

# **Anxiety Disorders**

- **Anxiety is at the center of the disorder.**
- **Generally speaking, the more sudden the onset the quicker the offset and vice versa**
- **Nucleus--tends to avoid rather than cope**
- **Paradox--tends to maintain in spite of maladaptive nature**

# **Generalized Anxiety Disorder**

**A continuous state of anxiety marked by feelings of worry and dread, apprehension, difficulties in concentration, and signs of motor tension.**

- **Women make up 2/3 of those diagnosed with GAD**
- **GAD involves not being able to identify the cause of the anxiety**

- **DSM-IV Criteria are as Follows:**
  - **Includes chronic excessive worry about a number of events and activities (not identified)**
  - **Must occur more days than not for at least 6 months**
  - **Worry must be accompanied by at least 3 of the following**

- **Restlessness or feelings of being keyed up or on edge**
- **A sense of being easily fatigued**
- **Difficulty concentrating or mentally going blank**
- **Irritability**
- **Muscle tension**
- **Sleep disturbance**



- **Panic Attack**

- **Discrete period of intense fear or discomfort in which four or more develop abruptly and reach a peak within 10 minutes**

**Palpitation, pounding heart,  
accelerated heart rate**

**Sweating**

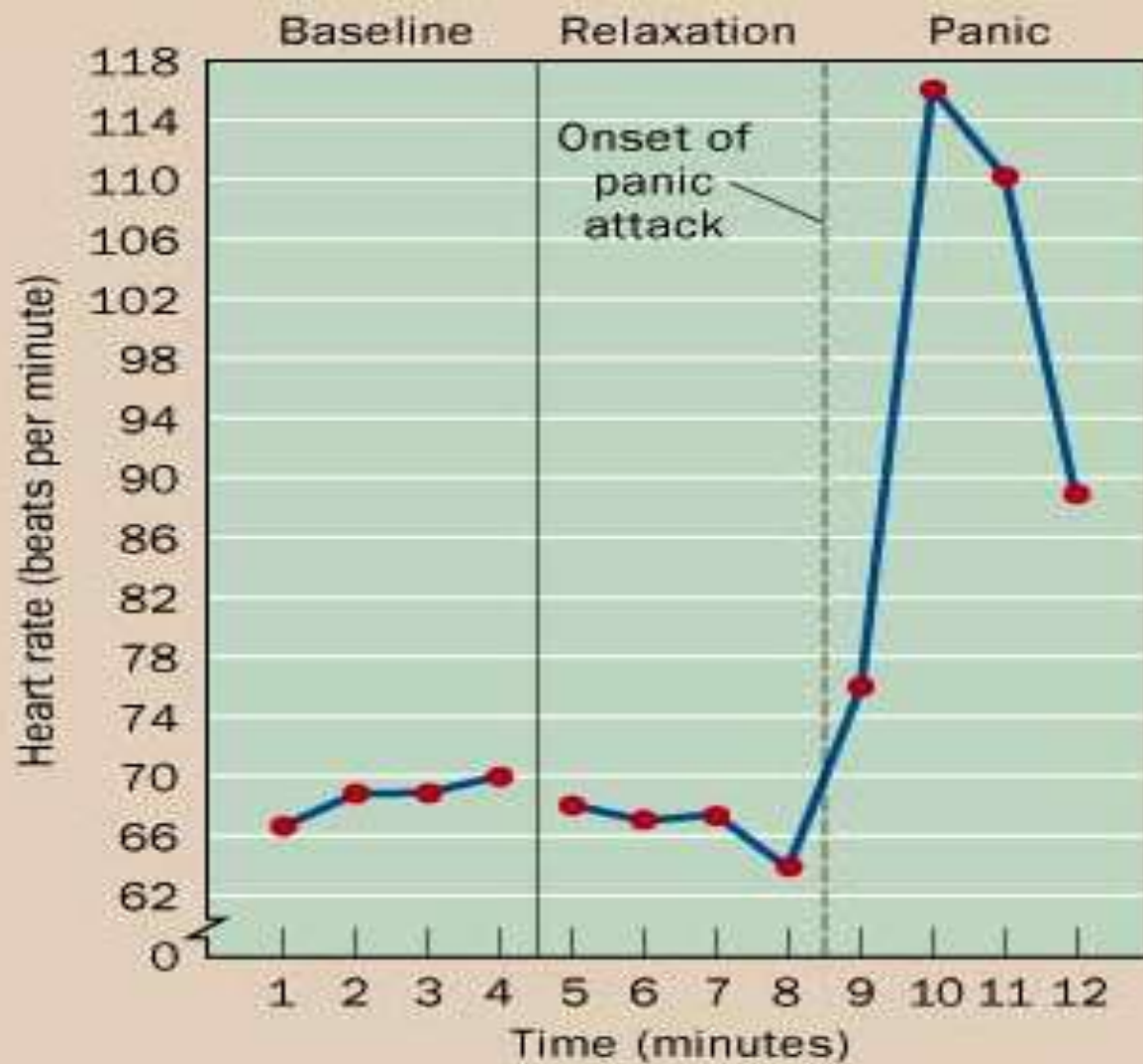
**Trembling or shaking**

**Sensations of shortness of breath  
or smothering**

**Feeling of choking**

**Chest pain or discomfort**

**Nausea or abdominal distress**



**Feeling dizzy, unsteady,  
lightheaded or faint**

**Derealization (feelings of  
unreality) or depersonalization  
(being detached from oneself)**

