

# Cognitive Behavioral Therapy (CBT) Techniques in Treating Psychotic Disorder

Andrew Mazzucchelli\*

Department of Psychiatry, National Defense Medical Center, Taipei, Taiwan

## DESCRIPTION

It has been demonstrated that Cognitive Behavioral Therapy (CBT) is useful for a number of issues, including depression, anxiety disorders, difficulties with alcohol and other drugs, marital issues, eating disorders, and serious mental illness. Numerous studies have demonstrated that CBT can significantly enhance function and quality of life. Numerous studies have demonstrated that CBT is types of psychotherapy and psychiatric medications. It is crucial to stress that the development of CBT is based on both clinical and research practice. In fact, there is enough scientific support for CBT to conclude that the proposed procedure is effective. CBT is unique from many other types of psychiatric therapy in this way. Through the elimination of avoidant and safety-seeking behaviors, which prevent people from self-correcting false beliefs, Cognitive Behavioural Therapy (CBT) improves mental health, stress management, and disorders linked to stress. To improve, the current study assesses the efficacy of CBT in clinical and general populations under stressful circumstances and identifies recent developments in CBT related procedures.

Changes in thought processes brought on by CBT therapy recognize the own cognitive biases and learn to reevaluate them in the context of reality. Deepen the understanding of other people's actions and intentions. Apply problem-solving techniques to handle challenging circumstances. Gain self-assurance in the skills through practicing.

### Changes in behavioral patterns

- Instead of avoiding anxieties, face them.
- Role-playing can help in becoming ready for potentially awkward social situations.
- Learn how to relax body and mind.

Not all CBT employs these techniques. Instead, patients/clients and psychologists collaborate to clarify the issue and create a treatment plan. The main goal of CBT is to assist people in becoming their own therapists. Patients and clients can be assisted in learning coping skills, which will enable them to learn to alter their ideas, troublesome emotions, and behaviors, through in-session exercises and outside-of-session homework. The CBT therapist does not lead to difficulties, but emphasizes what is happening in the person's current life. While some knowledge of our past is necessary, the main emphasis should be on moving forward to create more skillful coping mechanisms. CBT is for psychotic diseases like schizophrenia.

CBT has been demonstrated to be successful in reducing positive symptoms of schizophrenia, such as delusions and/or hallucinations, according to a meta-analysis assessing the efficacy of psychological treatments for the condition. There was additional evidence that CBT is a particularly promising addition to medication therapy for schizophrenia patients experiencing brief psychotic episodes as opposed to a more persistent illness.

Compared to other interventions including early intervention programmes and family interventions, CBT seemed to have minimal impact on hospitalization or recurrence. Nevertheless, CBT has improved secondary outcomes. For instance, data that have been verified by current and earlier meta-analyses of controlled CBT studies in schizophrenia demonstrate that CBT has a small to moderate effect size in both positive and negative symptoms compared to control circumstances. The medium impact sizes for improvements in secondary outcomes, such as general functioning, mood, and social anxiety, which were not the direct targets of treatment, were found in this meta-analysis.

**Correspondence to:** Andrew Mazzucchelli, Department of Psychiatry, National Defense Medical Center, Taipei, Taiwan, E-mail: andrew.mazzucchelli@lmu.de

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