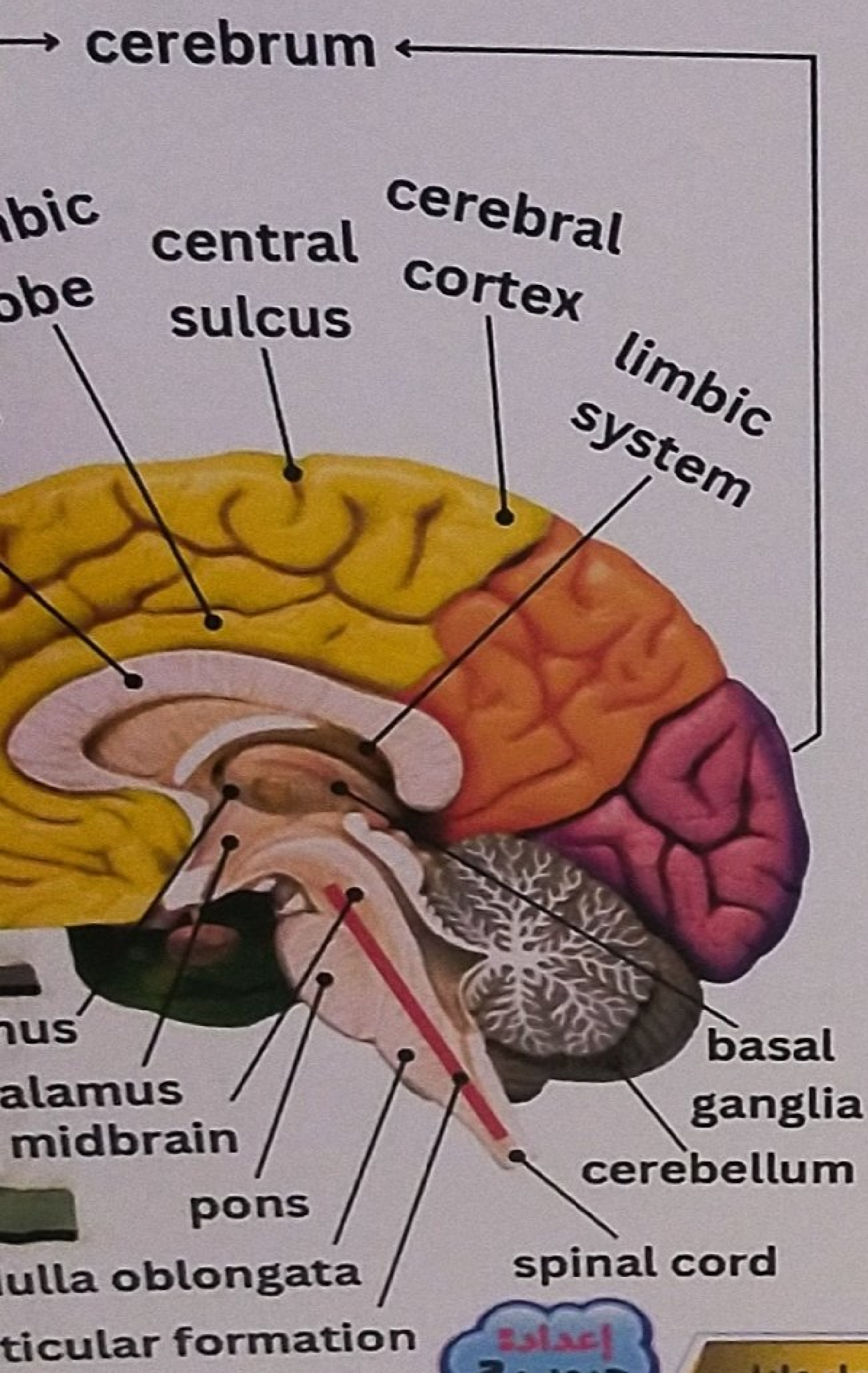


# BRAIN



## FRONTAL LOBE

- High cognitive function (thinking, planning, organizing, decision making, judgement, problem solving,...etc)
- Movement
- Control sexual function (sexual urges)

