

Final 5

# psychology sheet

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# Anxiety Disorders

\*\* **Anxiety** : uncertainty and fear تتصف ب

- Individuals face anxiety on a daily basis.

It is a necessary force for survival & provides motivation for achievement.

-Anxiety is used interchangeably with stress, however, they are not the same.

-Stress (stressor) is an external pressure that is brought to bear on the individual.

-Anxiety is the subjective emotional response to that stressor

**Anxiety**: a vague diffuse apprehension that is associated with feelings of uncertainty and helplessness.

**Stress**: a state of disequilibrium that occurs when there is a disharmony between demands occurring within an individual's internal or external environment and his/her ability to cope with those demands.

**Fear**: the intellectual appraisal of a threatening stimuli. It's a cognitive process.

**Anxiety** is the emotional response to that appraisal.

# مقارنات مهممة ذكرها الدكتور برضه وقت الميد :

<b>Fear</b>	<b>Stress</b>	<b>Anxiety</b>
Individual process	External stresser	Emotional symptoms
Ex )Thinking what might happen in the exam (easy /hard ????)...	ex) Exam Disharmony between demand & disability (hard exam= high stress)	Ex) Physiological reaction (tachycardia)

# متى تحدث أعراض ال anxiety :

When there is disharmony (imbalance ) between demands & ability :

- If demand is higher than ability , then the **anxiety is high**
- If ability is higher , then we will be manageable
- **Anxiety** disorders are the **most common of all psychiatric illnesses** and result in a considerable functional impairment and distress.
- More common in **women** (girls) than in men (boys) by **2:1**.
- More common in **low socioeconomic** and minority.
- Familial predisposition to anxiety disorders.
- Anxiety is usually considered a **normal reaction to a realistic danger** or threat to biological integrity or self-concept.
- Anxiety dissipates (vanishes) when danger or threat is no longer present.
- **Anxiety is considered abnormal if:**
  - It is out of proportion to the situation that is creating it.
  - It interferes with social, occupational, or other important areas of functioning.

## **1. Panic disorder** (هلع) أعلى درجات ال anxiety

- **Most common symptoms of panic attack** : tachycardia ( increase in heart rate) , hyperventilation , sweating , chest pain & nausea .  
و الهلع عبارة عن حدوث متكرر لهذه الأعراض و القلق باستمرار , و ما بقدر المريض يتحكم فيه  
(**Cannot controlled**) . & **fear of another attack occurring** .

This disorder is characterized by **recurrent panic attacks**, with **unpredictable onset**, and manifested by intense apprehension, fear, or terror, often associated with feelings of impending doom and accompanied by intense physical discomfort.

**At least four** of the following 13 symptoms must be present to identify the presence of panic disorder. If fewer than four symptoms are present, the individual is diagnosed as having a **limited-symptom attack**.

### **Symptoms:**

- Palpitation, pounding heart, or accelerated heart rate.
- Sweating
- Trembling or shaking
- Sensation of shortness of breath or smothering (suffocating)
- 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 self)
- Fear of losing control or going crazy
- Fear of dying
- Paresthesia (numbness or tingling sensations)
- Chills or hot flashes
- The attacks usually last minutes or, more rarely, hours. Sx. of depression are common.
- Panic disorder may/may not be accompanied by agoraphobia.

### **Panic Disorder with Agoraphobia:**

in addition to the above Sx. of panic disorder, individual experiences a fear of being in places or situations from which escape might be difficult or embarrassing, or in which help might not be available in case panic attack occurs.

This fear restricts travel, individual becomes housebound or unable to leave house alone.

Situations include being outside home alone, being in crowd, being on bridge, traveling in bus, train, or car.

- **Agoraphobia** : (رهاب الخلاء) الخوف من الأماكن العامة و المفتوحة

## **2. Generalized anxiety disorder (GAD)**

- Worry & tense .

- يشعر المرضى بالقلق والانشغال اتجاه مجموعة متنوعة من القضايا والأنشطة والظروف و الأفكار، وليس اتجاه نوع واحد فقط

Characterized by chronic, unrealistic, and excessive anxiety and worry. Sx. should exist for 6 months or longer, with no organic cause (caffeine intoxication, hyperthyroidism).

GAD symptoms (7 symptoms) must be at least 6 months and cause clinically significant distress or impairment in functions:

- Excessive anxiety & worry, restlessness or feeling on edge, being easily fatigued, difficulty concentrating, irritability, muscle tension, & sleep disturbance
- Onset is more common after 20.
- GAD tends to be chronic.
- Depression symptoms and somatic complaints may combine this disorder.

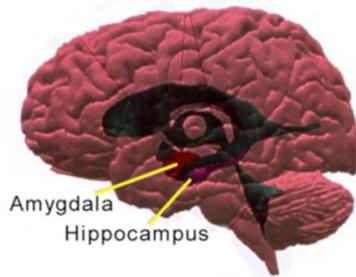
**There are many etiological implications for panic disorder and GAD:**

**Psychodynamic theory**: inability of the ego to intervene with conflicts between id and superego, producing anxiety.

**Cognitive theory**: faulty & counterproductive thinking patterns precede maladaptive behaviors and emotional disorders leading to disturbance in feeling and behavior.

**Biological** aspects: genetics

**Neuroanatomical**: pathological involvement in the temporal lobes, particularly hippocampus.



**Biochemical**: abnormal elevation of blood lactate.

**Neurochemical**: involvement of the neurotransmitter norepinephrine.

**Medical conditions**: abnormality in hypothalamic-pituitary-adrenal & hypothalamic-pituitary-thyroid axes; acute MI, pheochromocytomas, substance intoxication, hypoglycemia, caffeine intoxication, mitral valve prolapse, complex partial seizure.

• مقارنة بينهم :

<b>Panic disorder</b>	<b>Generalized anxiety disorder (GAD)</b>
<b>when severe : acute</b>	<b>Chronic</b>
<b>sudden</b>	<b>gradual</b>
<b>Hours to days</b> لمدة	<b>For 6 months</b>
<b>Tachycardia , hyperventilation , sweating , chest pain</b>	<b>Excessive anxiety &amp; worry, restlessness or feeling on edge</b>

### **3. Phobias (irrational fear)**

- **Social phobia** → **afraid of public**
- **Specific phobia** → عكس معناها , يكون المريض بخاف من شيء معين خوف مفرط وغير معقول ومستمر ناتج عن موقف معين مثلا من اللون الأحمر و كل شيء متعلق فيه مثل الدم
- **Acrophobia** → الخوف من المرتفعات
- **Oedipus complex : in psychoanalytic theory, a desire for sexual involvement with the parent of the opposite sex.** مثل لما يكون الولد بحب والدته او البنت تحب والدها , وهاي الأعراض تكون طبيعية عند الأطفال يلي تحت خمس سنوات اما اذا أكبر من خمس سنوات ف يكون **Oedipus complex**

\*\* Exposure to the phobia situation usually produce feeling of ( anxiety, sweating, tachycardia and dyspnea)

#### **1. Agoraphobia with panic disorder**

\* Characterized by symptoms of panic disorder and the individual experiences a fear of being in places or situations from which escape might be difficult or in which help might not be available in the event that a panic attack should occur. Example: being outside the home alone.

#### **2. Agoraphobia without history of panic disorder**

Less common than no 1.

**3. Social phobia:** excessive fear of situations in which a person might do something embarrassing or be evaluated negatively by others.

**4. Specific phobia:** marked, persistent, excessive or unreasonable fear in the presence of, or in anticipating an encounter with, a specific object or situation.

## There are 5 subtypes of the most common specific phobias:

- 1- **Animal type** (fear of animal or insect)
- 2- **Natural-environment type** (object/situation that occur in the natural environment such as height, storms, water)
- 3- **Blood-injection-injury type** (seeing blood, having injection, having any invasive medical procedure)
- 4- **Situational type** (fear of specific situation such as elevators, flight, driving, transportation)
- 5- **Other type** (all others irrational fears such as fear of contracting a serious illness)

## Etiological implications for phobias

**Psychoanalytical theory:** Oedipal complex (opposite-sex parent) and castration anxiety (fears aggression from same-sex parent)

### Learning theory

**Cognitive theory and locus of control:** -ve self-statements and irrational beliefs

### Biological aspects

### Temperament

### Life experiences.

## 4. Obsessive-compulsive disorder (OCD)

مكون من شغلتين : (two parts)

Obsessive : repetitive thought, or emotions and

Compulsive : repetitive behaviors (movement & acts)

- Treated by cognitive behavioral therapy .

- **OCD** vs. **overvalued**  
Repetition of the same action , repetition different action

- OCD is characterized by **recurrent obsessions** (unwanted ideas) or **compulsions** (repetitive behavior to reduce anxiety) that are severe enough to be **time-consuming** or to cause marked distress or significant impairment.

**Etiological implications:**

**Psychoanalytical theory:** weak, underdeveloped egos; regression to earlier developmental stage

**Learning theory:** conditioned response to traumatic event

**Biological aspects:** brain abnormalities, high serotonin secretion

## **5. Posttraumatic stress disorder**

يُحصل نتيجة ل **response to an unexpected emotional or physical trauma** مثل اللي كن يحصل مع الجنود بالحروب العالمية الأولى و الثانية ( اضطراب ما بعد الصدمة )  
**Flash back** - ممكن يوصل ل **panic attack** إذا تطور  
و بحكي عنه **PTSD** إذا استمرت الأعراض لمدة شهر  
إذا أقل من شهر يكون **acute** , أما إذا ظل أكثر من شهر يكون **chronic**

**PTSD** is the development of characteristic symptoms **following exposure to an extreme traumatic stressor** involving a personal threat to physical integrity or physical integrity of others.

Ch.ch.s: high level of anxiety, nightmares, symptoms of depression, symptoms should be present for more than one month( otherwise called acute stress disorder).

**Etiological implications:**

Psychosocial theories, learning and cognitive theories

## Treatment modalities for anxiety disorders :

- Individual psychotherapy
- Cognitive therapy
- Behavioral therapy
- Group and family therapy
- Psychopharmacology

### Treatment modalities for anxiety disorders

#### Psychopharmacology

1-Anti-anxiety , benzodiazepines

و هذول بصير عليهم Dependency

2- non-benzodiazepines

ما بصير عليهم Dependency

#### non-psycho pharmacology

individual , group , psychotherapy مثل ال

التي تستخدم لعلاج and desensitization

الفوبيا عن طريق تعريض المريض للاشي يلي بخاف منه بالتدريج

اللهم اجيني بالعمل..❤

وأشغلتني بالخير الذي ترضاه، لا تحرمني الحركة و الأثر، وبارك لي الوقت واللحظة، لا أريد فراغاً فأذبل، ولا ميلاً فأضيع، ولا عجباً فأفتن، ولا ضعفاً فألين، ولا خوفاً فأرتجف، بل ثبات الراسيات، وأرني الحق حتى أرى، وخذ بيدي.

ضعني على بداية طريق تحبه

فأحبه، وأسير فيه، وأموت عليه.

