use of words and language

A. DISTURBANCES IN SPEECH

- **Pressure of speech**- rapid speech that is increased in amount and difficult to interrupt
- **Volubility (logorrhea)**- copious, coherent, logical speech
- **Poverty of speech**- restriction in the amount of speech used; replies may be monosyllabic
- **Nonspontaneous speech**- verbal responses given only when asked or spoken to directly; no self- initiation of speech
- **Poverty of content of speech**- speech that is adequate in amount but conveys little information because of vagueness, emptiness, or stereotyped phrases
- **Dysprosody**- loss of normal speech melody (called prosody)
- **Dysarthria**- difficulty in articulation, not in word finding or in grammar
- **Excessively loud or soft speech**- loss of modulation of normal speech volume; may reflect a variety of pathological conditions ranging from psychosis to depression to deafness

- **Stuttering**- frequent repetition or prolongation of a sound or syllable, leading to markedly impaired speech fluency
- **Cluttering**- erratic and dysrhythmic speech, consisting of rapid and jerky spurts

B. APHASIC DISTURBANCES

disturbances in language output

- **Motor aphasia**- disturbance of speech caused by a cognitive disorder in which understanding remains but ability to speak is grossly impaired; speech is halting, laborious, and inaccurate (also known as Broca's nonfluent, and expressive aphasia)
- **Sensory aphasia**- organic loss of ability to comprehend the meaning of words; speech is fluid and spontaneous but incoherent and nonsensical (also known as Wernicke's, fluent, and receptive aphasia) 3. Nominal aphasia: difficulty in finding correct name for an object (also termed anomia and amnesic aphasia)
- **Syntactical aphasia**- inability to arrange words in proper sequence
- **Jargon aphasia**- words produced are totally neologistic; nonsense words repeated with various intonations and inflections
- **Global aphasia**- combination of a grossly nonfluent aphasia and a severe fluent aphasia

VI. PERCEPTION: *process of transferring physical stimulation into psychological information; mental process by which sensory stimuli are brought to awareness*

A. DISTURBANCES OF PERCEPTION

- **Hallucination**- false sensory perception not associated with real external stimuli; there may or may not be a delusional interpretation of the hallucinatory experience
 - **Hypnagogic hallucination:** false sensory perception occurring while falling asleep; generally considered a nonpathological phenomenon
 - **Hypnopompic hallucination:** false perception occurring while awakening from sleep; generally considered nonpathological
 - **Auditory hallucination:** false perception of sound, usually voices but also other noises, such as music; most common hallucination in psychiatric disorders
 - **Visual hallucination:** false perception involving sight consisting of both formed images (for example, persons) and unformed images (for example, flashes of light); most common in medically determined disorders
 - **Olfactory hallucination:** false perception of smell; most common in medical disorders
 - **Gustatory hallucination:** false perception of taste, such as unpleasant taste caused by an uncinete seizure; most common in medical disorders

- **Tactile (haptic) hallucination:** false perception of touch or surface sensation, as from an amputated limb (phantom limb), crawling sensation on or under the skin (formication)
- **Somatic hallucination:** false sensation of things occurring in or to the body, most often visceral in origin (also known as cenesthetic hallucination)
- **Lilliputian hallucination:** false perception in which objects are seen as reduced in size (also termed micropsia)
- **Mood-congruent hallucination:** hallucination in which the content is consistent with either a depressed or a manic mood (for example, a depressed patient hears voices saying that the patient is a bad person; a manic patient hears voices saying that the patient is of inflated worth, power, and knowledge)
- **Mood-incongruent hallucination:** hallucination in which the content is not consistent with either depressed or manic mood (for example, in depression hallucinations not involving such themes as guilt, deserved punishment, or inadequacy; in mania hallucinations not involving such themes as inflated worth or power)
- **Hallucinosis:** hallucinations, most often auditory, that are associated with chronic alcohol abuse and that occur within a clear sensorium, as opposed to delirium tremens (DTs), hallucinations that occur in the context of a clouded sensorium
- **Synesthesia:** sensation or hallucination caused by another sensation (for example, an auditory sensation is accompanied by or triggers a visual sensation; a sound is experienced as being seen or a visual experience is heard)
- **Trailing phenomenon:** perceptual abnormality associated with hallucinogenic drugs in which moving objects are seen as a series of discrete and discontinuous images
- **Illusion-** misperception or misinterpretation of real external sensory stimuli

B. DISTURBANCES ASSOCIATED WITH COGNITIVE DISORDER

Agnosia- an inability to recognize and interpret the significance of sensory impressions

- **Anosognosia (ignorance of illness)-** inability to recognize a neurological deficit as occurring to oneself
- **Somatopagnosia (ignorance of the body)-** inability to recognize a body part as one's own (also called autopagnosia)
- **Visual agnosia-** inability to recognize objects or persons
- **Astereognosis-** inability to recognize objects by touch
- **Prosopagnosia-** inability to recognize faces
- **Apraxia-** inability to carry out specific tasks
- **Simultagnosia-** inability to comprehend more than one element of a visual scene at a time or to integrate the parts into a whole

- **Adiadochokinesia**- inability to perform rapid alternating movements.