## PARIETAL LOBE

- Sensation
- Internal stimuli
- Some language-reading
- Some visual function

## OCCIPITAL LOBE

- Vision
- Visual reception and visual interpretation

## TEMPORAL LOBE

- Memory (visual-auditory)
- Hearing
- Understanding language
- Behaviour

## BRAIN STEM

- Breathing
- Alertness
- Digestion
- Swallowing

## CEREBELLUM

- Balance
- Coordination
- Fine muscle control

إعدادة جروب 2

دا اسماء عادل


دا اسماء زين العابدين





مركز البحوث والدراسات  
العلمية والسريرية  
2022/2023


**1- Paranoid delusion**



*Delusion of grandeur*

 false belief that one is a very powerful and important person.


<p style="text-align: center;"><i>Delusion of persecution</i></p> <p> false belief that one is chased by other.</p>	<p style="text-align: center;"><i>Delusion of reference</i></p> <p> false belief that the behavior of other refers to one self</p>
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*Erotic delusion*

 false belief that there is a love story between one self and famous person.

<p style="text-align: center;"><i>Delusion of jealousy</i></p> <p> conviction that the spouse has some definite relation with someone else.</p>	<p style="text-align: center;"><i>Delusion of infidelity</i></p> <p> false belief derives from pathological jealousy that one lover is unfaithful (it is an extreme of the jealousy delusion)</p>
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*Litigious delusion*

 patient write complaint and sends them to responsible person.



## DELUSION


It is false fixed belief not consist with patient educational and cultural back ground that cannot be corrected by logic or reasons.

BA

Prepared by  
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مركز البحوث والدراسات  
العلمية والسريرية  
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**Delusion of influence 2**

 false belief that one is being controlled by other or agencies.


- (1) delusion of thought insertion
- (2) delusion of thought withdrawal
- (3) delusion of broadcasting
- (4) delusion of being control

**Depressive delusion 3**

*Delusion of self-blame, guilt or sin*


 in which the patient that he is wicked, full of sins and unfit to live with other people (unworthiness)

*Delusion of poverty*

 false belief that he lost everything in life

**Somatic delusion 4**

*Hypochondriacal delusion*

 Patient has false belief that he has physical disease e.g. cancer stomach that is based on real organic pathology.



**Suicide Clues**

**Non Verbal Clues**

- Behavior clues
- Somatic clues
- Emotional clues

**Verbal Clues**

- Overt statement  
I wish i were dead
- Covert statement  
Soon everything will be fine

**DEPRESSION**

- constant fatigue
- feeling of sadness
- irritability

**PSYCHOGENIC**

**PHYSIOLOGICAL**

**SYMPTOMS**

ic coma, pyrexia

**PHENOMENA**

phrenia

**PHENOMENA**

falling

**TOLERANCE**

The need to increase dose of drug to reach the same effect in the first dose.

**DEPENDANCE**

The occurrence of physical and psychological symptoms after sudden stopping of medication.

**HALLUCINATIONS**

False perception without external stimuli.

**TYPES**

**VISUAL**

Seeing things that are not there.  
E.g. " I see snakes on the wall "

**OLFACTORY**

smelling smells that do not exist.  
E.g. " I smell my stomach rotting "

**TACTILE (HAPTIC)**

feeling touch sensations in the absence of stimuli  
E.g. A paranoid man feels electrical impulses "from outer space entering his body & controlling his mind."

