Thought Disorder

- Intracranial directed connectivity links subregions of the prefrontal cortex to major depression
- Multiregional representations of intertemporal decision making in human single neurons
- Adaptive trial for the treatment of depressive symptoms associated with concussion using accelerated intermittent theta burst stimulation (ADEPT): rationale, design and methods
- Molecular basis of the therapeutic effect of butyrate in glioblastoma revealed by in vitro and in silico approach
- Inflammatory, White Matter, and Neurodegenerative Mechanisms in Fluid Ability Decrements in Chronic Mild-to-Moderate Traumatic Brain Injury
- Neural and computational mechanisms of loss aversion in smartphone addiction
- The Role and Mechanisms of G protein-coupled receptors in Parkinson's disease
- Clinical Reasoning: A 64-Year-Old Man With Confusion, Nausea, Seizure, and Fever

Thought disorder is a clinical term referring to **disruptions in the organization, expression, or logic of thought**, typically revealed through a person's speech and writing. It is a hallmark symptom in various **psychiatric** and some **neurological conditions**.

Definition

> **Thought disorder** refers to a disturbance in the form (structure) or content of thinking, leading to impaired communication or abnormal beliefs. It is most often associated with schizophrenia-spectrum disorders but also occurs in mood disorders, neurodegenerative diseases, and structural brain lesions.

Types of Thought Disorder

1. Formal Thought Disorder (FTD)

Involves abnormalities in the *form* or *process* of thinking, typically assessed by observing speech patterns.

Symptom	Description
Derailment (loose associations)	Shifting from one idea to another with little logical connection.
Tangentiality	Answers diverge from the topic and never reach the point.
Incoherence (word salad)	Speech becomes incomprehensible due to disorganized grammar and logic.
Neologisms	Creation of new, idiosyncratic words.
Clang associations	Linking words by sound rather than meaning.
Perseveration	Repeating the same idea or phrase despite topic change.

2. Thought Content Abnormalities

Reflect distorted or false beliefs.

Type	Example
Delusions	Fixed false beliefs (e.g., persecutory, grandiose).
Paranoia	Belief that others intend harm.
Magical thinking	Belief that thoughts influence reality in supernatural ways.

Neurological and Neurocognitive Context

Though classically psychiatric, thought disorders can arise in neurological conditions such as:

- **Frontal lobe lesions** – executive dysfunction and disorganized thought.
- **Temporal lobe epilepsy** – may include paranoia or hyperreligiosity.
- **Cerebellar dysfunction** – part of the *Cerebellar Cognitive Affective Syndrome* (CCAS), also called **“dysmetria of thought”**.

Summary

> **Thought disorder** is a disruption in the normal pattern of thinking, often observed as disorganized, illogical, or incoherent speech. It reflects abnormalities in how ideas are generated, connected, and communicated, and may signal underlying psychiatric or neurological disease.