

# PSYCHIATRY AND PSYCHOLOGICAL DISORDERS

May 20-21, 2019 | Rome, Italy

#### **PSYCHIATRY 2019**







### KEYNOTE FORUM DAY 1



# PSYCHIATRY AND PSYCHOLOGICAL DISORDERS

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Joseph Rosado, J Clin Psychiatry Cog Psychol 2019, Volume 3



### **Joseph Rosado**

International Medical Consultants, USA

### BIOGRAPHY

Joseph Rosado, after spending several years in central Florida working as an orderly, then an EMT/Paramedic and Heart cath lab technician, he realized his passion for the medical profession. He started chiropractic school at Life College in Marietta, GA where he graduated cum laude with a BS degree in Clinical Nutrition and a Doctor of Chiropractic Degree. After practicing for several years, he went on to Universidad Central del Este; in San Pedro de Macoris in 2001 he graduated summa cum laude with his medical degree. He completed his MBA in Health Care Management from University of Phoenix and graduated magna cum laude in 2005. He has worked as a Physician, Clinic and Hospital Director, Director of the Communicable Disease Division/Epidemiology and Immunization Departments. Currently he is the Medical Director of a Medical Cannabis Clinic, President/CEO of International Medical Consultants and volunteers once a month at a community clinic. He is on the bureau of speakers for political campaigns, cannabis advocacy and medical cannabis dispensaries in the United States, Canada, Mexico, Thailand and Colombia, as well as published multiple articles on the use of medical cannabis. He has worked with close to 2,000 patients, which include infants, toddlers, children, adolescents, adults and geriatrics for the evaluation, recommendation and management of medical cannabis till date.

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### MEDICAL CANNABIS FOR AUTISM SPECTRUM DISORDER, IS IT AN OPTION?

**Objective:** A literature review was conducted to evaluate the validity of medical cannabis as an adjunctive treatment in the management of individuals with autism spectrum disorders.

**Background:** Autism spectrum disorder (ASD) is a developmental disability that can cause significant social, communication and behavioral challenges. The learning, thinking and problem-solving abilities of people with ASD can range from gifted to severely challenged people. Since there is no medical test to diagnose the disorders, the provider must listen to the parent/caretaker and look at the child's behavior and development to make a diagnosis. Unfortunately, many children do not receive a final diagnosis until much older. A deficiency in the endocannabinoid system in the body is considered as the reason for many disorders and recent researcher's state that it might help in the treatment of autism. The chronic neuro inflammation can be eased with the help of the antioxidants which are present in the cannabis plant. The theory of CED was based on the concept that many brain disorders are associated with neurotransmitter deficiencies, affecting acetylcholine in Alzheimer's disease, dopamine in Parkinsonian syndromes, serotonin and norepinephrine in depression and that a comparable deficiency in endocannabinoid levels might be manifest similarly in certain disorders that display predictable clinical features as sequelae of this deficiency.

**Design & Methods:** A literature review was conducted at the National Center for Biotechnology Information, US National Library of Medicine PubMed from 2012-2018 specific to the topic of medical cannabis and autism spectrum disorder.

**Conclusion:** This literature review supports the feasibility of cannabis based medicine as a promising treatment option in children with ASD. Based on the promising results, it is recommended that large, double blind, placebo controlled cross-over trials was launched in jurisdictions where medical cannabis can be studied without limitations from the federal government.



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E Mohandas, J Clin Psychiatry Cog Psychol 2019, Volume 3



#### **E Mohandas**

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### **BIOGRAPHY**

E Mohandas is a Consultant Psychiatrist at Sun Medical and Research Centre, India. He is the Director and Professor of International Institute of Organizational Psychological Medicine. He is the Chair at UNESCO Bioethics (Asia Pacific). He is the Member, WPA-Pharmacopsychiatry Section. He is the Chair, International Affairs at Indian Association of Private Psychiatry. He is the Visiting Professor of Bioethics at SRM University, Chennai and at Fr. Muller Medical College, Mangalore, India.

