University of Southern California
School of Social Work

SOWK 676

PSYCHOPHARMACOLOGY FOR THERAPISTS AND COUNSELORS
FALL 2010

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Office hours: By appointment or via email or during Discussion Boards
E-mail: waugaman@usc.edu
Units: 1 unit
Location: On-Line
Day/Time: Virtual

I. COURSE DESCRIPTION

This course is to benefit individuals who provide therapy and mental health services to clients in a variety of different settings, but is focused on the non-physician, non-medically trained person. This course will facilitate learning about the medications that clients are taking and to give a sense of different classes of medications, suggest some basic concepts about psychotherapeutic medications, and help in the building of vocabulary about medication use in clients. This course will be particularly useful to social workers, counselors, therapists, and other individuals who counsel and treat mentally ill patients who may lack formal education in the study of psychopharmacology. This course will provide guidelines on how therapists can assist their clients in the identification of medication side effects and assist in medication compliance by increasing their knowledge about psychopharmacology.

II. COURSE OBJECTIVES

At the completion of the course the graduate student will be able to:
1. Discuss general pharmacologic principles as they relate to psychiatric medications for clients with mental health diagnoses.
2. Identify appropriate medications for clients with common mental health disorders such as: depression, bipolar illness, Anxiety, psychotic disorders.
3. Identify and describe common side effects of medications commonly prescribed to clients with mental health disorders such as: depression, bipolar illness, anxiety, psychotic disorders.
4. Explain how drugs work in the treatment of alcoholism and drug abuse.
5. Describe how medications are used as a tool for people diagnosed with borderline personality disorders.
6. Identify common medications used for sleeping disorders and potential for abuse of these
medications.
7. Discuss the appropriate drug therapy for other types of mental health problems such as: Obsessive-compulsive disorder, eating disorders, aggression, PTSD, ADD & ADHD.
8. Using evidence-based research, provide examples in the research literature of examples of both successes and failures with psychopharmacology in mental health disorders.
9. Describe how drug therapy is useful in the treatment of schizophrenia.
10. Critically examine the pros and cons of alternative therapies such as herbs and supplements with a particular focus on concurrent use with other forms of prescribed psychotherapeutic agents.
11. Identify how race and ethnicity may influence the response of clients to psychotherapeutic drugs.
12. Describe how your client teaching may be different when dealing with a diverse population because of how medications may affect different racial/ethnic groups differently and how culture may influence their beliefs about medication.
13. Discuss the role of the therapist (social worker, counselor, psychologist) when providing therapy to clients taking medication to treat a mental disorder.

III. COURSE FORMAT

This course is taught entirely on-line. There is no face-to-face meeting unless an appointment is requested. This course is an on-line course taught through modules accessed through Blackboard. A final case study analysis will be used to illustrate successful pharmacologic management of mental health disorders in clients. A variety of readings will augment the on-line content and textbook reading. There will be two article critiques assigned throughout the semester.

IV. COURSE EVALUATION AND GRADING

All students are expected to complete modules in a timely manner. Grading for the class is according to the following:

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<tr>
<th>Score Range</th>
<th>Grade</th>
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<tbody>
<tr>
<td>3.85 – 4</td>
<td>A</td>
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<tr>
<td>3.60 – 3.84</td>
<td>A-</td>
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<tr>
<td>3.25 – 3.59</td>
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<td>2.90 – 3.24</td>
<td>B</td>
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<tr>
<td>2.60 – 2.87</td>
<td>B-</td>
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<tr>
<td>2.25 – 2.50</td>
<td>C+5</td>
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<tr>
<td>1.90 – 2.24</td>
<td>C</td>
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Final Grade:

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<thead>
<tr>
<th>Score Range</th>
<th>Grade</th>
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<tr>
<td>93 – 100</td>
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<tr>
<td>90 – 92</td>
<td>A-</td>
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<td>87 – 89</td>
<td>B+</td>
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<td>83 – 86</td>
<td>B</td>
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<td>80 – 82</td>
<td>B-</td>
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Course Evaluation: Completion of Modules according to Course Schedule 40%
Participation in Discussion Boards 10%
1 Research Article Critique (10% each) (10/4) 10%
Case Study Analysis - Final Assignment (Due 12/3/10) 40%

Instructions for assignments at the end of the syllabus.
Within the School of Social Work, grades are determined in each class based on the following standards which have been established by the faculty of the School:

1. Grades of A or A- are reserved for student work which not only demonstrates very good mastery of content but which also shows that the student has undertaken a complex task, has applied critical thinking skills to the assignment, and/or has demonstrated creativity in her or his approach to the assignment. The difference between these two grades would be determined by the degree to which these skills have been demonstrated by the student.

2. A grade of B+ will be given to work that is judged to be very good. This grade denotes that a student has demonstrated a more-than-competent understanding of the material being tested in the assignment.

3. A grade of B will be given to student work that meets the basic requirements of the assignment. It denotes that the student has done adequate work on the assignment and meets basic course expectations.

4. A grade of B- will denote that a student’s performance was less than adequate on an assignment, reflecting only moderate grasp of content and/or expectations.

5. A grade of C would reflect a minimal grasp of the assignment, poor organization of ideas, and/or several significant areas requiring improvement.

6. Grades between C- and F will be applied to denote a failure to meet minimum standards, reflecting serious deficiencies in all aspects of a student’s performance on the assignment.

Class Participation: Virtual Classroom Discussions

Students are expected to contribute to the development of a positive learning environment and to demonstrate their learning through written and oral assignments and through active participation in on-line virtual classroom discussions. Class participation should consist of meaningful, thoughtful, and respectful participation based on having completed required and independent readings and modules prior to the scheduled virtual classroom. Students are expected to participate in ALL virtual classroom discussions as this comprises the class participation grade. Failure to participate in these activities may negatively affect the student’s class participation grade.

Virtual Classroom Discussions participation / reading addresses and contributes to the
achievement of Objectives 1, 2, 3, 5, 6, 7, 8, 9, 10, 11 12& 13.

V. **REQUIRED TEXTBOOK**


VI. **RECOMMENDED TEXTBOOKS**


**Recommended resources for APA Style Formatting**

*APA formatting and style guide.* (2009). The OWL at Purdue. Retrieved from

   [http://owl.english.purdue.edu/owl/resource/560/01/](http://owl.english.purdue.edu/owl/resource/560/01/)

[Note: this popular site for students—it is free has switched to 6th edition]


APA Style (American psychological Association) This APA site has a lot of useful info.


**APA Software:**

BUY THE SOFTWARE, IT’S NOT WORTH THE HASSLE TO DO IT YOURSELF!

IT IS A GOOD INVESTMENT FOR $25-$35! YOU’D SPEND MORE THAN THAT GOING TO 2 MOVIES!!

**APA PERRLA:** Your APA format reference (Windows only) – highly recommended by USC SW students $34.95

**StyleEase:** Easy to use, Free updates for life. In use since 1991 (MAC compatible) ($34.95)

**APA Wizard:** This is terrific software as it has multiple uses and is especially good for students who have some difficulty with their writing particularly in the area of grammar. It stores note cards, has links to databases such as Google Scholar, a grammatical...
assistant called Ghost Reviewer and a space corrector called Book Doctor. I recommend this for my students who find writing a bit difficult! ($34.99)

VII. ACADEMIC ACCOMMODATIONS

Any student requesting academic accommodations based on a disability is required to register with Disability Services and Programs (DSP) each semester. A letter of verification for approved accommodations can be obtained from DSP. Please be sure the letter is delivered to the instructor as early in the semester as possible. DSP is located in STU 301 and is open from 8:30 a.m. to 5:00 p.m., Monday through Friday. The phone number for DSP is (213) 740-0776.