**Fear of losing control or going  
crazy**

**Fear of dying**

**Chills or hot flashes**

**Paresthesia (numbness or tingling  
sensations)**

## ■ **Panic Disorder**

**Recurrent, unexpected Panic Attacks followed by at least 1 month of persistent concern about having another**

- **Not associated with external trigger**
- **Not associated with drugs**
- **W/O Agoraphobia 2X women  
WITH 3X women**
- **About 2%**
- **About 1/2 or 1/3 will be diagnosed with agoraphobia**
- **Late adolescence and mid 30's**



# ■ **Phobias**

## ■ **Agoraphobia**

- **Fear of being alone/open spaces**
- **Fear of public places where escape might be difficult or help not available in case of sudden incapacitation**
  - **Waxes and wanes**
  - **Sometimes complete remission**
  - **20's-30's**
  - **Women**
  - **Increasing constriction of activities**
  - **Crowds/Tunnels**

- **Social Phobia**

- **Persistent irrational fear of and compelling desire to avoid situations in which the individual may be exposed to the scrutiny of others**

- **Fear of speaking or performing in public**
- **Using lavatories, eating in public**
- **Late childhood/early adolescence**
- **Women but Males seek therapy more often**
- **Chronic**
- **Rare**

- **Specific/Simple Phobia**
- **Something other than the above**
  - **Animal type--animals or insects (childhood)**
  - **Natural Environment type--storms, heights, water (childhood)**
  - **Blood-Injection-Injury**
  - **Situational--public transportation, tunnels, bridges, flying**

- **Animal and natural 75-90% women**
- **Blood-Injection-injury 55-70% are women**
- **Women**
- **Children**
- **Usually clears up w/o treatment**



