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The role of psychopathology in modern psychiatry

Psychiatry has been significantly influenced by the social, economic and scientific changes that have occurred within the last few years. These influences have evolved psychiatry into a modern medical specialty that is increasingly knowledgeable about the structure and function of the brain, mind (thoughts, feelings, and consciousness), behaviors and social relationships. Nonetheless, this knowledge has not uniformly spread and, in many institutions, psychiatric education and practice remain largely based on knowledge developed over the last century. Over a century ago, the target of psychiatry was madness, and psychiatrists were called "alienists" ¹. Along the years, the target has changed: for a number of years psychiatrists have been asked to treat mental disorders, and now the target has evolved to include the promotion of the mental health of the general population ^{2,3}. In fact, some traditional illnesses have seemingly disappeared from clinical observation (e.g., organic brain disorder or involuntal depression which were listed among the DSM-III diagnoses), while new forms of mental health problems have become of frequent observation by psychiatrists.

Body image is becoming more and more important in Western cultures, since it represents the link between the inner and outer world. Many new mental disorders arise from the need "to appear in order to be someone" rather than on the need "to be someone". The pathological use of social media and the Internet, as well as the excessive importance attributed to body image (such as in orthorexia and vigorexia), are valid examples of this mismatch between being and appearing.

Excessive use of the Internet can have detrimental effects on mental health in vulnerable people, particularly younger persons. In fact, Internet Gaming Disorder has been recently included among the behavioral addictions in the ICD-11 ⁴, following the cases of the Japanese *hikikomori* and the high rates of hospital admissions in emergency units after hours spent gaming online. Several pathological behaviors occurring in young people, such as excessive cannabis use, contribute to the increased suicide rates in this population, highlighting the need to better characterize the psychopathological characteristics of modern adolescents. Suicide is also increased in clinical populations, such as patients diagnosed with Traumatic Brain Injury (TBI) or Obsessive-Compulsive Disorder (OCD), but this relationship has too often been neglected by clinicians and needs to be deepened.

It is now clear that modern psychiatrists should balance the classical knowledge with new findings coming from research and evidence-based medicine. For example, OCD has been moved in both the DSM-5 and the ICD-11 from the chapter of anxiety disorders to a new stand-alone chapter, which also includes trichotillomania, hoarding disorder, body dysmorphic disorder, and excoriation disorder ⁵. This change is mainly due to a modern clinical and psychopathological characterization of OCD with relevant implications for clinical practice and treatment options. And yet, Post-Traumatic Stress Disorder (PTSD) and bipolar disorders have followed a similar course. Finally, research on schizophrenia is moving towards ultra-high risk and predictive models of psychoses ⁶. Schizophrenia is now conceptualized as a complex disorder with multiple genetic, environmental and psychosocial risk factors. The

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polygenic risk score represents one good example of the complexity of schizophrenia.

In order to achieve effective integration of the ever growing wealth of knowledge in mental health practice it is essential to redefine the clinical foundations of psychiatry, and to reconsider and reinterpret “old” concepts and approaches that are still valid (“back to fundamentals”). Psychiatrists will have to show a courageous openness towards innovation and experimentation⁷. It is the time to update the training curricula by integrating the theoretical bases of psychiatry with recent evidence coming from scientific studies. In particular, from an educational perspective, it may be useful to identify a “common trunk” of knowledge and skills for all psychiatrists, and several different professional “ramifications” for differentiating skills and knowledge⁸. This will characterize the professionalism of psychiatrists of the future, as it happens for other branches of medicine. Among the elements constituting the common trunk of the psychiatrist's professionalism, psychopathology certainly plays a major role. Other elements of this common trunk are: 1) to care for the patient as a person. If the patient is not considered as a whole, with an attention on his/her life history, the clinical approach will fail, because patients will not trust psychiatrists who do not show a real interest toward them; 2) to differentiate mental health problems due to social difficulties from full-blown psychiatric

syndromes. It is not the psychiatrist's task to intervene in cases of social distress, but psychiatrists' have the skills to recognize these situations and to propose psychological or social support; 3) to provide patients with evidence-based personalized treatments on the basis of the bio-psycho-social approach; 4) to organize and coordinate the community activities for promoting mental health.

The ramifications can include the application of the different psychotherapeutic techniques, the use of multiple diagnostic tools, the knowledge of the various rehabilitation methods, the specialization on specific population groups (e.g., adolescents or the elderly) or particular stressful conditions (e.g., the mental health of migrants or prisoners) or clinical situations (e.g., the pathologies due to excessive use of the new technologies or of the new drugs).

In this issue of the Journal, modern psychiatric psychopathological needs have been addressed in terms of clinical practice, training and research, bringing together epidemiological and clinical findings with psychopathological features of classical and new forms of mental disorders, in an integrated approach to psychiatry. We have read with the utmost interest the selected articles, which have been delivered by expert clinicians and researchers in their fields. We hope our readership will do the same.

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