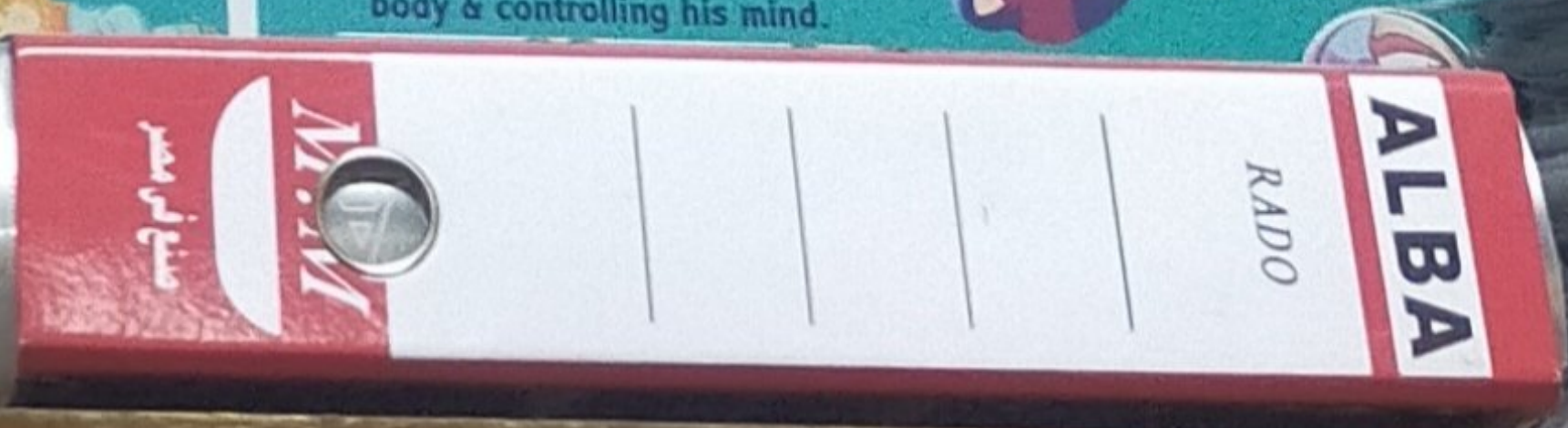
**AUDITORY**

hearing voices when none are present  
I keep hearing my mother's voice telling me i am bad." She died a year

