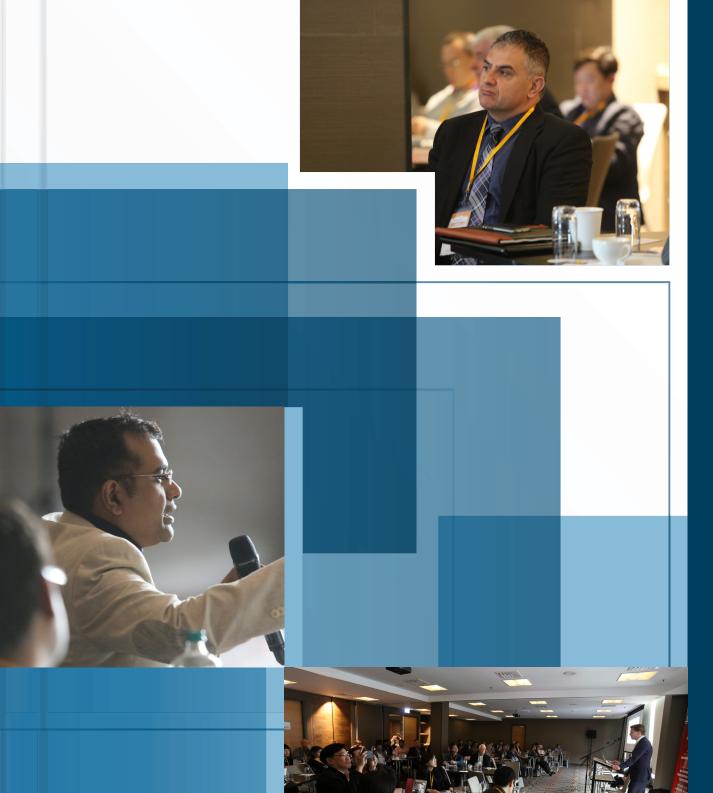
International Conference on

BIPOLAR DISORDER: DEPRESSION AND PSYCHIATRY

November 05-06, 2018 Abu Dhabi, UAE



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Basmah Albashrawi

Alamal Complex for Mental Health, Saudi Arabia

An effective CBT technique for bipolar disorder

It has been found by many studies the negative effect of unhealthy thoughts and cognitive distortion on mood swings on individuals who got diagnosed with bipolar disorders. For this reason, it is important for professionals on mental health setting to be aware of the most effective techniques and strategies that are necessary to be included on the psychotherapy plane to help the clients identifying their thinking errors and increase their ability of restricting their thoughts with a positive and realistic pattern. The influence of such strategies not just of helping the clients handling their mood issues, but even they are superior on reducing the episodes and increasing the level of positive coping approaches.

Biography

Basmah Albashrawi is a professional and experienced Clinical Psychologist with a demonstrated history of working in the hospital & health care industry. She is also highly skilled in Cognitive Behavioral Therapy (CBT), Group Therapy, Clinical Research, forensic cases and Clinical Supervision. Strong healthcare services professional with a MS focused in clinical psychology from Emporia State University. Currently, she is working as a Clinical Psychologist in Alaml hospital, Saudi Arabia.

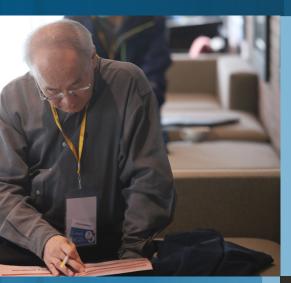
BASS_MON@hotmail.com

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Scientific Tracks & Abstracts (Day 1)

BIPOLAR DISORDER: DEPRESSION AND PSYCHIATRY

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Audit of acute inpatient compliance with Royal College of Psychiatrists' UK standards

Muhammad Adnan Hafeez

Dr Sulaiman Al Habib Medical Group, Saudi Arabia

In 2008, the Royal College of Psychiatrists' Fair Deal campaign recorded that mental health services have lagged behind physical health services, in that inpatient care in some hospitals did not meet acceptable standards. It was considered that inpatient services needed continued investment to make the service users' experience healthier, safer and more conducive the proper clinical recovery and rehabilitation. A random sample of admissions were identified over a 3 month period and data collected from the Trust's clinical information system. The data was entered and analysed in SPSS, and graphs completed in excel. All aspects of confidentiality were maintained throughout the project. The initial audit was completed in April 2013 and demonstrated that the acute inpatient ward was not achieving 100% compliance for all the standards. 3/15 (27%) achieving 100% compliance and 5/15 (33%) achieving less than 50% compliance. Overall the re-audit has shown a significant improvement in 12 of the 14 standards – 6 standards achieving 100% compliance; 5 standards achieving over 80% compliance and one standard achieving 64%. The bed occupancy rate remains 100%, 15% more that the recommended optimum 85% bed occupancy. The number of beds remains over capacity at 22 beds, instead of the recommended 18 beds for an acute psychiatric ward. The provision of therapeutic activities remained the same with 93% compliance, however there number of activities per week has increased from 78% to 82%.