## ■ **Treatments**

### ■ **Drugs**

#### ■ **Benzodiazepines**

■ **Alprazolam (Xanax), Clonazepam (Klonopin), Diazepam (Valium).**

■ **Not effective for phobias, OCD, or panic disorder.**

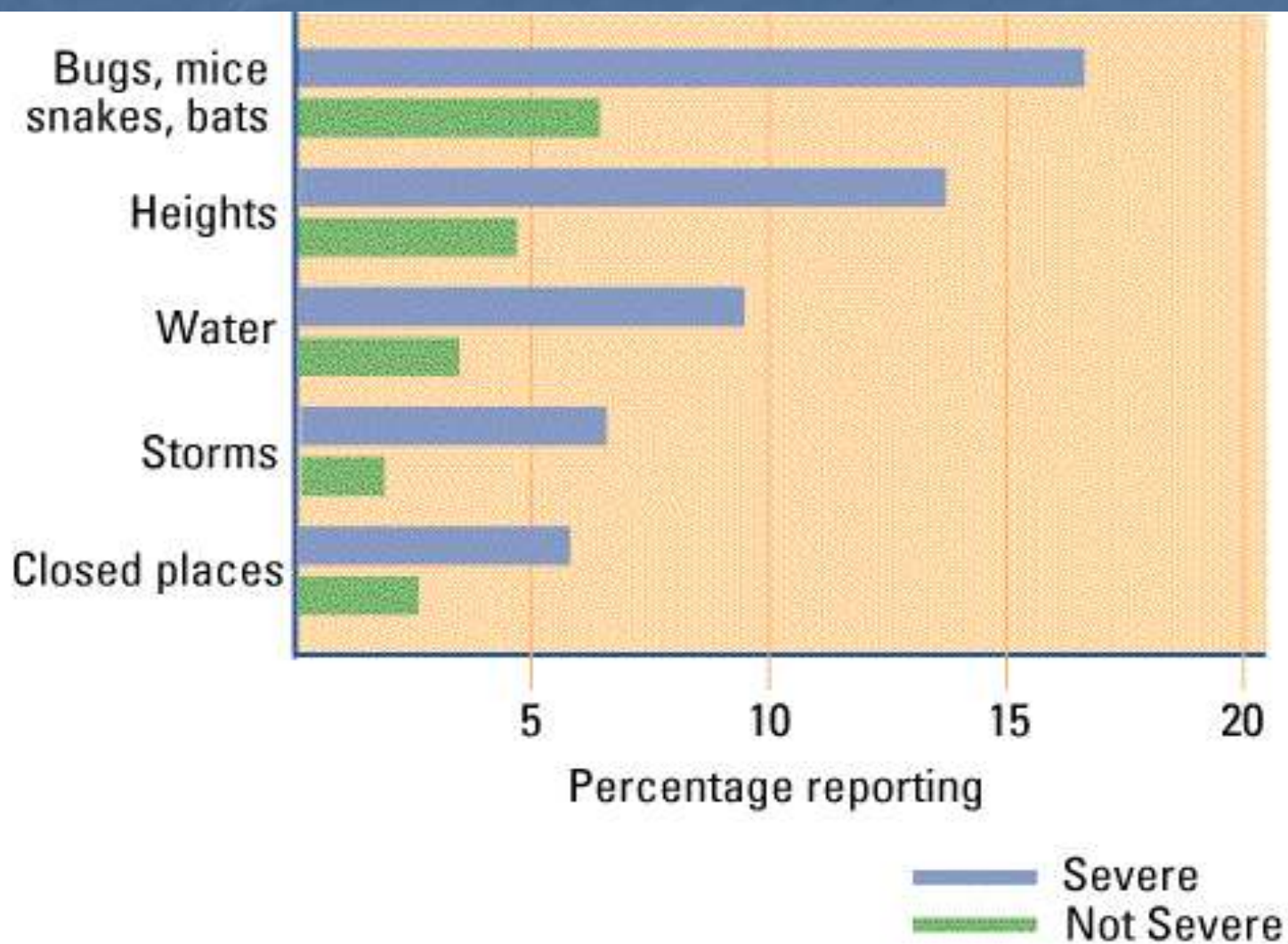
### ■ **Behavior therapies**

■ **Flooding (Implosive)**

■ **Systematic Desensitization**

■ **Exposure Therapies**

■ **Good chance of getting over phobia**



- **Posttraumatic Stress Disorder (PTSD)**
  - **Actual or threatened or serious injury**
  - **Recurrent and intrusive recollections**
  - **Persistent avoidance of stimuli associated with it**
  - **Sleep disorders/disturbances**
  - **Increased Irritability**
  - **Difficulty concentrating**
  - **Hypervigilance**
  - **Excessive startle response**