VIII. COMPLAINTS

If you have a complaint or concern about the course or the instructor, please discuss it first with the instructor. If you feel can’t discuss it with the instructor, contact the Associate Dean for Student Affairs (Elizabeth Pringle-Hornsby) for further guidance.

IF YOU FEEL CONFUSED OR THINK YOU ARE FALLING BEHIND, CALL ME, EMAIL ME AND COME AND SEE ME RIGHT AWAY. I AM ALWAYS AVAILABLE TO MEET WITH YOU!!!!!
IX. COURSE OUTLINE AND ASSIGNMENTS

Week of August 30-September 3  

Monday, August 30, 2010: 8:00-9:00 p.m.*
Virtual Classroom – Course Introduction
Blackboard – Access Through Collaboration Sessions

**Time for First Virtual Classroom will be 8:00 PM, subsequent meetings will be scheduled at 8:00 PM, but may have to be modified based upon Dr. Waugaman’s schedule. You will be notified ASAP of any schedule changes.

Module 1:  
Week of August 30-September 3  

Overview of the Course  
The Basics of Psychopharmacology  
Diamond, Chapters 1&2  
Article  
Objective 1


Virtual Classroom  
Module 1 – Monday, September 13, 2010: 8-9 PM

Module 2:  
Weeks of September 6-17  

Disorders of Depression  
Diamond, Chapter 5  
Articles  
Objective 2, 3, & 8

 Sclar, David A. BPharm, PhD *+++; Skaer, Tracy L. BPharm, PharmD  


Virtual Classroom  
Module 2 & Articles on Depression  
Monday, September 20, 2010: 8-9 PM
Module 3: Schizophrenia
Weeks of September 20-October 1
Diamond, Chapters 3 & 4
Objectives 8 & 9


Virtual Classroom
Module 3 & Articles on Schizophrenia
Monday, October 4, 2010: 8-9 PM

Module 4: Bipolar Disease
Weeks of October 4-15
Diamond, Chapter 6
Objectives 2, 3, & 8
Article Critique 1 for Mid-term Evaluation Due on Monday, October 4, 2010. Turn in through Digital Dropbox on Assignment Section on Blackboard

Bschor, Tom MD; Berghofer, Anne MD +; Strohle, Andreas MD ++; Kunz, Dieter MD [S]; Adli, Mazda MD *; Muller-Oerlinghausen, Bruno MD //]; Bauer, Michael MD, PhD. How Long Should the Lithium Augmentation Strategy be Maintained? A 1-Year Follow-up of a Placebo-Controlled Study in Unipolar Refractory Major Depression. Journal of Clinical Psychopharmacology. 22(4):427-430, August 2002.


Virtual Classroom
Module 4 & Bipolar Articles
Monday, October 18, 2010: 8-9 PM

Module 5
Week of October 18-22
Diamond Chapter 7
Objectives 2,3, & 8

Davies, Simon J.C. DM *; Hood, Sean D. MBBS *++; Argyropoulos, Spilios V. PhD *; Morris, Kelly MBBChir *; Bell, Caroline MD *; Witchel, Harry J. PhD ++; Jackson, Peter R. PhD [S]; Nutt, David J. DM *; Potokar, John P. MD. Depleting Serotonin

**Module 6**
**Week of October 25-29**

Sleep Disorders
Diamond Chapter 7
Objectives 6 & 9


**Virtual Classroom**
**Modules 5, 6 & Articles**
**Monday, November 1, 2010: 8-9 PM**

**Module 7**
**Weeks of November 1-12**

Other types of Mental Health Disorders:
Borderline Personality Disorder, PTSD, ADD & ADHD and Addiction
Diamond Chapters 8 & 9
Objectives 4, 5, 7, 8, 12 & 13


Robert, Sophie PharmD *+; Hamner, Mark B. MD *+; Kose, Samet MD +; Ulmer, Helen G. MSN *+; Deitsch, Sarah E. PhD +; Lorberbaum, Jeffrey P. MD. Quetiapine Improves Sleep Disturbances in Combat Veterans With PTSD: Sleep Data From a Prospective, Open-Label Study. *Journal of Clinical Psychopharmacology*. 25(4):387-388, August 2005.