Recommendations: To continue to maintain 100% compliance and improve the standards not achieving full compliance.

Biography

Muhammad Adnan Hafeez has been working as Consultant Psychiatrist for 6 years. He has previoulsy worked in Adult Psychiatric ward for 3 years. He completed his basic and higher Psychiatric training from UK. He holds dual certification with General Medical Council UK in Adult and Addiction Psychiatry. His special interests include Mood disorders, Psychosis and their interaction with substance misuse disorder. He also has special interest in Medical Education.

adnanhafeez8@hotmail.com

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Literature review on effectiveness of psychoeducation for families of patients with bipolar disorder

Rasha Shehadi

Novomed Psychiatry and Neurology, UAE

Bipolar disorder carries a tremendous burden on patients and their families on various aspects and impacts their mental health and wellbeing, relationships, functioning, and financial status. Pharmacotherapy is the first line of treatment, yet research concluded that adjunctive treatment plans, including family psychoeducation, yield better outcome and significantly less relapse and hospitalization rates. Despite the adoption of the biopsychosocial model in today's medicine, families are less likely to be involved in the treatment of people with bipolar disorder for various reasons. This is a review of studies that suggest that adjunctive family psychoeducation and focused therapies greatly improves treatment outcome for patients and their families. Some models of family psychoeducation intervention will be discussed, in addition to a case presentation.

Biography

Rasha Shehadi obtained her Masters of Science in Mental Health Nursing from the American University of Beirut in 2017. She worked in several mental health outpatient facilities, starting with Doctors without Borders NGO in Beirut, and then starting up mental health services after moving to Dubai in 2012. Recently she joined Novomed Psychiatry and Neurology to collaborate in the set up of their services.

rashaonnet@gmail.com

BIPOLAR DISORDER: DEPRESSION AND PSYCHIATRY

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Acceptance and commitment therapy to treat depression

Najiha Syeda

Dwight School Dubai, UAE

Acceptance and Commitment Therapy (ACT) may seem confusing. In the case of ACT, you are committing to facing the problem head-on. Instead of avoiding your problems, you commit to actions that will help you stop struggling against the inevitable and facilitate thriving instead. ACT is effective for a wide range of psychological disorders, but it is also effective as a life-affirming and inspirational perspective on the world. ACT can show you exactly what happens and how you can harness the power of acceptance to get the life you want. ACT in simple terms, it is a type of therapy that aims to help patients accept what is out of their control and commit to actions that can improve and enrich their lives.

Core Processes: There are six core processes of ACT that guide patients through therapy and provide a framework for developing psychological flexibility-

- Acceptance
- · Cognitive Diffusion
- · Being Present
- · Self as Context
- Values
- Committed Action

ACT is built on the Relational Frame Theory, a theory that is well supported by psychological research. This theory is based on the idea that the human ability of "relating" is the foundation of language and cognition. We can apply mindfulness to accept our feelings and change how we react and relate to them instead of trying to avoid them. ACT Metaphors: Metaphors play a big role in Acceptance and Commitment Therapy, as they provide clients with a simple way to understand how their feelings and thoughts influence their actions, allowing them to see how adjusting the way they think can result in extremely positive outcomes. The Sailing Boat Metaphor, The Mind Bully quick sand metaphor are few common metaphors. ACT for treating disorders: While ACT, like the practice of mindfulness itself, can be applied in any individual's life, it has also proved to be effective in treating many psychological disorders, including general anxiety disorders, chronic pain, depression, OCD, eating disorders, and social anxiety. Applying ACT in Group Therapy: ACT can be applied on an individual level, but it is also effective when delivered via a treatment group. The Association for Contextual Behavioral Science acknowledges the effectiveness of group ACT treatments for anger, depression and general anxiety, social anxiety, chronic pain, and for struggling adolescents. ACT Apps That Can Help As technology flourishes, so too does the set of treatment options available to us. As with so many other problems, issues, or opportunities, there's an app for that! The two most popular apps are described below. The Happiness Trap App and the ACT coach. ACT has the potential to produce extremely positive results, not only for those suffering from psychological disorders, but also for those suffering from the pain inherent in everyday life. With so many resources available online, it's easier than ever to give ACT a try.