- **Situational Stress Disorders**
  - **Combat Exhaustion (Battle Fatigue)**
  - **Sleep disturbances**
  - **Hypersensitivity to external stimuli**
  - **Increased irritability**
  - **Rage/violent impulses**
  - **Treat immediately/close proximity**
  - **Clear date of discharge reduces the chance of getting this**



- **Civilian Disasters**
  - **Shock—Aimless**
  - **Suggestibility--follow suggestions.  
Wants to help but is ineffective**
  - **Recovery—Repetitive tell/Nightmares**
  - **Similar to above symptoms/no  
violence**

- **Obsessive-Compulsive Disorder**
  - **Thoughts/Behaviors**
  - **Childhood/adolescence**
  - **Chronic**
  - **Equal F/M**
  - **2.5% GP**
  - **Not just simple impulses or thoughts**
  - **Cannot make quick/snap decisions**
  - **Therapy-block rituals by rewarding departures from such behavior**

- **An anxiety disorder in which a person feels trapped in repetitive, persistent thoughts (obsessions) and repetitive, ritualized behaviors (compulsions) designed to reduce anxiety.**
- **The person must recognize that the obsession is a product of their own mind rather than from external sources**
- **The involuntary behavior must cause marked distress, consume excessive time, or interfere with occupational or social functioning**

- **Dissociative Disorders--escape from self**

- **Dissociative (Psychogenic) Amnesia**

- **Circumscribed/localized--usually first few hours following trauma**
- **Selective**
- **Total/generalized**
- **Continuous**
  
- **Women**
- **Adolescence/rare in elderly**
- **Military**
- **Fairly Rare**



- **Dissociative (Psychogenic) Fugue**
  - **Physical flight**
  - **Assumption of new identity**
  - **No age/gender**

- **Dissociative Identity/Personality Disorder (Multiple Personality)**
  - **Existence within individual of two or more distinct personalities each of which is dominant at particular times**
  - **Dominant personality at that time determines behavior**
  - **Each personality is complex with own unique behavior patterns and social relationships**

- **Probably the rarest of all disorders**
- **This disorder is almost nonexistent outside of the U.S.**
- **Considered by Britain as a “Wacky American Fad.”**
- **Chris Sizemore – first documented case**
- **Highly intelligent**
- **Child abuse/severe emotional trauma**
- **Females have an average of 15 or more**
- **Males average about 8**

## ■ **Psychosomatic**

- **Chronic stress lower our resistance which facilitates predisposed physical condition**
- **Someone who has recently suffered severe emotional stress is now at greater risk for psychological disorders, and physical illness**
- **Peptic ulcers, pimples, cold sores, migraine headaches (dilation of cranial arteries)**



- **Selye**

- **Alarm**

- **Resistance - psychosomatic**

- **Exhaustion – can die**

## ■ **Somatoform**

- **These are not Anxiety disorders**
- **Suggest physical problem/no organic base**

- **Somatization**

- **Hypochondria--kind of equal to somatization**

- **Recurrent and multiple somatic complaints of several years duration**
    - **Early life--not diagnosed until later**
    - **Disappointing life situation (40's or 50's) or Teens menstrual**
    - **Chronic**
    - **Find doctors that will “understand”**
    - **Women about 1%**

## ■ **Conversion**

- **Loss or alteration in physical functioning suggesting a physical disorder**
- **Not under voluntary control**
- **Rare today/more common in times of war increase or with societies which reinforce that behavior**
- **Clients really believe**
- **Found in cultures that reinforce “sick roles”**
- **Self-reinforcing and self-perpetuating**



- **Defense against threatening situation**
- **Adolescence/early adult**

- **Psychogenic Pain**

- **Any Age**

- **Women**

- **Rare**

# Personality Disorders

- Coded on Axis II of the DSM-IV
- Defined as:
  - 1) Long-standing
  - 2) Pervasive
  - 3) Inflexible patterns of behavior and inner experiences that deviate from the expectations of a person's culture and that impair their social and occupational functioning.

