

## **REGULATIONS FOR THE MASTER OF PSYCHOLOGICAL MEDICINE (PSYCHOSIS STUDIES) (MPsyMed)**

*(See also General Regulations)*

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### **PM.1 Admission requirements**

To be eligible for admission to the courses leading to the Master of Psychological Medicine (Psychosis Studies), a candidate shall:

- (a) comply with the General Regulations; and
- (b) hold a Bachelor's degree or the degree of MBBS/Psychology/Nursing/Social Work/Occupational Therapy or other healthcare related programmes of this university, or another qualifications of equivalent standard from this university or from another university or comparable institution accepted for this purpose; and
- (c) satisfy the examiners in a qualifying examination, if required.

Advanced standing for the Master of Psychological Medicine (Psychosis Studies) may be granted to a candidate who has successfully completed the Postgraduate Diploma/Postgraduate Certificate in Psychological Medicine (Psychosis Studies) subject to the condition that the application is received not more than three years after successful completion of the relevant courses:

- (a) advanced standing, up to a maximum of 4 courses (2 core and 2 elective courses), may be granted to holders of the Postgraduate Diploma in Psychological Medicine (Psychosis Studies) PDipPsyMed; and
  - (b) advanced standing, up to a maximum of 3 courses (1 core and 2 elective courses), may be granted to holders of the Postgraduate Certificate in Psychological Medicine (Psychosis Studies) PCPsyMed.
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### **PM.2 Award of degree**

To be eligible for the award of the Master of Psychological Medicine (Psychosis Studies), a candidate shall

- (a) comply with General Regulations; and
  - (b) complete the curriculum and satisfy the examiners in accordance with the regulations set out below.
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### **PM.3 Length of curriculum**

The curriculum shall last for two years on a part-time basis, with a minimum of 400 hours of prescribed work. Holders of PDipPsyMed and PCPsyMed may apply to re-enter the MPsyMed programme after a break of at least one year from exiting the programme. The minimum and maximum period of study shall be two and four years respectively. For candidates with advanced standing, the minimum and maximum period of study shall be one and two years respectively.

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### **PM.4 Completion of curriculum**

To complete the curriculum, a candidate shall:

- (a) follow instruction in the syllabuses prescribed for the courses and complete satisfactorily all written and practical work; and

- (b) satisfy the examiners in the course by continuous assessments and written examinations, and
- (c) complete and present a satisfactory dissertation on an approved title.

A candidate who fails to fulfill the requirements within the prescribed maximum period of study shall be recommended for discontinuation under the provision of General Regulation G12, except that a candidate who is unable because of illness or circumstances beyond his/her control to complete the requirements within the prescribed maximum period of study, may apply to the Board of Studies for permission to extend his/her period of studies.

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### **PM.5 Assessments**

- (a) A candidate who
    - i) fails to satisfy the examiners in continuous assessments of a course may be permitted to retake the prescribed assessment(s); or
    - ii) fails to satisfy the examiners in the written examinations of a course may be permitted to re-sit the examination(s) with or without repeating the course; or
    - iii) fails to satisfy the examiners in the examination of the dissertation, but has satisfactorily completed the prescribed work, may be permitted to re-submit the dissertation within a specific period of time.
  - (b) A candidate who
    - i) is not permitted to retake the prescribed assessment(s) or repeat a course which he/she has failed, or present himself /herself from re-examination(s), or re-submit a revised dissertation; or
    - ii) fails to satisfy the examiners in written examinations at the third attemptmay be required to discontinue his/her studies.
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### **PM.6 Exit qualification**

A candidate who has enrolled in the Master of Psychological Medicine (Psychosis Studies) may opt to exit the programme after having satisfactorily completed the prescribed courses and works:  
3 core and 2 elective courses (a total of 100 hours) for PCPsyMed; or  
3 core and 7 elective courses (a total of 200 hours) for PDipPsyMed

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### **PM.7 Assessment results**

At the conclusion of the examination, the candidates will be notified of the examination result. A candidate who has shown exceptional merit at the assessment result may be awarded a mark of distinction and this mark shall be recorded in the candidate's transcript.

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## **SYLLABUS FOR THE MASTER OF PSYCHOLOGICAL MEDICINE (PSYCHOSIS STUDIES)**

The programme consists of 4 core courses (80 hours), 6 elective courses (120 hours) and a dissertation (200 hours), making a total of 400 hours.

The mode of assessment for core and elective courses comprises continuous assessments (40%) and written examinations (60%). Candidates are also required to submit a dissertation to the satisfaction of the examiner(s).