Biography

Najiha Syeda is an International Counselor who has worked in Saudi Arabia, Australia and UAE, with a proven track record of 13 years of experience in the education field. Her educational qualifications include MSc in Counseling and Psychotherapy, Bachelors in Psychology and Post Graduate Diploma in Child and Youth Counselling. She is a Member of American School Counselor Association (ASCA), International Association for Counselling (IAC) and Affiliate Member of Psychotherapy and Counseling Federation of Australia (PACFA).

Syeda_najiha@yahoo.com

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Cognitive behavioral therapy

Shaheda Tabasum

Institute of Behavioral and Management Science, UAE

Cognitive-Behavioral Therapy (CBT) is a form of psychotherapy that treats problems and boosts happiness by modifying dysfunctional emotions, behaviors and thoughts. Unlike traditional Freudian psychoanalysis, which probes childhood wounds to get at the root causes of conflict, CBT focuses on solutions, encouraging patients to challenge distorted cognitions and change destructive patterns of behavior. Four myths and misconceptions about CBT

1. Myth: CBT is mechanical and too technique-driven.

Fact: While it's true that CBT has many tools in its toolbox and looks to scientific evidence when available, it is far from mechanical. Indeed, CBT, like all effective psychosocial therapies, prioritizes the therapeutic relationship, rapport and a working connection.

2. Myth: CBT only treats symptoms, not the whole person.

Fact: When done properly, CBT almost by definition treats the whole person and is not just about symptom reduction. This is because CBT conceptualizes many of the problems that people have as bio-psychosocial processes.

3. Myth: The past is unimportant.

Fact: Cognitive-behavioral therapists are very interested in their client's history and past experiences. Obviously, our life experiences shape and influence us to be who we are in the present.

4. Myth: CBT is limited by available scientific evidence.

Fact: While it's true that CBT tries to set its course with the compass of research findings, it is by no means limited by available scientific data. Indeed, as is the case with most psychotherapy approaches, CBT involves a high degree of creativity and artistry.

Biography

Shaheda Tabasum is a professional and compassionate counselling expert with 14 years of working experience in the education field. She is highly skilled in facilitation, communication, mentoring, teaching and psychology, and holds organizational and administrative skills to enable success. She has highly analytical mind, strong critical thinking abilities, and excellent perception skills to analyse a situation and provide grounded and beneficial guidance. For ongoing continuous professional development, she is currently pursuing Masters in Counselling and Psychotherapy (M.sc). Also, she is an active Member of American Counselling Association and International Association for Counselling.

shaheda_t@yahoo.com

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Sholeh Toobaee

Iranian Hospital, UAE

Biography

Sholeh toobaee is a professional and experienced Psychiatrist with a demonstrated history of working in the hospital & health care industry. Currently, she is working as a Psychiatrist at Iranian Hospital, UAE

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Sameera Hassan Abkar

King Abdulaziz University, Saudi Arabia

Bipolar disorder diagnosis and treatment of cognitive behavioral therapy techniques

Aim: The study aims to enhance knowledge and skills of participants, for diagnosis and treatment of bipolar disorder.

Workshop Themes:

- -Definition of Bipolar Disorder, symptoms, types.
- -Display the case for training on symptom.
- -Definition of Diagnostic methods and Tools.
- -Definition of the deference between Bipolar and Porderline and other disorder.
- -Definition of Cognitive Behavioral Therapy techniques.
- -Definition of Cognitive Behavioral Therapy sessions

The investment from this workshop: After this workshop the trainees can be more and skill -Confident in their abilities

- -Clear on how to Diagnostic Bipolar Disorder
- -Motivated to use Cognitive Behavioral Therapy techniques -
- -Practical knowledge of how to transfer their learning into sessions
- -Able to tackle challenges-
- -Connected to their team and Appreciated by the Clients.
- -Discover how this workshop can help them

Content: Bipolar Disorder, symptoms, the deference between Bilar and Porderline and other disorder.

- -How to overcome the problem of difficulty in diagnosing Bipolar disorder.
- -Display the case for training on symptom identification DSM 5, MMPI
- -Diagnostic methods and Tools
- -Cognitive Behavioral Therapy techniques (Problem-solving frequently, monitoring thought and feeling, goal setting, self-management plan)
 - -Cognitive behavioral therapy sessions.
 - -Demonstration video to address Bipolar disorder and exercises.