- **A personality disorder is defined by the extremes of several traits and by the rather inflexible and maladaptive way these traits are expressed.**
- **The personality each of us develops over the years reflects a persistent means of dealing with life's challenges, a certain style of relating to other people (overly dependent, shy, aggressive, appearance).**



- **Antisocial**
  - **Male**
  - **3% males 1% females**
  - **Can remit by age 40**
  - **Psychopath/sociopath**
  - **Lower socioeconomic classes**
  - **Cannot be diagnosed prior to age 18**

- **Failure to conform to social norms with respect to lawfulness**
- **Deceitfulness**
- **Impulsivity or failure to plan ahead**
- **Many fights and aggressive responses**
- **Reckless disregard for safety of self or others**
- **Consistent irresponsibility**
- **No loyalties, even to family**

- **Higher IQ**
- **Low tolerance to frustration**
- **Inability to learn from punishing experiences**
- **No conscience/guilt--feel bad only when caught**
- **History of crime**
- **Treatment rarely successful (2%)**

- **Insanity/Sanity**
  - **M'Naghten Rule or test**
    - **Right/Wrong test**
  - **Irresistible impulse**
  - **2% successful**
  - **Neighbors consider normal-usually "active" in many social behaviors**
- **Competent/Incompetent**



- **Death Penalty**

- **Does it deter crime?**

- **Even if carried out consistently?**

- **Save \$\$?**

- **How much to put to death and why.**

- **Cost \$0.01**

- **Causes of Antisocial Personality Disorder**
  - **Extra Y Chromosome?**
  - **Abnormal EEG?**
  - **Particular body type?**
  - **None of these-can appear normal to most people.**

## ■ **Paranoid**

- **Men**
- **Prevalence .5-2.5% in general population**
- **Usually beginning by early adulthood/appears childhood/adolescence**
- **Cannot trust/confide in others**
- **"Reads" intentions into other's behaviors and actions**
- **Unforgiving/holds grudges**
- **Pervasive and unwarranted suspiciousness and mistrust**
- **Hypersensitivity--cannot relax**
- **Restricted affect (cold)**

## ■ **Schizoid**

- **Men/and usually causes more impairment in men**
- **Relatively uncommon**
- **Childhood/early adolescence**
- **Deficit in capacity to form social relationships, no warm, tender feelings – few if any friends**
- **Neither desires nor enjoys close relationships**
- **Solitary activities**
- **Little interest in sexual experiences with others**
- **Indifference to praise/criticism**
- **Maybe only two close friends excluding family**
- **"Not worth the effort to change."**



## ■ **Histrionic**

- **Women 2% GP**
- **"High"**
- **Flightiness**
- **Interactions with others characterized by inappropriate sexually seductive or provocative behavior**
- **Rapid shifting and shallow moods**
- **Shows self-dramatization, theatricality, and exaggerated mood**
- **Highly suggestible**
- **Center of attention**
- **Concerned with physical attractiveness**

## ■ **Narcissistic**

- **Male (50%--75%)**
- **Less than 1% GP**
- **Adolescents**
- **Grandiose sense of self-importance**
- **Preoccupied with fantasies of unlimited success, power, etc.**
- **Believe he/she to be special**
- **Arrogant**
- **Lack of ability to empathize with others**
- **Interpersonally exploitive**
- **Preoccupied with feelings of envy**

## ■ **Borderline**

- **Female (75%)**
- **2% of population**
- **Adolescence/young adult**
- **Unstable and intense interpersonal relationships**
- **Impulsivity in at least two areas that are potentially self-damaging**
- **Recurrent suicidal gestures**
- **Affective instability**
- **Inappropriate and intense anger**
- **Chronic feeling of boredom**

# ■ **Compulsive Personality**

- **Rule**
- **Order**
- **Duties magnified**
- **Rigid personality**
- **Rarely expresses positive feelings**
- **Females**