Loew, Thomas H. MD *; Nickel, Marius K. MD *+++; Muehlbacher, Moritz MD; Kaplan, Patrick MD ++; Nickel, Cerstin MD ++; Kettler, Christian MD ++; Fartacek, Rainhold MD +; Lahmann, Claas MD *; Buschmann, Wiebke MD +; Tritt, Karin PhD *; Bachler, Egon PhD [S]; Mitterlehner, Ferdinand ++; Pedrosa Gil, Francisco MD [/]; Leiberich, Peter MD *; Rother, Wolfhardt K. MD ++; Egger, Christoph MD. Topiramate Treatment for Women With Borderline Personality Disorder: A Double-blind, Placebo-Controlled Study. *Journal of Clinical Psychopharmacology*. 26(1):61-66, February 2006.

Gadow, Kenneth D. PhD; Nolan, Edith E. PhD *; Sverd, Jeffrey MD +;

**Module 8**

**Week of November 15-26**

*Alternative Therapies*

- Objectives 10, 12, 13


**Virtual Classroom**

**Modules 7 & 8 & Articles**

Review of Case Study Final Assignment

Monday, November 29, 2010: 8-9 PM

**Wednesday, December 8**

Case Study Final Assignment

Submit through Turnitin on Blackboard by 11:59 PM
Guidelines for Reviewing Research Articles (Short Form)

- **Study Aims**
  - What is focus of the study?
  - What is the significance and importance of the problem under study?
  - What previous studies are used to substantiate the significance and importance of the study?
  - How does the literature reviewed inform the development of study aims? (e.g., identifies gaps in knowledge, defines key concepts and how they should be measured, provides a comprehensive overview of previous work)
  - What are the study aims?
  - What are the study hypotheses? (Some studies will have them some will not)
  - What theory, conceptual model or framework informs study aims?

- **Methods: (Replication!!)***
  - Program/Intervention/Treatment Description
    - What are the program/intervention/treatment objectives?
    - What type of program/intervention/treatment is being studied?
    - Who is the delivering the program/intervention/treatment?
    - Where is the program/intervention/treatment being delivered?
    - Quality control: How was treatment fidelity evaluated?
  - Participants
    - How were participants selected (e.g., sampling technique: random non-random sampling)
    - Where were they selected (inclusion exclusion criteria)?
    - Who selected them?
    - How were participants recruited?
    - How is the recruitment and retention of participants documented and reported?
    - What are the documented differences and/or similarities between participants and non-participants?
  - Data Collection
    - What methods were used to collect data?
    - Who collected the data?
    - Where was data collected?
    - When was data collected (e.g., pre-treatment, post-treatment, follow-ups)
    - What measures were used to collect data?
    - What is the reliability and validity of these measures?
o Ethical Procedures
  ▪ How were the ethical rights of participants protected (e.g., confidentiality, benefice, justice, autonomy)?
  ▪ Which institutional review boards (IRB) approved the study procedures?
  ▪ How were participants compensated?

o For Experimental Studies and/or Outcome evaluations:
  ▪ What conditions are being compared?
  ▪ How are participants assigned to each condition (e.g., random assignment)
  ▪ What experimental design is used?

o Data analyses
  ▪ What methods were used to analyze the data?
  ▪ What are the analytical plans for each study aim and/or hypotheses?
  ▪ What analytical strategies were used to deal with missing data?

• Results:
  o What are the results for each study aim or hypothesis?
  o What were the significant and non-significant results?
  o How are results presented in tables and/or figures?