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## FOCUS ON INFORMED CONSENT: AN INDIAN PERSPECTIVE

sychiatric ethics, a very young discipline, needs periodic refinement in order to co-exist with the legal system around. The core of psychiatric ethics revolves around confidentiality, honesty and trust, non-participation in fraud, informed consent, involuntary psychiatric treatment and therapeutic boundary keeping. Ethical dilemma exists in research in genetics, research in children, placebo controlled trials, neurotechnologies and pharmacological treatment of prodromal symptoms. The major issue is about how informed and valid is informed consent in psychiatry? The vexing issues concerned are: How often the client expresses voluntariness? How often the client can employ autonomy? How often the clients understand information? How competent is the client to decide action? How often the 'family centered' opinions override clients autonomy? How often shared decisions sabotage autonomy/competence? How often assessments are done? In India greater value is given for health than on the principle of personal autonomy. The western concept, disregard for the social context, family roles and relationships, personality and lifestyles, is a matter of concern.



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Santa Misra, J Clin Psychiatry Cog Psychol 2019, Volume 3



#### Santa Misra

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### **BIOGRAPHY**

Santa Misra is currently working as an Associate Professor and Head of the Department of Psychology, Utkal University, India.

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#### NEURO SCIENTIFIC ANALYSIS OF COMMUNICATION DISORDERS IN SILVER CITIZENS

euroscience has become both a useful tool and a source of theory f V development strategy in recent research. Keeping in view of the present scenario on gerontological issues this paper is having its objective to focus on neuro-scientific analysis of communication disorder among old people. Communication disorder is impairment is the ability to receive, send, process and comprehend concepts on verbal, non-verbal and graphic symbol systems. A communication disorder may be evident in the process of hearing, language and (or) speech development. It is more crucial in case of old people when they are having hearing loss. For which communication disorder in older people is considered to be vital area of research now. The factor influencing the communication disorders and the remedies to these difficulties is the focus of this research. In this context attempts have been highlighted on the casual biological factors and their effects on psychosocial manifestation of older people. Analysing the result of 60 samples collected from SVNIRTAR OPD based on their neuro-scientific approaches, it is found that difficulties due to hearing loss is influencing psychological and social-cultural issues among old people.



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Odeda Peled, J Clin Psychiatry Cog Psychol 2019, Volume 3



#### **Odeda Peled**

The Integrative Therapy Center, Israel

### **BIOGRAPHY**

Odeda Peled specializes in developmental neuropsychology and rehabilitation. She heads the center for integrative therapy treating children with a wide array of developmental, neurological and genetic disorders. She also guides practitioners and therapists in the integrative approach, incorporating different ways of treatment depending on the child's profile and environmental variables. She is a Board Member and Vice President for the Israeli Play Therapy Association. She is the Lecturer at colleges and training programs for professionals in fields of expertise.

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## WALKING ON A TIGHT ROPE-THE EFFECTS OF LACK OF REGULATION ON THE DEVELOPMENT OF SPD CHILDREN: HELPING THE CHILDREN FINDS THE BALANCE POINT

The main aim is to study the neuropsychological model for understanding the regulation disturbances in the interface between brain dynamics and its functional manifestations. This model can serve as a basis for designing a preventive rehabilitative setup. The SPD children's world view dictates an atypical interpretation of situations, with adverse effects on their ability to created internal and external harmony. The child is in a continuous state of emergency, which interferes with his information processing and restricts his availability to deal with daily tasks. Too much energy is drained into search for internal balance in the face of a threat to survival, continuous state of psycho-physiological anxiety. Even after some degree of sensory adaptation and compensatory processes have been developed, the experience of accumulating failure, the inhibitions created are still there. Risks of secondary future varied complex emotional disturbance are prevalent. The road of life is a multi-layered, integrative model he developed for working with such cases. It involves the child's natural environments and promotes a lifestyle in which the child regains control over his life. It inter-relates insight, emotion regulation and adaptive behavior codes. The child learns to profit from supportive environmental clues, to understand his own confusing sensations. During the weekly session we devote much time for playing-the play of life. We learn to play and get nourished by the conjoint play. Play, the child's language, enables on to connect to the child's inner experience while at the same time reflects his coping patterns, communicative codes, cognitive style and strategies. The play is a learning space that makes it possible to reveal the person behind the syndrome. Such multidimensional perspective requires of the therapist total listening, being there with and for the child. Timing is very important in the therapist's moves. Generalization is effected in target programs in the child's natural environments.