PREPARED BY GROUP 4

UNOSUPERVISION DR.SALLY AHMED DR.RAWDA RAGAD

HEAD OF DEPARTMENT PROF.MONA ELBILSHA



Psychiatric Nursing Department  
Psychiatric Nursing Course  
2023/2024

Obsession Without Visible Compulsions

Ordering and arranging Obsession

Unacceptable or taboo thoughts

U. S D/Al

Fourth Semester  
2023/2024

**Hypotension**

In sever cases

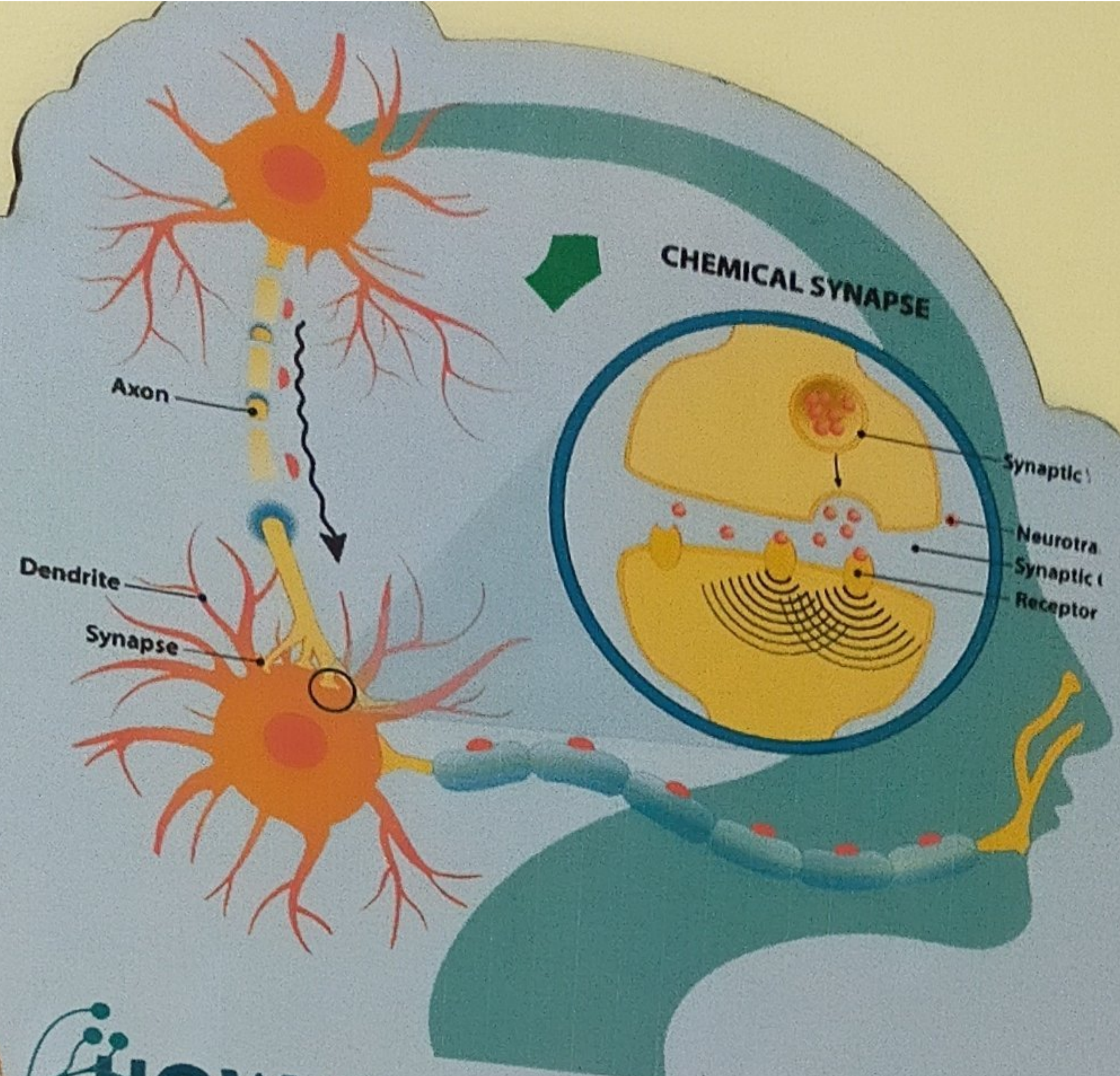
er cases



Mansoura University  
Faculty Of Nursing  
2023/2024



Psychiatric Nursing Department  
Psychiatric Nursing Course  
Fourth Level  
Second Trimester



## HOW NEURON RECEIVE AND TRANSMIT MESSAGE

**1** In order for neuron to communicate they need to receive and transmit message with neuron and from neuron to another neuron.

**3** During rest nerve fiber ( Axon) in state of polarization  
- Inner surface negative charged  
- Outer surface positive charged

**5** Once message reach to Axon it travel along nerve fiber in form of action potential (Electrical Signal)

**7** Once action potential reach to terminal button of nerve fiber cannot pass to synaptic cleft or next neuron :- Instead of that nerve impulse carried by (Neuro Transmitter)