## **CORE COURSES**

### **PM0001 Introduction to Psychotic disorders: Epidemiology and Aetiology (20 hours)**

This course will start with an introduction to the history of the study of psychotic disorders, covering how the concepts and approaches have evolved in the last 150 years as a result of technological and societal progress, as well as highlighting the important challenges in the last decade. General principles of epidemiology will be introduced. The incidence and the prevalence of psychotic disorders in different populations will be considered, highlighting the way potential aetiological mechanisms might be suggested from epidemiological data. Using the example of the season of birth effect, the exploration will develop to cover the current findings of early and late environmental risk factors for psychosis (such as maternal influenza, high paternal age, migration, urban upbringing, and substance abuse). It will highlight the different pathway through which these factors might act. The evidence for genetic factors will be reviewed in detail, with an appreciation of the extent to which genetic factors determine the risk for psychosis. Potential mode of inheritance will be discussed. Some examples of gene-environment interaction will be discussed. The partial expression of traits in genetically related individuals, as well as in schizotypal disorders will also be described. The potential role of stress in the onset and relapse of the disorder will be reviewed in the context of the stress-vulnerability approach.

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### **PM0002 Descriptive Psychopathology (20 hours)**

This course will introduce the nature of the psychotic symptoms, as well as common non-psychotic symptoms. It starts with principles and techniques of symptoms assessment using the phenomenological approach. Factors important to the process of assessment and ascertainment of symptoms, and their roles in diagnosis of psychotic disorders will be discussed. The definition and classification of key psychotic symptoms such as hallucinatory and delusional experiences will be enriched by discussions of their significance and key features. Related subjective phenomena (such as imagery, pseudohallucinations, over-valued ideas, confabulations) will also be explored and contrasted with core symptoms. Assessment of negative symptoms and language disorganization will also be discussed, with introduction to the use of common instruments, as well as reliability and validity issues in measuring these symptoms.

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### **PM0003 Course and outcome of psychotic disorders (20 hours)**

This course will consider psychosis in the context of a longitudinal life-span course. The course will also introduce the various stages of the disorder, premorbid, early prodrome, late prodrome, first episode psychosis, remission period, relapse, residual and refractory states. Participants would appreciate the conceptual backgrounds and modern definitions of each disease stage. The nature and measurement of other key dimensions for outcome will also be considered (such as functioning and quality of life). Data from classic long term studies (e.g. Madras study) will be considered in detail to understand the evolution of symptoms in a typical psychotic disorder. Long term outcome and short term outcome will be contrasted, leading to an appreciation of the importance of the critical period in early psychosis. Participants will also study the use of the longitudinal approach in individual case analysis and formulation in order to identify likely potential course and risk factors for adverse outcome for patients.

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### **PM0004 Critical appraisal and evidence base approaches in Psychosis (20 hours)**

This course will systematically cover skills required for critical appraisal of research reports, particularly applied to the field of psychosis. This includes considerations of sampling, sample size,

statistical analysis, presentation of data, potential confounders, selection of outcome variables, interpretation of findings, and generalization of results. The importance as well as limitations of the evidence-based approach towards clinical knowledge will be discussed. This course also provide an introduction to the varieties of investigational techniques that has been applied to study the nature, causes, outcome, and intervention of psychotic disorders, so that participant will develop a capacity for assessing research evidence, as well as to plan how to address questions encounter in real-life clinical situations using appropriate methodology. Approaches will include longitudinal studies, randomized controlled studies, explanatory studies, survey, and qualitative studies.

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## **ELECTIVE COURSES**

### **PM0005 Neurocognitive dysfunctions in Psychosis (20 hours)**

This course explores neurocognitive impairments in psychosis. Starting with a basic introduction to cognitive functions and ways to study them, it reviews methodological issues and conceptual assumptions of using neuropsychological methods to characterize brain function impairments in psychosis. The nature of neurocognitive dysfunctions observed, including long term memory, working memory, semantic memory, selective attention, sustained attention, and executive functions will be studied. Implications of their impairments in psychotic disorders will be discussed. The course will cover how these functions were assessed, including issues n psychometrics and measurement principles (such as double dissociation and learning effects). The relationship between neurocognitive dysfunctions and functional outcome will be highlighted. This course also review the current use of cognitive theories to account for symptoms of psychosis, such as the inner speech theory for auditory hallucinations, failure of internal monitoring for passivity phenomena, the probabilistic reasoning theory of delusion formation.

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### **PM0006 Neurobiological processes in Psychosis (20 hours)**

This course considers the current understanding of neurobiological processes involved in psychosis. It reviews brain systems implicated in psychosis, their anatomy and physiology. The role of the dopamine system is explored, particularly in relation to the processing of salience information in the environment. Involvement of different brain systems in psychosis is also considered in the light of functional and structural neuroimaging studies. The use of neurocomputation modeling to explore information processing failures involved in psychosis will also be discussed.