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Sanjoy Mukerji, J Clin Psychiatry Cog Psychol 2019, Volume 3



### Sanjoy Mukerji

Kandivali Medical Association, India

### **BIOGRAPHY**

Sanjoy Mukerji is a Gold Medallist and National and International Award-Winning Psychologist in Mumbai. He has done his Post Graduate Diploma in Psychological Counselling from the Institute for Behavioral and Management Sciences, India. Moreover, he has completed his Degree of Doctorate in Philosophy (Alternative Medicine) from the Indian Board of Alternative Medicines, established under the World Health Organization (WHO). His area of interest is in the field of Alternative Medicines.

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### DEPRESSION TREATMENT WITHOUT MEDICINE

Ithough the vast majority of depressed people are treated with antidepressant drugs, such medications do not cure the underlying sadness, trauma and numbness that are true cause of the disorder. When the drug is taken away, the depression flowers again in most cases; there is a difference between feeling better and getting better. Author has developed a drug-free treatment for depression which we can call "Depression treatment without medicine". This is based on CBT and Indian wisdom amalgamated in meditation. Author has two tools, life or nature has given us; viz., our mind and our body. So, to treat depression without medicine, we need to do few things with our mind (internal) and few things with our body (external). It's a kind of Mind-Body Therapy, which teaches and trains patients to Mind Work (Internal) decide to defeat depression; Let go of the past by forgiving; Build self-esteem in the present; be hopeful regarding the future. Body work (Internal): Be social, have positive bonding; Take up some physical exercise; Get some exposure to sunlight; Love and enjoy your work; Enjoy your life, have fun. Just by understanding these points, nothing will happen. One needs to program one's mind and practice regularly with proper understanding. Even though it may take a little longer and requires more insight and courage, it is a more effective way to treat depression; especially from mild to moderate depression. Uncovering the inner hurt and releasing it, building self-esteem and being positive can even accomplish a lasting cure, which no drug can claim.



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#### **PSYCHIATRY 2019**







## KEYNOTE FORUM DAY 2

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Sawsan Kamal Khalil EL Galad, J Clin Psychiatry Cog Psychol 2019, Volume 3



#### Sawsan Kamal Khalil EL Galad<sup>1,2</sup>

<sup>1</sup>King Saud bin Abdulaziz University for health sciences, KSA <sup>2</sup>University of Alexandria College of Nursing, Egypt

## REACTIONS OF PSYCHOTIC PATIENTS AND THEIR FAMILY CAREGIVERS TOWARDS HOSPITALIZATION

**Introduction:** Psychiatric hospital is still the main setting for the care of the mentally disturbed people, particularly in the developing countries hospitalization is generally a stressful experience and can be viewed as crisis situation for patients and their family which affects their willingness and cooperation in the treatment as psychiatric treatment begins with the initial interview, patients and their family caregivers reactions and feelings about hospitalization should be investigated to secure better prognosis.

**Aim of the Study:** To determine the reactions of psychotic patients and their family caregivers towards hospitalization in mental hospital.