C. DISTURBANCES ASSOCIATED WITH CONVERSION AND DISSOCIATIVE PHENOMENA

somatization of repressed material or the development of physical symptoms and distortions involving the voluntary muscles or special sense organs; not under voluntary control and not explained by any physical disorder

- **Hysterical anesthesia**- loss of sensory modalities resulting from emotional conflicts
- **Macropsia**- state in which objects seem larger than they are
- **Micropsia**- state in which objects seem smaller than they are (both macropsia and micropsia can also be associated with clear organic conditions, such as complex partial seizures)
- **Depersonalization**- a subjective sense of being unreal, strange, or unfamiliar to oneself
- **Derealization**- a subjective sense that the environment is strange or unreal; a feeling of changed reality
- **Fugue**- taking on a new identity with amnesia for the old identity; often involves travel or wandering to new environments
- **Multiple personality**- one person who appears at different times to be two or more entirely different personalities and characters (called dissociative identity disorder in the fourth edition of Diagnostic and Statistical Manual of Mental Disorders [DSM-IV])

VII. MEMORY: *function by which information stored in the brain is later recalled to consciousness*

A. DISTURBANCES OF MEMORY

- **Amnesia**- partial or total inability to recall past experiences; may be organic or emotional in origin
 - **Anterograde**: amnesia for events occurring after a point in time
 - **Retrograde**: amnesia prior to a point in time
- **Paramnesia**- falsification of memory by distortion of recall
 - **Fausse reconnaissance**: false recognition
 - **Retrospective falsification**: memory becomes unintentionally (unconsciously) distorted by being filtered through patient's present emotional, cognitive, and experiential state
 - **Confabulation**: unconscious filling of gaps in memory by imagined or untrue experiences that patient believes but that have no basis in fact; most often associated with organic pathology

- **Deja vu:** illusion of visual recognition in which a new situation is incorrectly regarded as a repetition of a previous memory
- **Deja entendu:** illusion of auditory recognition
- **Deja pense:** illusion that a new thought is recognized as a thought previously felt or expressed
- **Jamais vu:** false feeling of unfamiliarity with a real situation one has experienced
- **Hypermnnesia-** exaggerated degree of retention and recall
- **Eidetic image-** visual memory of almost hallucinatory vividness
- **Screen memory-** a consciously tolerable memory covering for a painful memory
- **Repression-** a defense mechanism characterized by unconscious forgetting of unacceptable ideas or impulses
- **Lethologica-** temporary inability to remember a name or a proper noun

B. LEVELS OF MEMORY

- **Immediate-** reproduction or recall of perceived material within seconds to minutes
- **Recent-** recall of events over past few days
- **Recent past-** recall of events over past few months
- **Remote-** recall of events in distant past

VIII. INTELLIGENCE: *the ability to understand, recall, mobilize, and constructively integrate previous learning in meeting new situations*

A. MENTAL RETARDATION:

lack of intelligence to a degree in which there is interference with social and vocational performance:

- mild (intelligence quotient [I.Q.] of 50 or 55 to approximately 70),
- moderate (I.Q. of 35 or 40 to 50 or 55),
- severe (I.Q. of 20 or 25 to 35 or 40),
- profound (I.Q. below 20 or 25);
 - obsolete terms are idiot (mental age less than 3 years),
 - imbecile (mental age of 3 to 7 years), and
 - moron (mental age of about 8)

B. DEMENTIA:

organic and global deterioration of intellectual functioning without clouding of consciousness

- **Dyscalculia (acalculia)-** loss of ability to do calculations not caused by anxiety or impairment in concentration

- **Dysgraphia (agraphia)**- loss of ability to write in cursive style; loss of word structure
- **Alexia**- loss of a previously possessed reading facility; not explained by defective visual acuity
- **Pseudodementia**- clinical features resembling a dementia not caused by an organic condition; most often caused by depression (dementia syndrome of depression)
- **Concrete thinking**- literal thinking; limited use of metaphor without understanding of nuances of meaning; one-dimensional thought
- **Abstract thinking**- ability to appreciate nuances of meaning; multidimensional thinking with ability to use metaphors and hypotheses appropriately

IX. INSIGHT: *ability of the patient to understand the true cause and meaning of a situation (such as a set of symptoms)*

- **Intellectual insight**- understanding of the objective reality of a set of circumstances without the ability to apply the understanding in any useful way to master the situation
- **True insight**- understanding of the objective reality of a situation, coupled with the motivation and the emotional impetus to master the situation
- **Impaired insight**- diminished ability to understand the objective reality of a situation

X. JUDGMENT: *ability to assess a situation correctly and to act appropriately within that situation*

- **Critical judgment**- ability to assess, discern, and choose among various options in a situation
- **Automatic judgment**- reflex performance of an action
- **Impaired judgment**- diminished ability to understand a situation correctly and to act appropriately

Congratulations on making it this far in your journey! Fighting, fellow RPm! See you sa oath-taking!

♥ - @gleaminggail