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### **PM0007 Early intervention for Psychosis (20 hours)**

General concepts of indicated and preventative interventions in medicine will be introduced. The importance of a phase specific approach is highlighted with reference to distinctive cost benefit considerations in screening and intervention for different phases of a disorder. Principles of Early Intervention for Psychosis will be discussed; key concepts such as the critical period, duration of untreated psychosis, early detection, at risk mental state, phase specific intervention, and prodrome intervention will be discussed. The rationale behind each of these approaches will be discussed. Factors affecting duration of untreated psychosis and pathway to care will be explored, leading to a consideration of potentially modifiable factors. Specific implementation examples will be illustrated by case studies of Hong Kong and International early psychosis projects. Effectiveness in achieving these aims will be considered by evidence based empirical data.

### **PM0008 Pharmacological interventions for Psychosis (20 hours)**

This course will provide comprehensive understanding of pharmacological interventions for psychosis. After introduction of basic concepts in pharmacokinetics and pharmacodynamics, basic concepts in neurochemistry will be introduced. It will then consider the efficacy of conventional and atypical antipsychotics medications, with discussions on current understanding on the mechanisms of actions will be discussed. Neurotransmitter blocking profile of antipsychotic medications will be introduced. Side effects of antipsychotic medications, their classifications, and their underlying mechanisms will be studied. Assessments and monitoring of side effects, clinically, as well as using standard research instruments, will be covered. Use of antipsychotics in the treatment phase and the maintenance phase will be highlighted. The process of drug development and clinical trials, as well as potential biases and ways to avoid them, will be outlined to enable an ability to critically review evidence based information for particular medications. Patient's perception of medication treatment, as well as adherence behavior, will be discussed together with local empirical findings. Ways of improving medication adherence will be discussed.

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### **PM0009 Psychosocial interventions for Psychosis (20 hours)**

This course will introduce the principles and skills in common interventional strategies to improve outcome in psychotic disorders, including cognitive behavioural approach, life coaching, psychoeducation, cognitive remediation and supportive psychotherapy. The framework, potential indications, and evaluation of these approaches will be discussed. Emphasis will be placed on how to determine needs and provide optimal therapeutic input to patients in different clinical scenarios.

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### **PM0010 Specialized case intervention for Psychosis (20 hours)**

In this course the principles and practice of case management in psychotic disorders will be introduced. The importance of ongoing acquisition of knowledge and skills, as well as adoption of optimal practice guidelines will be discussed. The role of case manager in the context of the multi-disciplinary care team will be discussed. This course will also cover specific practical skill involved in management of cases with psychotic disorder, such as engagement and risk assessment. The specialized case management for early psychosis cases will be considered particularly in terms of the critical period and the phase-specific needs for early psychosis patients. Specific skills such as community work, clinical records and communications will also be covered.

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### **PM0011 Clinical decision making in psychotic disorders (20 hours)**

The course will introduce a framework for clinical decision making, with special reference to Early Psychosis Case Management. The principles and skills of making a case formulation will be highlighted by case examples and exercise. The methods involved in identifications and prioritization of clinical needs will be discussed. The analysis of a complex clinical problem by identification of core issues vs incidental issues will be illustrated by examples. Skills in the assessment and the formulation of the case will be followed by the construction of the careplan. Updating of careplan and specific action plans will also be discussed.

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### **PM0012 Psychosis and society: diagnosis, stigma, legal and ethical issues (20 hours)**

This course will start with a in-depth consideration of what constitute health and disease in mental health, and will clarify the distinction between psychotic symptoms and psychotic disorders. It will also consider the utility and costs of the current diagnostic systems. Two major diagnostic systems,

the ICD and the DSM systems will be reviewed. Wider implications of the diagnostic systems in mediating research, legal, insurance, and pharmaceutical developments will be considered. The nature and impact of stigma and self stigma will be explored, using examples from local data, the influence of culture and societal values are considered. The role and impact of the media will also be reviewed. Principles of ethics and the skills in practical application of ethical principles to specific clinical situations will be discussed. Particular issues such as confidentiality, compulsory treatment as well as mental capacity for decision making, will be considered. The course will also discuss use of mental health status as defense in criminal cases and the principles involved. The skills in using a structured instrument for capacity assessment will be included in the course.

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### **PM1001 DISSERTATION**

The dissertation represents 200 hours of work and students may undertake an empirical study. The dissertation involves formulation of the research idea, clarification of conceptual issues, literature review, formulation of final research question, design of study, feasibility assessment, pilot work, Institutional Review Board (IRB) application, setting up of collaboration (if applicable), data collection logistic, research project management, database design, research logbook management, data collection, progress review, monitoring for data quality, data cleansing, data analysis, interpretation of results, reporting, writing up of report. These are carried out under the guidance of a dissertation supervisor.