• Discussion:
  o What are the main findings of the study?
  o How do these finding relate to previous research (consistent, inconsistent new findings; unexpected findings)?
  o What do the findings tell us about implications for social work practice and policies? How do they inform social work practice and policies?
  o What are the recommendations for future studies?
  o What are the study limitations (e.g., internal and external validity; trustworthiness)?
  o What is the main take home message of the study?
How to Write a Case Study

(THIS IS NOT THE SAME THING AS AN ASSESSMENT!!)

I. Case History

1. Background Information (You may embellish this beyond what is presented if you like)

The first section of your paper will present your client’s background in detail. Include factors such as age, gender, work, health status, family mental health history, family and social relationships, drug and alcohol history, life difficulties, goals, and coping skills and weaknesses.

2. Description of the Presenting Problem

In the next section of your case study, you will describe the problem or symptoms that the client presented with. Describe any physical, emotional, or sensory symptoms reported by the client. Thoughts, feelings, and perceptions related to the symptoms should also be noted. Any screening or diagnostic assessments that are used should also be described in detail and all scores reported.

3. Your Diagnosis

Provide your diagnosis and give the appropriate DSM-IV code. Explain how you reached your diagnosis, how the client’s symptoms fit the diagnostic criteria for the disorder(s), or any possible difficulties in reaching a diagnosis. You should include some review of scholarly literature in this section.

II. Intervention

The second section of your paper will focus on the intervention used to help the client. You will select a particular theoretical approach, three options are presented, please select one or if needed you may summarize two possible treatment approaches. You should include some review of scholarly literature in this section. Following this, you will select a particular drug therapy including the group or type of drugs that you would suggest to the psychiatrist based upon your knowledge of the client.

A. Psychoanalytic Approach

Describe how a psychoanalytic therapist would view the client’s problem. Provide some background on the psychoanalytic approach and cite relevant references. Explain how psychoanalytic therapy would be used to treat the client, how the client would respond to therapy, and the effectiveness of this treatment approach.
B. Cognitive-Behavioral Approach

Explain how a cognitive-behavioral therapist would approach treatment. Offer background information on this therapeutic approach and describe the treatment sessions, client response, and outcome of this type of treatment. Make note of any difficulties or successes encountered by your client during treatment.

B. Humanistic Approach

Describe a humanistic approach that could be used to treat your client. Provide information on the type of treatment you chose, the client’s reaction to the treatment, and the end result of this approach. Explain why the treatment was successful or unsuccessful.

III. Drug Therapy

For this class, the drug therapy section is critically important. This is the major component. There are specific questions within the case study that need to be addressed. The drug therapy section should be addressed thoroughly including all of the pros and cons for the drug group and medication(s) and potential side effects, contraindications for the medication. All client instructions and warning signs for the client and family should also be included. How will you monitor client compliance? You should include a review of scholarly peer reviewed literature in this section. DO NOT USE YOUR TEXT AS A REFERENCE IN YOUR CASE STUDY!!!! DO NOT USE DRUG MANUFACTURER’S INFORMATION OR INFORMATION FROM THEIR WEBSITES!!

Tips:

- Do not refer to the subject of your case study as “the client.” Instead, use his or her name since it is given to you in the case study. If this was a real client you would refer to the client by initials Mrs. B. or Mr. T.

- Remember to use APA format (6th edition) when citing references and formatting your paper.

- Read examples of case studies to gain and idea about the style and format. There will be sample case studies posted on Blackboard for you to review to provide insight on how to write up a case history.
- Case studies are usually about 5 - 8 pages or so double spaced excluding the reference list. I would expect about 8-10 scholarly references. I am not wedded to length or number of references. It takes what it takes to write a thorough comprehensive paper. I am more interested in quality than quantity!

******For SOWK 676, the focus of the course is psychopharmacology so drug therapy should be the central theme of the case study and, therefore, the longest and most detailed section.