**Results:** The main results obtained are more than half of the subjects (56%) were diagnosed as schizophrenics. The majority of the studied patients (83.3%) were seen by a private doctor. Nearly three quarters of the studied subjects (73.3%) reported that they were not informed about the admission to the hospital. Half of the studied patients (50%) stated that they were cheated by family, (24%) were admitted either by force or police and only (20.6%) were admitted voluntary, (41.3%) of the studied patients expected that they will be stigmatized by hospitalization. Patients reporting negative feelings towards their hospitalization while the majority of family caregivers (86.7%) reacted positively to their patient hospitalization. The majority of the studied caregivers (83.3%) stated that admission of patient to hospital not cause any problems at home, while (16.7%) stated that admission of the patient to the hospital cause problems at home as negligence of the children caring and financial problems.

**Conclusion:** The main recommendations yielded by this study, the patient should be informed about the reasons for admission, treatment plan and the estimated length of stay. This will make admission less traumatic. There is a need to educate the community about mental illness to try to dispel the stigma and wrong beliefs concerning patients.

### **BIOGRAPHY**

Sawsan Kamal Khalil EL Galad is an Assistant Professor of Psychiatric Nursing and Mental Health, King Saud bin Abdulaziz University for Health Sciences, KSA. She has 20 years of teaching experience in the field of Nnursing. She obtained her BNSc, MNSc and DNSc from University of Alexandria, Egypt since 1998 to 2013.

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Nibedita Jena, J Clin Psychiatry Coq Psychol 2019, Volume 3



#### Nibedita Jena

Satya Sai Women's College, India

### **BIOGRAPHY**

Nibedita Jena is currently working as a State Advisor and as a Director of Youth Policy, in the Department of Higher Education, Government of Odisha, India. She has completed her PhD in Psychology from KIMS, BBSR Odisha, India.

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# LIFE STYLE, MENTAL HEALTH, ILLNESS, HEALTHY LIVING AND YOGIC MEDITATION: A PREVENTIVE COMPREHENSION OF PERSONALITY TYPE

ttainment of happiness is the innate desire of every human being, Abut our life style, attitude and values have undergone a radical change with rapid modernization and more towards consumerist culture. Positive state of physical, mental and social well-being is known as health. It has been described as a value judgement, as a continuum from illness to wellness. Health is more than the absence of problems. The question is can life style modification help someone? How we define the term life style? In general term life style means the way of life, the pattern of living of a person-how he spends his time from moment to moment. It also means the food we take, drinking habit, exercise, diet-particularly overeating and consuming too much high fat, low fiber food-constantly facing higher stress situations, likes and dislikes of a person. These result from a life style of experience, beginning in early childhood, evolving through adolescence and adulthood. A healthy life style holds the key to the prevention of many diseases. Behavioural risk factors such as smoking cigarettes, drinking excessively, using drugs, eating high fat and high cholesterol diets, eating too much and becoming over weight, inviting stress are the causes of major chronic diseases which can be controlled through modifications of life style. Personality and individual behaviour style play a crucial role in health habit. The disease prone personality is characterized by depression, anxiety and even hostility. Indian thought contains valuable conceptual, methodological and theoretical ideas and



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insights that could provide alternative hypotheses concerning human nature that could be genuinely complementary to the western approach in taking almost wholly a mechanistic view of man, the belief that by practicing yoga and meditation one could attain wellness in life. Indian psychology searches for techniques for controlling body and mind-relaxation, meditational techniques for self-control and the ultimate aim being the highest well-being of man. Wellness is characterized by Lyon (1990) as the experience of somatic comfort and a functional ability level at or near the person. There are two approaches to control and express emotions: Somatic control (Emotions, mood, calmness, pleasure, joy, relief and happiness) and physical sensation energized awareness, emotion and growth. Illness occurs on a continuum from low (I am not feeling well) to high (I am very much ill). Health and illness have changed across culture and time. The main objective of study was to determine the relationship between life style and healthy living in exploring predominant personality type. Three questionnaires were used in the present study with survey method. The mean age group of younger male groups were 24.7 years. Younger female groups were 23.5 years, older males were 59.4 years and older females were 59.2 years. It has been found out that people who followed a healthy life style were healthier than other people irrespective of age and sex.