Workshop outputs

Clear tangible outcome at the end of the workshop.

- -Having a scientific background about Bipolar Disorder.
- -Having an exercises and worksheets.
- -workshops range about 5 hours

They can be delivered from 20 to 30 persons. Sameera Hassan Abkar has a 36 years of experience in Psychological, Marital and Family Counseling, Psychological Counseling, College Counseling Center.

Biography

Sameera Hassan Abkar is interested in training and preparing psychologists, loving the service of postgraduate students MA and PhD, in support of talent and talented members of the community service with many associations and training institutes, including a member of the reform of Albin Center Ahya. She has attended many psychological and educational courses and training sessions, conferences and forums. Currently, she is an Associate Professor of the Psychology Department at King Abdulaziz University, Jeddah, Saudi Arabia.

D.samira112@gmail.com

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Psychotherapy for patients with bipolar disorder

Melba Alvarez Martinez

National Institute of Psychiatry Ramon de la Fuente Muniz, Mexico

Due to the increase of patients diagnosed with bipolar disorder as well as the increase of suicides due to this condition, it is important to point out the therapeutic objectives that can be focused throughout the treatment. Thus, based on psychoanalytic Instituto Nacional de Psiquiatría Ramon de la Fuente Muniz, literature and institutional clinical experience, some useful psychotherapeutic objectives and strategies that support pharmacological treatment are proposed, for example: The regulation and control of impulses and affects, promote autonomy and self-sufficiency, analyze aspects of identity (subjectivity), encourage self-observation and self-evaluation and promote social and work rehabilitation activities. On the other hand, it has been observed that recreational and/or artistic activities promote the expression of affects as well as the psychic pain that some of the patients present due to traumatic experiences experienced at some point of their existence.

Biography

Melba Alvarez Martinez has completed her Doctorate in Psychoanalytic Research in Psychoanalytic Psychotherapy and Master's degree in Psychoanalytic Psychotherapy of Children and Adolescents (IIPCS/APM) from the International College of Higher Education. She has obtained her Psychology degree from the National Autonomous University of Mexico. She is working as a Clinical Psychologist at the National Institute of Psychiatry. She is the author of the book Psychological Theories and has published articles in international and national journals of psychoanalysis. She is a Member of the Editorial Committee of the Magazine Letter in Psychoanalysis (LeP).

melbam7@hotmail.com

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The cause of anxiety in the patients with CHF and dementia of eastern states and how depression is effecting in the eastern population as a whole in All India Institute of Medical Sciences

Soumen Acharya

National Institute of Public Cooperation and Child Development, India

Aim: To evaluate prevalence of depression and anxiety disorders in patients with CHF and dementia in eastern states population and analyze their possible predictors and risk factors who were coming to AIIMS from eastern India.

Method: Patients with heart failure and dementia were hospitalized in AIIMS CN Center between January 1984 to July 2000 were included in the study. Patients were given self-administered questionnaires viz. Zung Self-Rating Depression Scale and Zung Self-Rating Anxiety scale for depression and anxiety assessment during hospitalization. Demographic data and physical history of patients were collected. Statistical analysis: Data obtained were assessed using one-way analysis of variance or Student's t-test wherever appropriate.

Result: Of a total of 80 patients, 62 returned the questionnaires. Mean age of participants was 61 years. Mean depression and anxiety scores were 55.9 ± 1.49 and 54.9 ± 1.49 , respectively. Depression was common in patients with class II and III heart failure, patients with multiple comorbid conditions and those with previous history of stroke or MI (p<0.05). Depression was found to be significant in patients who were on adjuvant beta blockers and statins (p<0.05) compared to patients on other medications. The main predictors of anxiety were presence of comorbidities and severity of disease.

Conclusion: NYHA class II and III, advancing age, presence of comorbidities and previous history of MI showed a strong positive association with depression and anxiety scores. Patients on beta blockers and statins were reported to have higher levels of depression. Early diagnosis of mood disorders may aid in long-term management and better quality of life in heart failure patients.

Biography

Soumen Acharya has completed his PhD in Heart Surgery and Anxiety Inpatients. He is a Fellow of Social Psychiatry in India. He has worked at AIIMS for 21 years and is currently working as a Consultant at a National Institute of Public Cooperation and Child Development, New Delhi, India.

drsoumenacharya@gmail.com

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