

PSYCHOPATHOLOGY

The most pressing questions



Research goals

- Predict (treatment) outcomes
- Allow early diagnosis
- Improve mechanistic understanding

Which symptoms should be addressed?

- Disease-defining symptoms (i.e. bizarre delusions in schizophrenia)
- Clinically relevant but possibly unspecific (i.e. cognitive impairment in depression)
- Transdiagnostic approach

Methods requirements

- Better cognitive tasks:
- more reliable, better validated, more robust, more sensitive to interindividual differences
- validation in more representative and bigger samples

Questions

Can we create an experimental paradigm that would dissociate wrong inference from wrong model?

Questions

Can we tailor tasks to dissociate NE
and DA functions?

Questions

Anxiety and depression often overlap in clinical samples. Can we create distinct experimental models (in healthy people) of anxiety and of depression, to investigate them separately?

Questions

What is the influence of interoception on decision making?

Questions

Can we get a neurocomputational understanding of "stress", i.e. of those situations that confer a long-term risk of disorder?

Questions

Why do some people not get sick,
and why are some of those
particularly healthy? (resilience)

Questions

Can we predict cognitive outcomes
in depression (and identify possible
treatments)?

Questions

Does training on cognitive tasks that are relevant for disorder mechanisms induce plasticity and improve outcomes?

Questions

Can we understand from a neuroscience perspective the quality of therapist/patient relationship (which is predictive of treatment outcome)?

