האוניברסיטה העברית בירושלים
THE HEBREW UNIVERSITY OF JERUSALEM

The Hebrew University of Jerusalem

Syllabus

COG THERAPY & PSYCHOTHERAPY IN NEUROPSYCH REHABI - 51696

Last update 10-10-2016

HU Credits: 4

Degree/Cycle: 2nd degree (Master)

Responsible Department: psychology

Academic year: 0

Semester: Yearly

Teaching Languages: Hebrew

Campus: Mt. Scopus

Course/Module Coordinator: Prof. Dan Hoofien

Coordinator Email: dan.hoofien@mail.huji.ac.il

Coordinator Office Hours: Tue 11-12. upon request

Teaching Staff:
Prof Dan Hoofien
Dr. Tal Shany-Ur

Course/Module description:
The course will focus on the conceptual and clinical aspects of neuropsychological rehabilitation, with special emphasis on long-term interventions. Through discussions in class and additional reading we will cover four subjects:
a. Epidemiology and etiology of brain injuries, primary and secondary pathological mechanisms, main syndromes and brain recovery
b) Emotional and psychological reactions to brain injury and psychotherapeutic interventions.
c) Behavioral disturbances and behavior modification after brain injuries.
d) What is cognitive rehabilitation? On what theoretical grounds is it based? How to assemble an efficient cognitive intervention? We will examine how the principals learned in class are applied in the treatment of attention, memory and executive functions.

Course/Module aims:
To learn and understand the main behavioral, psychological and cognitive deficits that are caused by various types of brain injuries, the theoretical basis for their treatment and the common methods of intervention.

Learning outcomes - On successful completion of this module, students should be able to:
On successful completion of this course, students should be able to demonstrate the following clinical-neuropsychological competencies: Knowledge; Comprehension; Application; Analysis; Synthesis; and Evaluation. Specifically, students should be able to: Describe the field of neuropsychological rehabilitation, its scope and methodologies. Identify major neuropsychological theories and paradigms and define key concepts and ideas in NP rehab; Apply NP rehab models and relate them to particular problems. Analyse aspects of cognitive and psychotherapeutic interventions and illustrate them in terms of clinical NP models and concepts; Critically evaluate and synthesise aspects existing treatment modules

Attendance requirements(%):
100%

Teaching arrangement and method of instruction: The course is conducted in two levels: theoretical and clinical principals will be presented and discussed in frontal lectures in class, including via case presentations. At the second level students will read supplementary chapters and studies which are obligatory and will be discussed in class.

Course/Module Content:

a. The model of primary and secondary deficits
b. Cognitive deficits after brain injury
c. Introduction to cognitive rehabilitation – planning an efficient treatment program
d. Treatment of attention deficits
e. Treatment of memory deficits, including errorless lerarning
f. Behavior deficits after brain injury
g. Behavior modification after brain injury
h. The 'Squared Triangle Model' – emotional reactions and their treatment
i. Depression and denial
j. Narcissistic injury and personality disorder
k. Post traumatic reactions
l. Supportive psychotherapy
m. Time limited dynamic psychotherapy
n. Existential psychotherapy
o. Adaptations of psychotherapy to the treatment of brain inured patients

Required Reading:

1. Lezak, M.D., Howieson, D.B., Loring, D.W. et al (2004) Neuropathology for neuropsychologists (Chapter 7, Pages 157-206 only). In Lezak, M.D; Howieson, D.B; Loring, D.W; Neuropsychological assessment (4th ed.). London: Oxford University Press.
2. Kochanek P.M., Clark R.S.B., and Jenkins, L.W. (2006) TBI: Pathobiology. In: N.D. Zasler, D.I. Katz and R.D. Zafonte (Eds.) Brain Injury Medicine: Principles and Practice. New York, Demos. Chap 8, pp 81-97.
3. Stein, D.G. (2006) Concepts of CNS plasticity and their implications for understanding recovery after brain damage. In: N.D. Zasler, D.I. Katz and R.D. Zafonte (Eds.) Brain Injury Medicine: Principles and Practice. New York, Demos. Chap 9, pp 97-109.
4. Stuss, D. (2011) Functions of the frontal lobes: Relation to executive functions. JINS, 17, 759-765.
5. M.M. Mesulam (2002) The human frontal lobes: Transcending the default mode through contingent encoding. In D.T. Stuss & R.T. Knight (Eds.) Principles of Frontal Lobe Function, New York, Oxford University Press. Chap. 2
6. Ylvisaker, M., Turkstra, L., Coehlo, C., et. al. (2007) Behavioral interventions for children and adults with behavior disorders after TBI: A systematic review of the

