

Ch. 17: Neuropsychology

- Definitions
- History
- Goals
- Methods
- State of the art
- Issues
- Demographic Norms
- Careers / Training

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Clinical Neuropsychology

- Field: Subfield of clinical psychology
- Setting: outpatient and inpatient
- Subjects/Patients: children, adolescents, adults, geriatric
- Methods: Measure function of specific brain areas & systems.
- Measures: Standard tests (IQ tests) as well as specialized test batteries
- Norms: standard, as well as specialized, normative data

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Goals of NP Assessment

- Diagnosis
 - Clinical
 - Scientific
 - Medico-legal / forensic
- Understanding of neurological basis of disorder
- Prognosis
- Treatment plan
 - surgical, pharmacological, psychosocial, remediation
- Track changes over time

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Neurology v. Neuropsychology

	Neurology	Neuropsychology
Education	MD	PhD
Methods	hands on, informal	hands off, structured
Decisions	clinical judgement	statistics & norms
Focus	motor / sensory	cognitive
Psychosocial	some	much
Treatments	drugs, surgery	rehabilitation, compensation

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Behavioral tests vs. biological

- Q: Isn't it better to diagnose brain disease with biological measures (such as brain imaging) vs. giving neuropsychological tests?
- A: In many cases most sensitive test of early dysfunction is a neuropsychological test
- Example: Alzheimer's disease shows a very specific pattern of "rapid forgetting" that can be detected by memory testing, long before it shows up on brain imaging scans.
- NP testing is relatively non-invasive, though not particularly inexpensive

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Behavioral tests vs. biological 2

- Many behaviors are mediated by multiple brain systems, these systems may be distributed widely throughout the brain and/or intermixed with other systems. These types of systems are not easily imaged with MRI
- In many cases, behavior is the final issue. Therefore, testing behavior directly can be more accurate than testing biology.
- However, in many cases Imaging and Neuropsychology go hand in hand. Imaging shows the damage, NP tests show the effects.

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Neuropsych. Batteries

- Two major schools of thought:
- Fixed Battery
 - Give all patients same set of tests
 - Increase chance of finding subtle/hidden impairments
 - Excellent statistics and normative data
- Flexible Battery
 - Tailor specific tests to specific patients
 - More like neurology, more hands on
 - Poor statistics, possible to miss hidden issues

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Fixed Batteries

- Halstead-Reitan
 - WAIS-III plus additional tests of memory, learning, motor and sensory skills
 - Approx 6 hours to administer
- Luria-Nebraska
 - Luria had a flexible battery based on theory of pluripotentiality (multiple brain systems could compensate to do the same tasks)
 - Had poor psychometrics. Test battery was improved and standardized at U. Nebraska
 - Approx 24 hours(!) to administer

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Halstead-Reitan Battery

- Full WAIS-III
- Additional tests:
 - Category test
 - Grooved pegboard
 - Rhythm
 - Speech comprehension
 - Finger tapping
 - Trail making
 - Grip Strength
 - Sensory-perceptual exam

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Gardner's 8 Intelligences

- logical-mathematical (*)
- verbal-linguistic (*)
- spatial (*)
- musical
- bodily-kinesthetic
- naturalist
- interpersonal
- intrapersonal

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Limitations of NP Testing

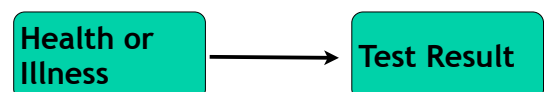
- Most tests predate modern neuroscience
- Lack of pre-test data
 - reliance on normative data
- Lack of international standardization
- Lengthy
 - 2 - 20 hours of testing
- Expensive
- Requires Ph.D. level training

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Demographic Corrections

- Normative Data would be simple if there was one definition of "normal"
- Simple model

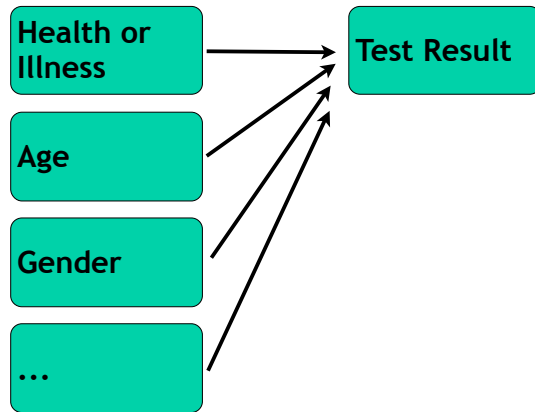


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Demographic Model

- More realistic model



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Common Demographic Covariates

- Age
- Sex
- Race/Ethnicity
- Education
- Language

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Diehr et al (2003)

- Paced Auditory Serial Addition Test
- Demographic variables:
 - ethnicity : self-identified as either White / Black
 - age
 - gender
 - education

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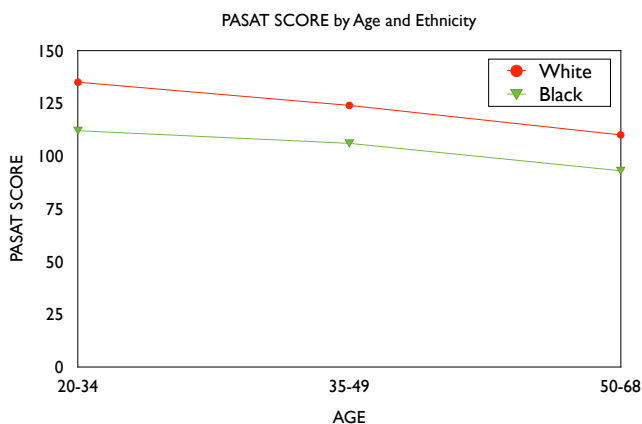
Diehr et al (2003) Results

- Statistically and Clinically-significant differences in PASAT test result found for
 - Age
 - Education
 - Ethnicity
- Results not statistically significant:
 - Gender

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Diehr et al (2003) Results



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Current Events in Neuropsychology

- Sports Concussions
- Marijuana Legalization

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Careers in neuropsychology

- Clinical Neuropsychology - subfield of Clinical Psychology
- Ph.D. (or PsyD) with about 2000 hours clinical training
- Internship : 1 year (about 2000 hours)
- Post-doc : minimum 1 year (about 2000 hours clinical training)
- Employment -- usually in hospital or clinic, sometimes forensic (legal), often joint with Univ.
- Pay -- good, often better than typical clinical psychologist, not as good as MD.