

Cognitive Therapy for Depression: Critical CBT Tools in Group Therapy

DBSA San Diego

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Cognitive Group Therapy

Intensive Outpatient Program (3 hours)

- Intensive therapy 5 X week, titrating...
- Depression, Bipolar, Anxiety, PTSD
- Average treatment 4-8 weeks

Marc G. Murphy, Ph.D.

- Clinical Psychologist (PSY 17565)
- COG - IOP Therapist, Group Therapy
- Supervisor Sharp APA Internship
- Director: Cognitive Behavioral Psychology Clinic of La Jolla, Inc.
- Adjunct Professor
Alliant University (CSPP)

Cognitive Therapy Overview

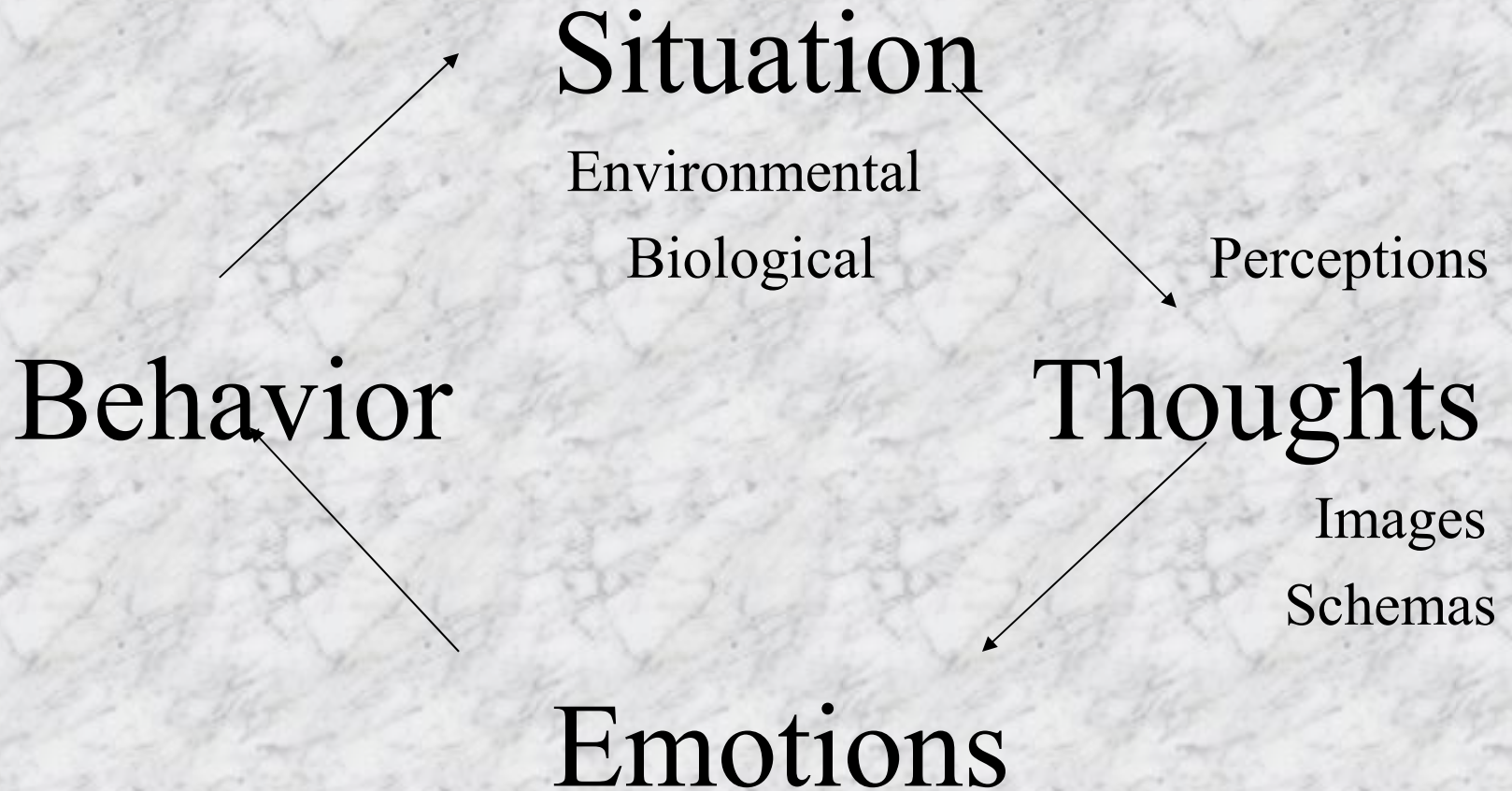
- Brief Overview:

Aaron Beck influence

- Cognitive Triad:



Cognitive Model



Identify the Problem

Main Problem Areas: C.A.T.A.I.L.

- Conflict
- Anger
- Trauma
- Assertiveness
- Intimacy
- Loss

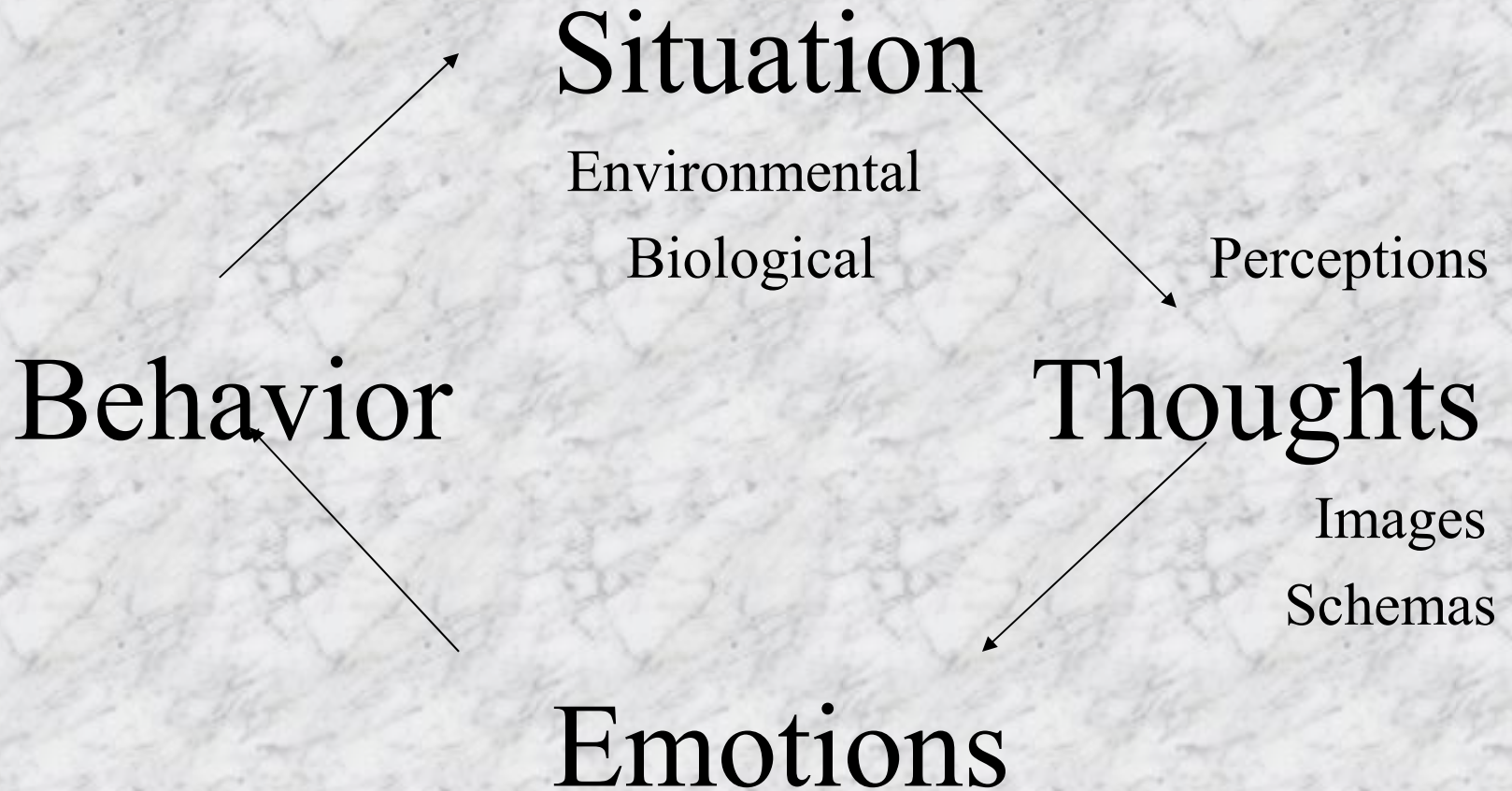
How to identify Depression?

- Significant feelings of depressed mood
- Decreased functioning (work, social)
- >2 weeks length
- Tests including Beck Depression Inventory
- No medical test
- Identified 2 genes that show promise

Situations include Physical

- What leads to a depressed state?
- Environment (life stressors)
- Biology (genetics)
- 40-45% genetics 60-55%
environment
- Family history = possible genetic contribution
- What is going on in our body?

Cognitive Model



Situation / Biological Signs

Depression

- ↓ interest
- ↓ pleasure
- ↑ agitation
- ↑ ↓ weight
- ↑ ↓ sleep
- ↓ energy

Bipolar

- ↓ need for sleep
- ↑ speech
- ↑ mood
- ↑ impulsivity

Thoughts / Cognitive Signs

Depression

- ↓ concentration
- ↓ attention span
- ↓ memory
- ↑ negative thoughts
- ↑ thoughts of death
- memories

Bipolar

- ↑ self esteem
- ↑ ideas
- ↑ distractibility

Emotions / Feeling Signs

Depression

- Depressed mood
- Sad / blue / down
- Worthless
- Hopeless
- Guilt

Bipolar

- ↑ mood
- Self esteem
- Grandiosity
- Irritability

Behavior / Action Signs

Depression

- Withdrawal
- Isolation
- Self medication

Bipolar

- ↓ need for sleep
- ↑ speech
- ↑ impulsivity (\$)

Meta-analysis

- Research shows two factors are what is critical in leading to remission.
- Restructuring Distorted Thoughts
(Thought Records)
- Activity Scheduling
(G.R.A.P.E.S.)

Distorted Thought Process Depressed vs. Non-Depressed

Negative Events

- Internal • External
- Global • Specific
- Stable • Unstable

Positive Events

- External • Internal
- Specific • Global
- Unstable • Stable

Graph of Depression



Thought Records

- Situations will trigger thought pattern (Cog Model)
- Thoughts will be distorted, automatic, repetitive, and negative
- Worsen depression unless challenged

Thought Record

- Like a courtroom, unless a statement is challenged then it will be believed by the jury.

Thought Record

Situation	Automatic Thoughts	Emotions	%	Rational Response

TEST OF EVIDENCE

Evidence that SUPPORTS the Automatic Thought	Evidence that REFUTES (argues against) the Automatic Thought

Activity Scheduling

- Need to be active
- Exercise has been shown to increase neurotransmitter activity
- Severe depression responds to A.S. most

G.R.A.P.E.S.

- Gentle to self
- Relaxation
- Accomplishment
- Pleasure
- Exercise
- Social

Why Group?

Individual Therapy

Pros

- full focus
- less intense
- specific

Cons

- not as fast
- no social learning

Group Therapy

Pros

- learn connections
- resolve conflict
- piggy back

Cons

- intense
- family vs. individual

Thank You

**Sharp Mesa Vista Hospital
Cognitive Intensive Outpatient Program
858-694-8459**

**Manuals on sale benefits go to helping
patients cost \$20.00**