evidence. Brain Injury, 21, 8, 769-805.
7. Cattelani, Raffaella; Zettin, Marina; Zoccolotti, Pierluigi Rehabilitation treatments for adults with behavioral and psychosocial disorders following acquired brain injury: A systematic review. Neuropsychology Review, Vol 20(1), Mar 2010, 52-85.
8. Klonoff , P. (2010) Introduction and Overview. In P. Klonoff: Psychotherapy after Brain Injury. Chap. 1, pp. 1-20. New York, The Guilford Press.
9. Guillamondegui OD, Montgomery SA, Phibbs FT, et al. (2011) Traumatic Brain Injury and Depression. Comparative Effectiveness Review. Vanderbilt Evidence-based Practice Center. Rockville, MD: Available at: www.effectivehealthcare.ahrq.gov/reports/final.cfm. Read only ES-1 – ES-16
10. Jorg, R., Robinson, R., Moser, D., et. al. (2004) Major depression following traumatic brain injury. Archives General Psychiatry. 61, 42-50
11. T. Ownsworth, J. Strong, M. Radel, et. al. (2007) Awareness typologies, long-term emotional adjustment and psychosocial outcomes following acquired brain injury. NEUROPSYCHOLOGICAL REHABILITATION, 17 (2), 129–150.
12. Onsworth, T. (2005). The impact of defensive denial upon adjustment following TBI. Neuropsychoanalysis, 7, 83-94.
13. Hibbard M. R. , Bogdany J., Uysal S., Kepler K., Silver J., Gordon W. A. , Haddad L. (2000) Axis II psychopathology in individuals with traumatic brain injury. Brain Injury, 14, 1, 45-61.
14. Klonoff , P. (2010) Sense of Self and Identity. In P. Klonoff: Psychotherapy after Brain Injury. Chap. 4, pp. 74-99. New York, The Guilford Press.
15. Bryant,R; Marosszeky, J; Crooks, J; Baguley, I; Gurka, J; (2001). Posttraumatic stress disorder and psychosocial functioning after severe traumatic brain injury. Journal-of-Nervous-and-Mental-Disease. 189 (2): 109-113.
16. Klonoff , P. (2010) Guidelines for Early Psychotherapy Sessions and General Treatment Considerations. In P. Klonoff: Psychotherapy after Brain Injury. Chap. 2, pp. 20-45. New York, The Guilford Press
17. J. M. Fleming1,2 and T. Ownsworth1 A review of awareness interventions in brain injury rehabilitation NEUROPSYCHOLOGICAL REHABILITATION 2006, 16 (4), 474–500
18. Eslinger, P.J., Zappala G., Chakara, F., Barrett, A.M. (2006) Cognitive impairments after TBI. In N.D. Zasler, D.I. Katz and R.D. Zafonte (Eds.) Brain Injury Medicine: Principles and Practice. New York, Demos. Chap 42, pp 779-791.
19. Cicerone, K.D. (2006) Cognitive rehabilitation. In N.D. Zasler, D.I. Katz and R.D. Zafonte (Eds.) Brain Injury Medicine: Principles and Practice. New York, Demos. Chap 41, pp 765-779.
20. Keith D. Cicerone PhD, Cynthia Dahlberg et al., Evidence-based cognitive rehabilitation: Recommendations for clinical practice. Archives of Physical Medicine and Rehabilitation 2000
21. Sohlberg, M.M. & Mateer, C.A. (2001) Introduction to cognitive rehabilitation. In Sholberg, M.M. & Mateer, C.A. Cognitive Rehabilitation: An integrative Neuropsychological Approach . The Guilford Press.
22. Sohlberg, M.M. & Mateer, C.A. (2001) Management of attention disorders. In Sholberg, M.M. & Mateer, C.A. Cognitive Rehabilitation: An integrative Neuropsychological Approach . The Guilford Press.

23. O'Brien, M., Nair, R., & Lincoln, N. (2013) A comparison of the content of memory rehabilitation groups for patients with neurological disabilities. Neuropsychological Rehabilitation, 23, 3, 321–332.
24. Pitel, A., Beaunieux, H., et al. (2006) Two case studies in the application of errorless learning techniques in memory impaired patients with additional executive deficits. Brain Injury, 20(10): 1099–1110
25. M, Spikman., D. Boelen et al (2009) Effects of a multifaceted treatment program for executive dysfunction after acquired brain injury on indications of executive functioning in daily life. Journal of the International Neuropsychological Society doi:10.1017/S1355617709991020

Additional Reading Material:

Course/Module evaluation:
End of year written/oral examination 50 %
Presentation 0 %
Participation in Tutorials 0 %
Project work 0 %
Assignments 0 %
Reports 0 %
Research project 0 %
Quizzes 0 %
Other 50 %
InterimExam

Additional information: