

Theme 4:

Anx Dis, DDx

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introduction

- DDx
- Personality: Cluster C
- Defense Mechanisms

Differential Diagnosis

- Organicity
- Substance
- Psychiatric Disorders



Anxiety disorders

- Neuro
 - Tumor
 - CVA
 - Migraine
 - Encephalitis/Meningitis
 - Epilepsy
- Bronchial Asthma
- Thyroid
- Adrenal
- Pheochromocytoma
- Hypoglycemia
- Febrile illness

Organicity

Anxiety disorders

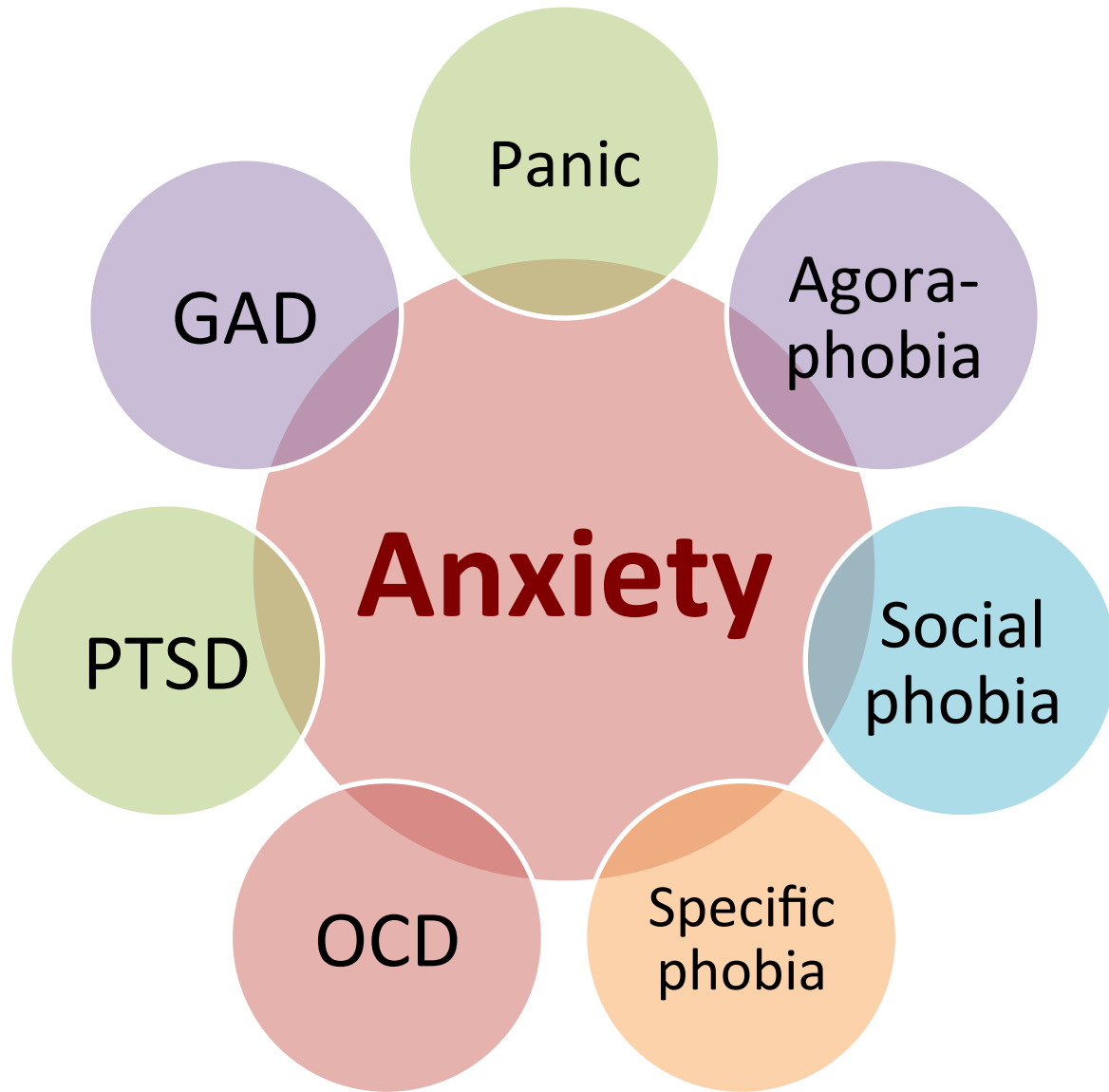
- Stimulants (Amphetamine/cocaine) intoxication
- Hallucinogens intoxication
- Depressant drugs (alcohol, opioids, barbiturates) withdrawal
- Caffeine (intoxication/withdrawal)
- Anticholinergics
- Theophylline

Substances

Anxiety disorders

- Depressive disorders (50-70%)
- Schizophrenia
- Bipolar dis
- Adjustment dis
- Personality

PSYCHIATRY



Personality Dis

- **Cluster A:** odd/eccentric
 - Paranoid, Schizoid, Schizotypal
- **Cluster B:** dramatic/erratic
 - Antisocial, Borderline, Histrionic, Narcissistic
- **Cluster C:** anxious/fearful
 - Obsessive-compulsive, Avoidant, Dependent
- **NOS**

Cluster C: Anxious or Fearful

- avoidant
- dependent
- obsessive-compulsive

Avoidant Personality Disorder

- pervasive pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation.



