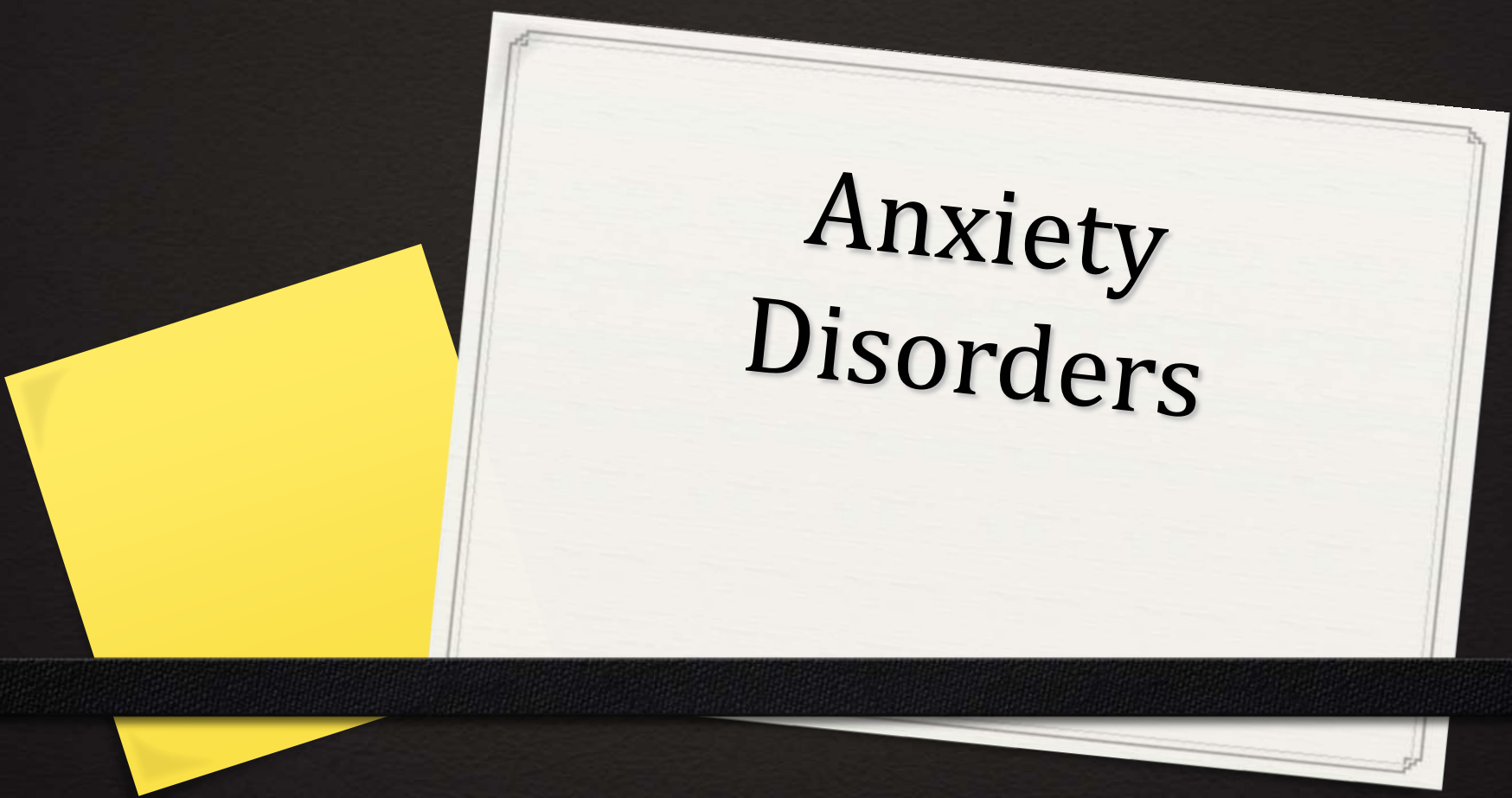


# Psychological Disorders



# Anxiety Disorders

# Anxiety Disorders

*o Excessive fear and anxiety and related behavioral disturbances.*

*o Types*

- Panic Disorder
- Agoraphobia
- Specific Phobia
- Social Anxiety Disorder
- Selective Mutism
- Generalized Anxiety



# Panic Disorder

## ○ Recurrent panic attacks

- abrupt surges of intense fear or discomfort
- physical and/or cognitive symptoms.



# Agoraphobia

○ Fear of public places

- public transportation
- open spaces
- enclosed places
- crowds
- being outside of the home alone

# Specific Phobia

o Fearful, anxious, or avoidant of specific objects or situations

## THE NATION'S TOP TEN PHOBIAS

- 1 Arachnophobia – spiders
- 2 Social phobia – social or public situations
- 3 Aerophobia – flying
- 4 Agoraphobia – open or public spaces
- 5 Claustrophobia – enclosed spaces
- 6 Emetophobia – vomiting
- 7 Acrophobia (vertigo) – heights
- 8 Cancerphobia – developing cancer
- 9 Brontophobia – thunderstorms
- 10 Necrophobia – death (your own and others')





# Social Anxiety Disorder

- o Fearful, anxious or avoidant of
- social interactions
  - situations that involve possibility of being scrutinized.

o Consistent failure to speak in social situations where there is an expectation to speak even though the individual speaks in other situations.

## Selective Mutism







# Generalized Anxiety Disorder

- Excessive anxiety & worry about events or activities
- Occurs more days than not for at least six months.
- Free floating



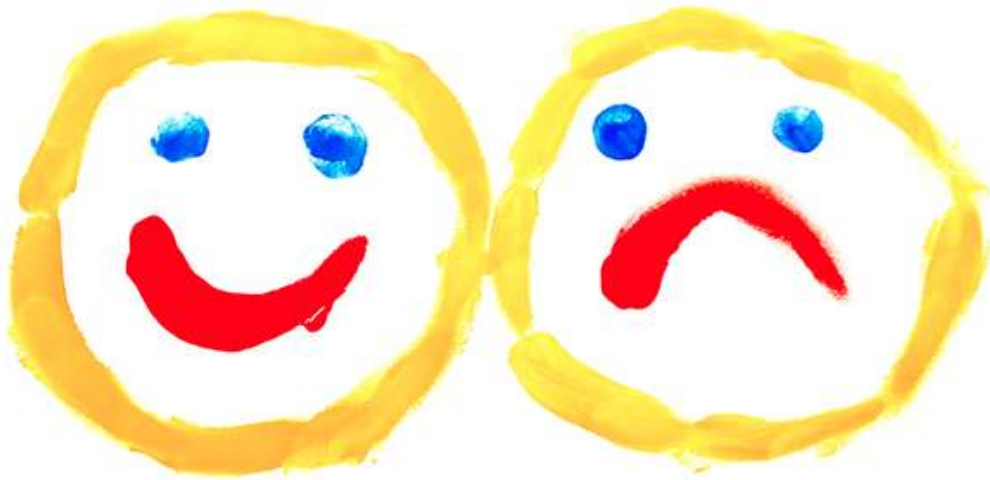
# Bipolar & Related Disorders

# Bipolar & Related Disorders

*o Experiencing times of depression and manic episodes.*

*o Types*

- Bipolar I
- Bipolar II



# Bipolar I

- Depressive moods
  - last at least two weeks
- Manic moods
  - lasts at least one week.



# Bipolar II

- o Same depression as Bipolar I
- o Hypomania (light mania) lasts 4 or more days **WITHOUT**
  - life threatening consequences or psychotic episodes.



# Depressive Disorders

# Depressive Disorders

*o Depressed moods resulting in disruption in functioning of the affected individual.*

*o Types*

- Persistent Depressive Disorder
- Major Depressive Disorder
- Premenstrual Dysmorphic Disorder
- Disruptive Move Dysregulation Disorder



# Persistent Depressive Disorder (Dysthymia)

- Depressed mood for most of the day
- Lasts at least two years.



# Major Depressive Disorder

- o Depressed mood most of the day
- o Diminished interest in almost all activities.



# Premenstrual Dysmorphic Disorder

- Marked mood changes
- Irritability
- Dysphoria
  - opposite of euphoria
- Anxiety beginning week before menses.





# Disruptive Mood Dysregulation Disorder

○ Chronic, severe persistent irritability w/frequent temper outbursts.



# Dissociative Disorders

# Dissociative Disorders

*o* **Disruption of normal integration of consciousness, memory, identity, emotion, perception, motor control, body representation & behavior.**

*o* **Types**

- Dissociative Identity Disorder
- Depersonalization/Derealization Disorder
- Dissociative Amnesia (& Fugue)

# Dissociative Identity Disorder

o Presence of  
two or more  
distinct  
personality  
states



Sijsa Eystberg Wendelboe



# Depersonalization/ Derealization Disorder

○ Persistent experiences of:

- Unreality
- Detachment from one's mind, self or body
- Detachment from one's surroundings

# Dissociative Amnesia

○ Inability to recall autobiographical information

- an event or period of time,
- specific aspect of an event or
- identity
- life history
- purposeful travel or bewildered wandering (fugue)





# Feeding & Eating Disorders

# Feeding & Eating Disorders

*o Persistent disturbance of eating related behaviors that results in altered consumption or absorption of food & significantly impairs physical health or psychosocial functioning.*

*o Types*

*o Anorexia Nervosa*

*o Bulimia Nervosa*

*o Binge Eating Disorder*



# Anorexia Nervosa

- Persistent energy intake restriction
- Intense fear of gaining weight or of becoming fat
- Disturbance in self-perceived weight or shape




# Bulimia Nervosa

- o Recurrent episodes of binge eating
- o Recurrent inappropriate compensatory behaviors to prevent weight gain
  - Purging, use of laxatives
- o Self-evaluation that is unduly influenced by body shape and weight

# Binge Eating Disorder



- Recurrent episodes of binge eating a larger amount than most people would eat
- Must occur at least one per week for three months



Neuro-  
developmental  
Disorders

# Neurodevelopmental Disorders

*o Typically begin early in development; characterized by developmental deficits that produce impairments of personal, social, academic, or occupational functioning.*

## **o Types**

*o Autism Spectrum Disorder*

*o Attention Deficit Hyperactivity*

*o Tourette's*

*o Intellectual Disability (formerly mental retardation)*

# Autism Spectrum Disorder

o Persistent deficits in social communication & social interaction

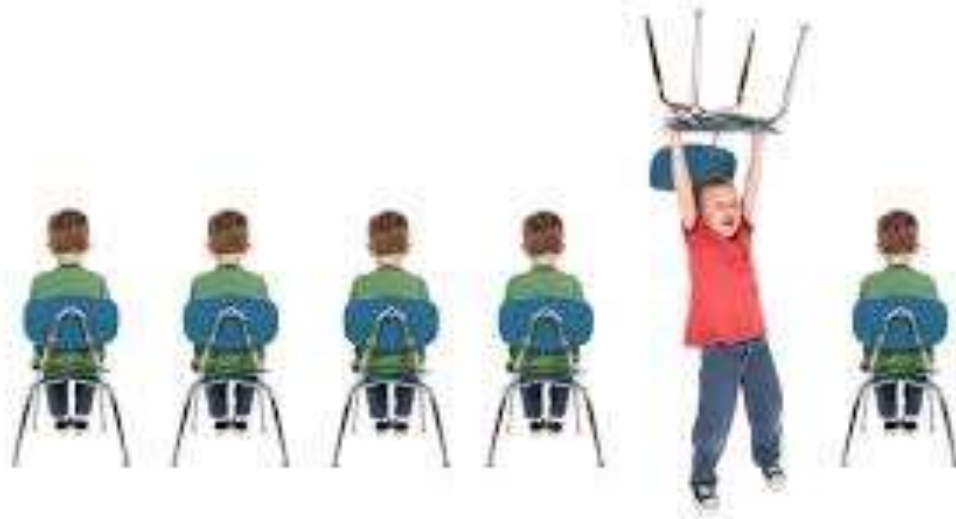




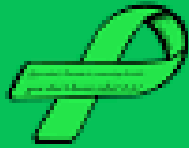
o Impairing levels of:

- inattention
- disorganization
- hyperactivity-impulsivity

Attention  
Deficit  
Hyperactivity  
(ADHD)



# Tourette's



KEEP  
CALM  
IT'S  
JUST  
TOURETTES

o Multiple  
motor and  
one or more  
vocal tics.

# Intellectual Disability

o Deficits in general mental abilities:

o reasoning

o problem solving

o planning

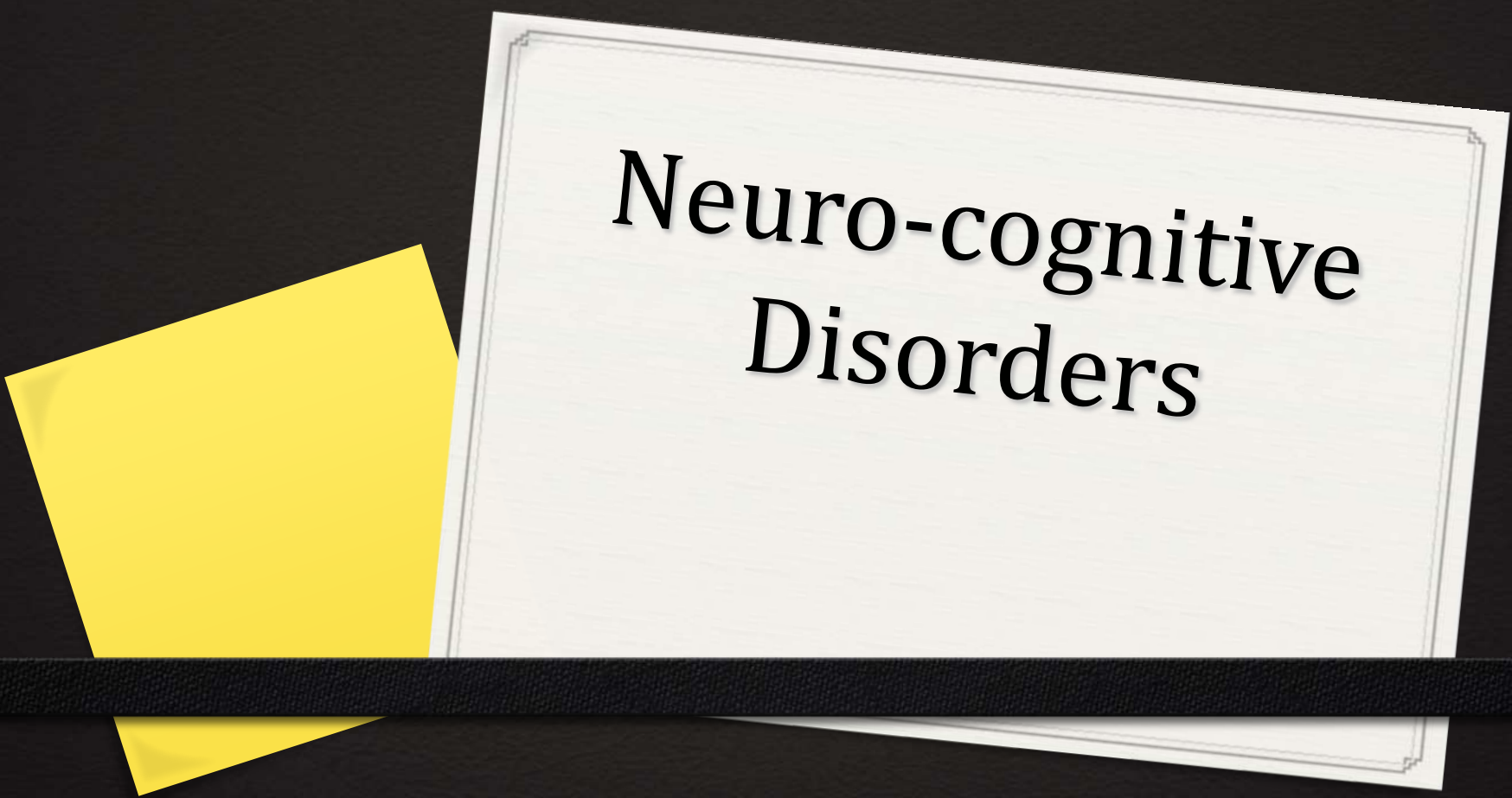
o abstract thinking

o judgment

o academic learning

o learning from experience.





# Neuro-cognitive Disorders

# Neurocognitive Disorder

*o Symptoms related to complex attention, executive function, learning, memory, language, perceptual-motor, and social cognition.*

*o Types:*

*o Major Neurocognitive Disorder (previously dementia)*

*o Alzheimer's Disease*

# Major Neurocognitive Disorder



o Significant cognitive decline from a previous level of performance in:

- complex attention
- executive function
- learning and memory
- language,
- perceptual-motor



# Alzheimer's Disease

- Gradual progression of cognitive & behavioral symptoms
  - decline in memory and learning



Obsessive  
Compulsive  
Disorder &  
Related



# Obsessive Compulsive Disorder & Related

*o Acts individuals feels compelled to perform in response to obsessions or according to rules that must be followed rigidly.*

*o Types*

*o Obsessive Compulsive Disorder*

*o Hoarding*

*o Body Dysmorphic Disorder*

*o Trichotillomania*



# Obsessive Compulsive Disorder

- Recurrent and persistent thoughts that are intrusive (obsessions)
- Repetitive behaviors or mental acts the individual feels driven to perform (compulsions)

○ Persistent difficulties discarding or parting with possessions regardless of actual value.

# Hoarding



# Body Dysmorphic Disorder

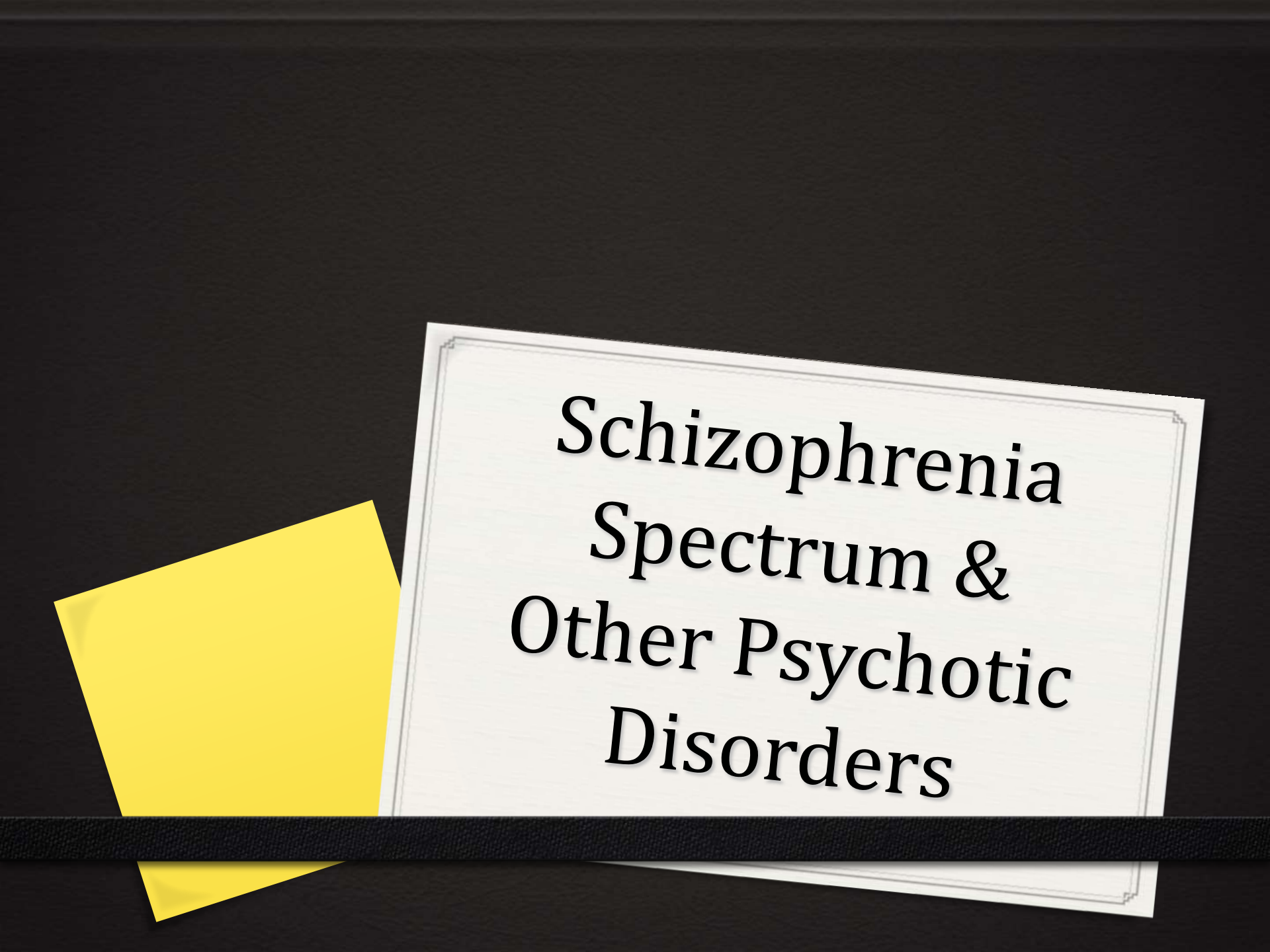
○ Preoccupation with one or more perceived defects or flaws in physical appearance that are not observable to others.



# Trichotillomania

o Recurrent pulling out of one's own hair.





Schizophrenia  
Spectrum &  
Other Psychotic  
Disorders

# Schizophrenia Spectrum & Other Psychotic Disorders

*o Presence of delusions, hallucinations, disorganized thinking/speech, disorganized or abnormal motor behavior, and negative symptoms.*

*o Types*

- Delusional disorder
- Schizophrenia

# Delusional Disorder




- At least one month of delusions but no other psychotic symptoms.





# Schizo- phrenia

- 6 months or more
- 1 month of active phase symptoms
- Excess dopamine theory



# Somatic Disorders

# Somatic Disorders

*o Distressing somatic symptoms plus abnormal thoughts, feeling and behaviors in response to these symptoms.*

*o Types*

*o Conversion Disorder*

*o Illness Anxiety Disorder*

*o Formerly Hypochondriasis*

# Conversion Disorder

o Altered voluntary motor or sensory function that can't be explained through neurological or medical conditions.



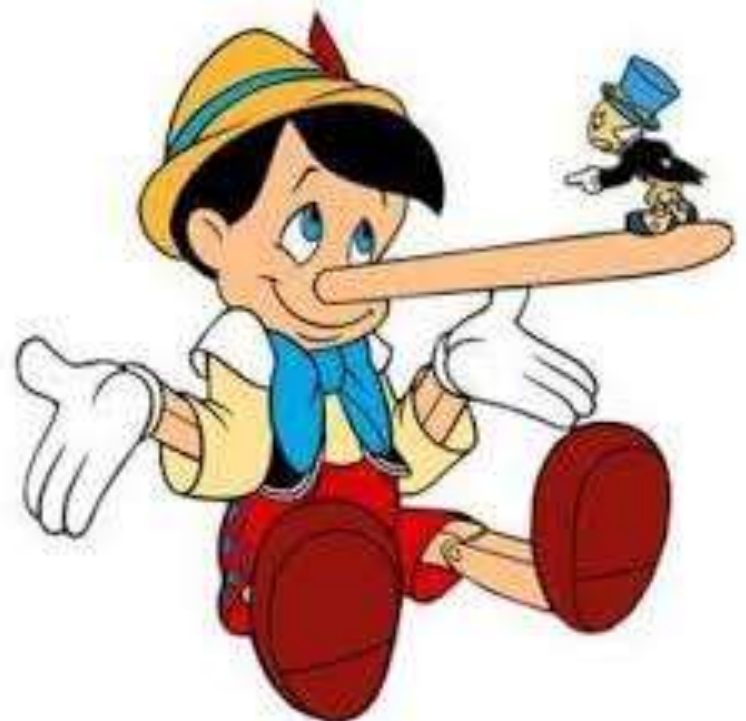



# Illness Anxiety Disorder (formerly hypochondriasis)

o Preoccupation with having or acquiring a serious illness; somatic symptoms are not present or are mild but there is a high anxiety about health concerns.

# Factitious Disorder (formerly Munchausen's)

- Falsification of symptoms
- Causing an injury or disease





Trauma &  
Stressor Related  
Disorders

# Trauma & Stressor Related Disorders

*o Exposure to a traumatic or stressful event is a specific diagnostic criterion.*

*o Types*

*o PTSD*

*o Adjustment Disorder*



POST-  
TRAUMATIC  
STRESS  
DISORDER

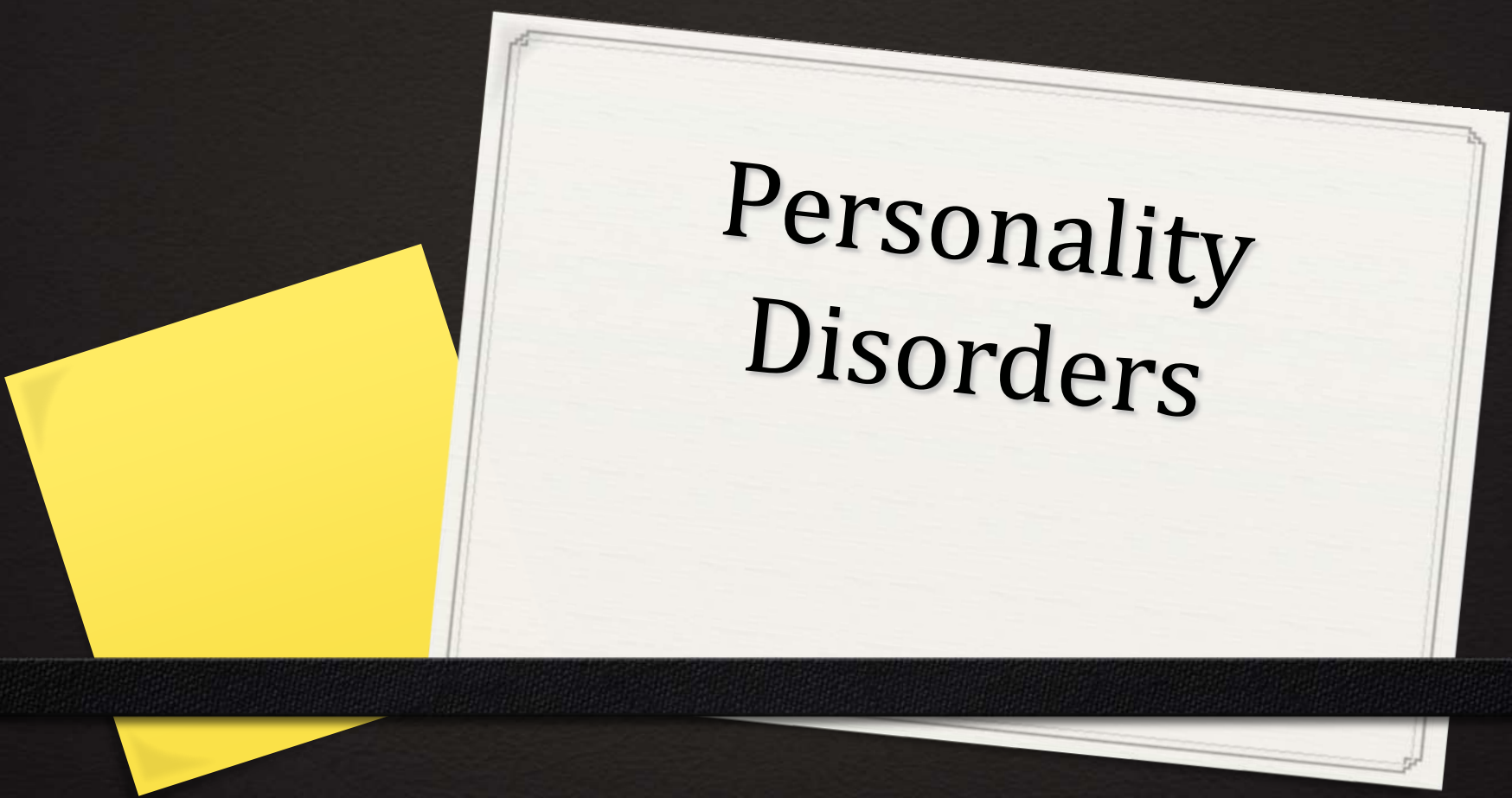


- Symptoms following traumatic event
  - flashbacks
  - distressing dreams
  - memories of event
  - avoidance of distressing thoughts, memories and external reminders



# Adjustment Disorder

- o Responding to an event or situation
  - o a loss, a problem in a close relationship, an unwanted move, a disappointment, or a failure
- o Symptoms:
  - o low mood, sadness, worry, anxiety, insomnia, poor concentration, loss of self esteem, hopelessness, feeling trapped, having no good options, and feeling isolated or cut off from others.



# Personality Disorders

# Personality Disorders

*o Enduring pattern of inner experience and behavior that deviates markedly from expectations of individual's culture.*

*o Types*

Cluster A

*o Paranoid*

*o Schizoid*

*o Schizotypal*

Cluster B

- Borderline

- Histrionic

- Narcissistic

- Antisocial

Cluster C

- Avoidant

- Dependent

- Obsessive-

Compulsive



# Paranoid

- Cluster A
- Pattern of distrust and suspiciousness that others' motives are interpreted as malevolent.

# Schizoid



o Cluster A

o Pattern of detachment from social relationships and a restricted range of emotional expression.

# Schizotypal

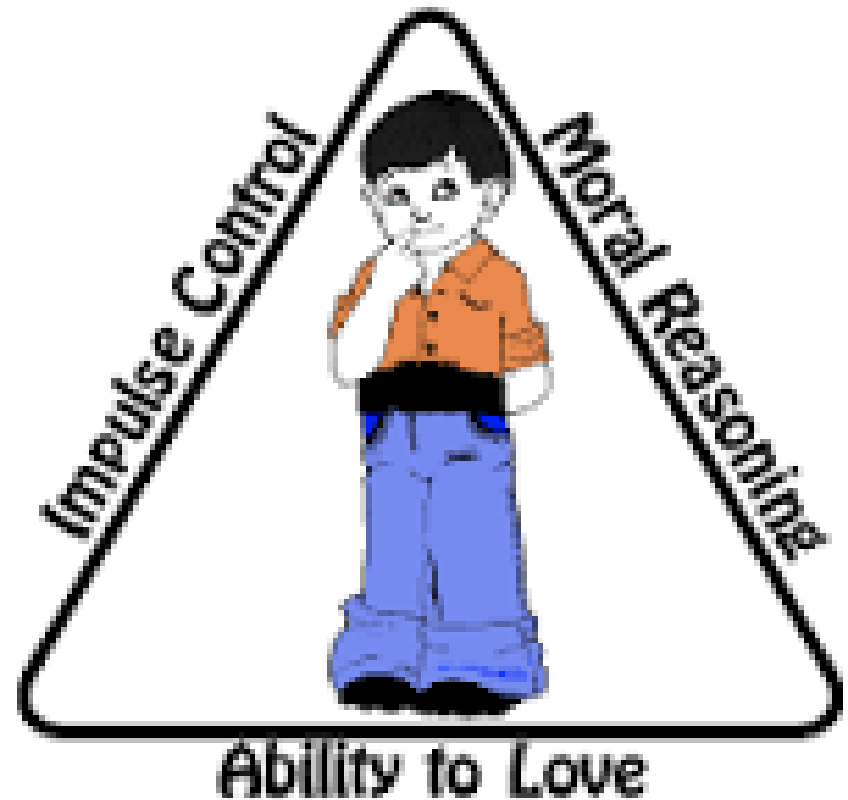
○ Cluster A

○ Pattern of acute discomfort in close relationships, cognitive or perceptual distortions, and eccentricities of behavior.



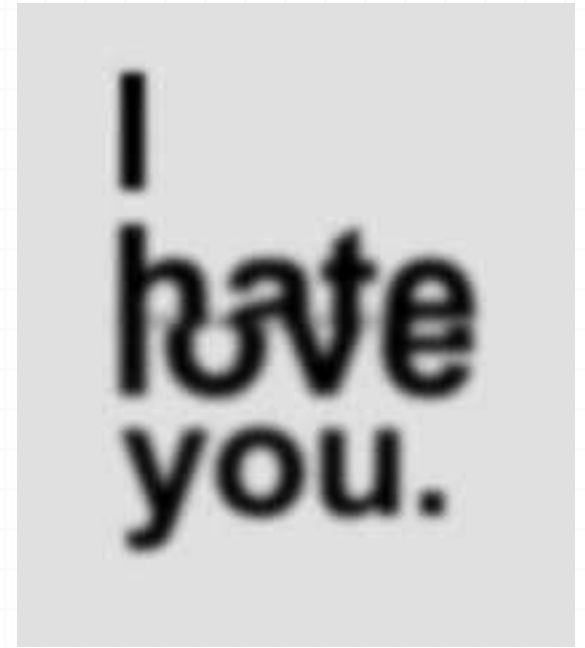
# Antisocial

- o Cluster B
- o Pattern of disregard for, and violation of, the rights of others.





# Borderline



o Cluster B

o Pattern of instability in interpersonal relationships, self-image, and affects, and marked impulsivity.

# Histrionic

- o Cluster B
- o Pattern of excessive emotionality and attention seeking.



# Narcissistic

- Cluster B
- Pattern of grandiosity, need for admiration, and lack of empathy.



I ♥ MY  
SELF +  
THATS  
ALL THAT  
MATTERS

# Avoidant



o Cluster C

o Pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation.

# Dependent

o Cluster C


o Pattern of submissive and clinging behavior related to an excessive need to be taken care of.



# Obsessive- Compulsive

- o Cluster C
- o Pattern of preoccupation with orderliness, perfectionism, and control





Disruptive,  
Impulse Control  
& Conduct  
Disorders

# Disruptive, Impulse Control & Conduct Disorders

*oProblems with self-control of emotions and behaviors.*

*oTypes*

*oOppositional Defiant Disorder*

*oIntermittent Explosive Disorder*

*o Pyromania*

*oKleptomania*

*oConduct Disorder*



# Oppositional Defiant Disorder



- o Pattern lasting 6 or more months:
- o Angry/irritable mood
- o Argumentative/defiant behavior
- o Vindictiveness.

# Intermittent Explosive Disorder



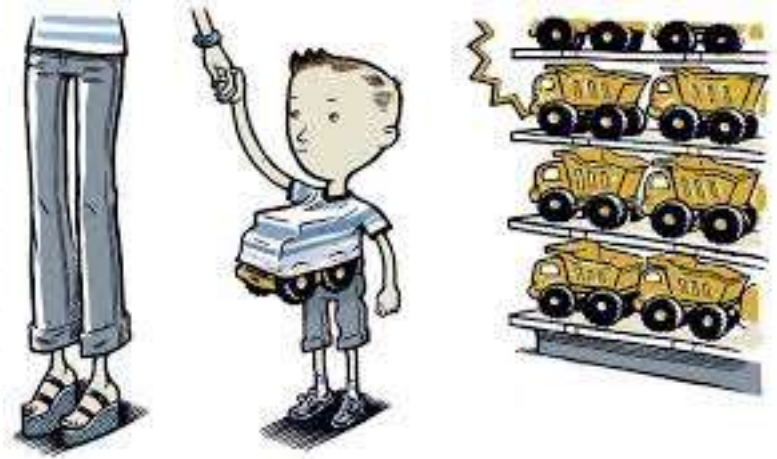
- o Behavioral outbursts representing a failure to control aggressive impulses
- o manifested through verbal or physical aggression.

# Pyromania

o Deliberate  
and  
purposeful fire  
setting on more  
than one occasion.



# Kleptomania



o Failure to resist impulses to steal objects that are not needed for personal use or for their monetary value.

# Conduct Disorder

o Repetitive and persistent pattern of behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated.

Four main groupings:

- 1) Aggression to people and animals
- 2) Destruction of property
- 3) Deceitfulness or theft
- 4) Serious violation of rules.

o Can be childhood onset or adolescent onset.

Comorbid with ADHD and Oppositional Defiant Disorder. Once person is age 18, diagnosis may be given of Antisocial Personality Disorder.