**2** This process use :-  
- Electrical signal  
- Chemical transmitter

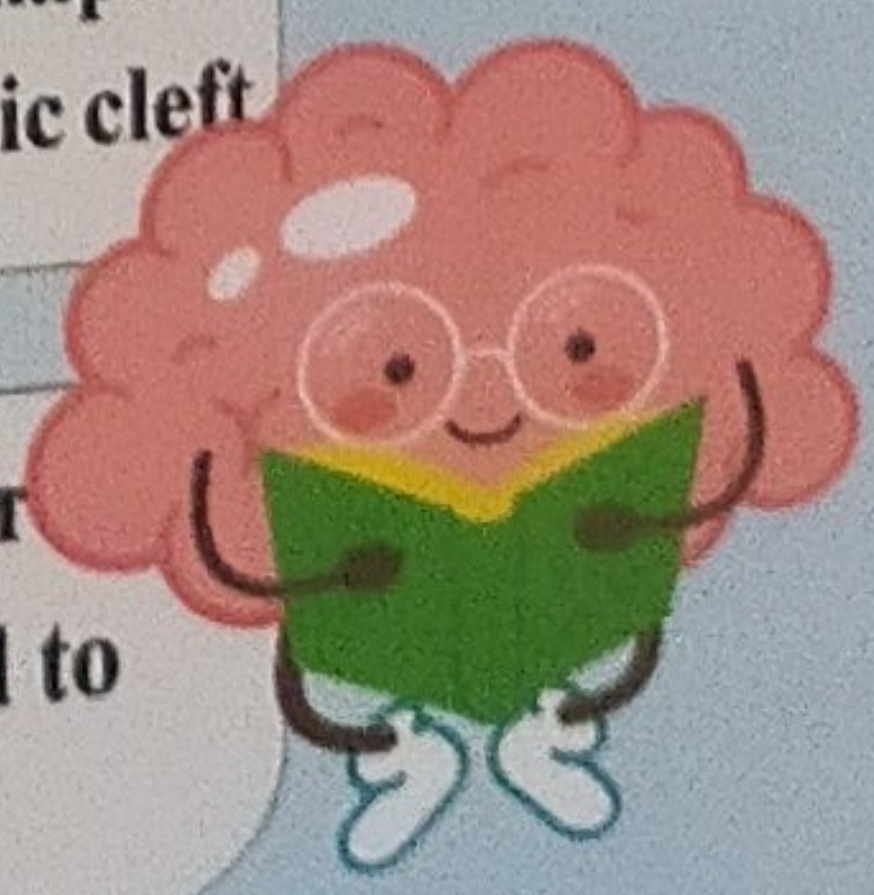
**4** When neuron stimulated by strong stimuli dendrites receive information and travel to cell body than reach to Axon

**6** Then depolarization occur :-  
- Inner surface positive charged  
- Outer surface negative charged

**8** At the terminal button of nerve fiber there are voltage gate calcium ions channel, when depolarization occur → Activation of Ca<sup>+</sup> ions channel → Open → Ca<sup>+</sup> ions flow inside neuron

Then Ca<sup>+</sup> ions interact with neuro transmitter inside vesicles → Causing vesicles to fuse with pre synaptic membrane → and release its content into synaptic cleft