DSM-IV-TR: at least 4 sx

- Avoids occupational activities that involve significant interpersonal contact, because of fears of criticism, disapproval, or rejection.
- Unwilling to get involved with people unless certain of being liked.
- Shows restraint in interpersonal relationships because of fears of being shamed or ridiculed

DSM-IV-TR (continued)

- Preoccupied with being criticized or rejected in social situations.
- Inhibited in new interpersonal situations.
- Views self as socially inept, unappealing, or inferior.
- Reluctant to take risks or engage in new activities (due to fears of rejection)

Causes

- One theory
 - Person born with difficult temperament or personality characteristics
 - Parents reject them, or don't provide enough early, uncritical love
 - Rejection results in low self-esteem and social alienation

Treatment

- Controlled studies show evidence for effectiveness of behavioral intervention techniques for anxiety and social skills
 - Systematic desensitization
 - Behavioral rehearsal



Dependent Personality Disorder

- Pervasive and excessive need to be taken care of, that leads to submissive, clinging behavior and fears of separation

DSM-IV-TR: at least 5 sx

- Difficulty making everyday decisions
- Needs others to assume responsibility
- Difficulty expressing disagreement
 - Due to fears of loss of support or approval
- Difficulty initiating projects or doing things on his/her own
 - Due to lack of self-confidence in own judgment or abilities

DSM-IV-TR (continued)

- Goes to excessive lengths to obtain nurturance and support
 - Volunteers to do unpleasant things
- Feels uncomfortable or helpless when alone
 - Because of fears of being unable to take care of self
- Urgently seeks another relationship as a source of care/support when one ends
- Preoccupied with fears of being left to take care of him/herself

Causes and Treatment

- Causes
 - One theory is that early death of parent or neglect/rejection by caregiver cause person to grow up fearing abandonment
 - Over-protection
- Treatment
 - Little research
 - Assertiveness training

MONK



Obsessive-Compulsive Personality Disorder

- Pervasive pattern of preoccupation with orderliness, perfectionism, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency.

DSM-IV-TR: at least 4 sx

- Preoccupied with details, rules, lists, order, organization, or schedules to the extent that the major point of the activity is lost
- Perfectionism that interferes with task completion
- Excessively devoted to work and productivity to the exclusion of leisure activities and friendships
- Over-conscientious and inflexible about morality, ethics, or values

DSM-IV-TR: at least 4 sx

- unable to discard worn-out or worthless objects
 - even when they have no sentimental value
- reluctant to delegate tasks
 - unless others submit to person's exact way of doing things
- has stingy spending attitude
 - money to be hoarded for future catastrophes
- rigidity and stubbornness

Causes and Treatment

- Causes
 - Weak genetic contribution
 - Possible parental reinforcement of conformity and neatness
- Treatment
 - Little research
 - Therapy addresses fears that underlie need for orderliness
 - Relaxation techniques

Defense Mechanisms

- Reaction formation
- Intellectualization
- Rationalization
- Undoing

Reaction Formation

- is the converting of unwanted or dangerous thoughts, feelings or impulses into their opposites.
- E.g., a woman who is very angry with her boss and would like to quit her job may instead be overly kind and generous toward her boss and express a desire to keep working there forever.
- She is incapable of expressing the negative emotions of anger and unhappiness with her job, and instead becomes overly kind to publicly demonstrate her lack of anger and unhappiness.

Intellectualization

- is the overemphasis on thinking when confronted with an unacceptable impulse, situation or behavior without employing any emotions whatsoever to help mediate and place the thoughts into an emotional, human context. Rather than deal with the painful associated emotions, a person might employ intellectualization to distance themselves from the impulse, event or behavior.
- E.g., a person who has just been given a terminal medical diagnosis, instead of expressing their sadness and grief, focuses instead on the details of all possible fruitless medical procedures.

Rationalization

- is putting something into a different light or offering a different explanation for one's perceptions or behaviors in the face of a changing reality.
- For instance, a woman who is engaged to a man she really, really likes and suddenly is dumped by the man for no reason. She reframes the situation in her mind with, "I suspected he was a loser all along."

Undoing

- Undoing is the attempt to take back an unconscious behavior or thought that is unacceptable or hurtful. For instance, after realizing you just insulted your significant other unintentionally, you might spend the next hour praising their beauty, charm and intellect.
- By “undoing” the previous action, the person is attempting to counteract the damage done by the original comment, hoping the two will balance one another out.

OSCE

- Time allowed: 6 minutes
- Please read the instructions carefully before you start the station. (You have 1 minute to read)
- * There will be one examiner in this station to observe & evaluate your performance without asking you any question.
-
- Patient Brief Record / Brief Scenario:
- 38 year old male presented to ER complaining of low mood.
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- TASK: (What is expected from a student)
- Ask the patient the required questions to reach the diagnosis of major depressive disorder.
- You have 6 minutes to finish the consultation.

Areas to be assessed by the examiners	Marks	Student Marks
ASSESSMENT		
Diagnosis:		
- Four symptoms of the following: lack of interest, chest tightness, change in sleep, change in appetite & weight, low energy, psychomotor agitation or retardation, impaired concentration, indecisiveness, feeling of worthlessness or guilt feeling)	20	
- Suicidal ideas/ plans or attempts	10	
- Duration of symptoms	10	
- Impairment in functioning	5	
- Exclusion of manic and psychotic features	2	
- Exclusion of substance abuse.	3	
<u>Professional behavior</u>		
* Attitude of the candidates toward the patient (empathy)	5	
* Organization	5	

Thank you

James H. Moore