**9** Then neurotransmitter bind with receptor post synaptic membrane causing channel to open → and depolarization again



...ion = Nerve Impulse = Neural ... potential



# BRAIN

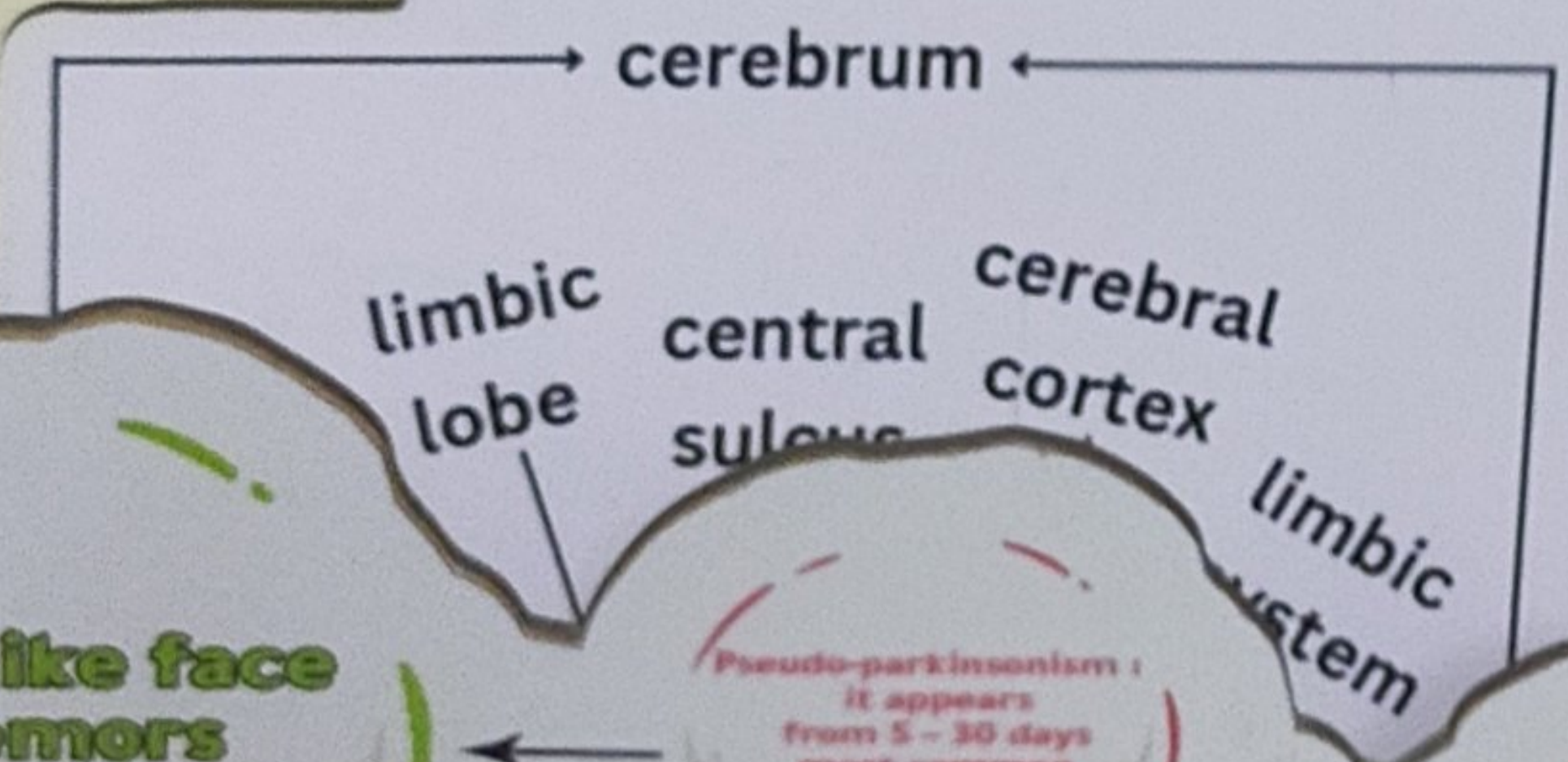


## FRONTAL LOBE

- High cognitive function (thinking, planning, organization, decision making, judgment, problem solving)
- Movement
- Control sexual

## PARIETAL LOBE

- Sensation
- Spatial stimuli
- Language-reading
- Spatial function



- Mask like face
- Tremors
- Rigidity

Pseudo-parkinsonism :  
It appears from 5 - 30 days most common after 40 years

### Early

Akathisia : state of motor restlessness

- Subjective feeling of restlessness
- Inability to sit still & relax

Acute dystonic reaction :  
about 10% of patients experience dystonic onset continues in young ones less than 40 years

- Trismus
- Oculogyric crisis
- Neck stiffness

### Extra pyramidal side effects (EPS)

### Late

- Blepharic flutter
- Excessive salivation
- Verbalized movements of the tongue

## PITIAL LOBE

- Vision
- Visual reception and visual interpretation

## ELLUM

- Coordination
- Muscle control