



## Understanding Psychological Disorders

### Social Anxiety Disorder (SAD)

<b>Definition:</b> Intense fear of social situations where one could be scrutinized by others, leading to significant distress and impairment in daily life.
<b>Symptoms:</b> Fear of judgment, avoidance of social interactions, physical symptoms like blushing, sweating, trembling in social settings.
<b>Diagnostic Criteria:</b> Persistent fear of social situations lasting six months or more, causing significant distress or impairment.
<b>Common triggers:</b> Public speaking, eating in public, meeting new people.
<b>Prevalence:</b> Affects approximately 7% of the US adult population.
<b>Treatment:</b> Therapy (CBT), medication (SSRIs, SNRIs).

## ADHD & OCD

### Attention-Deficit/Hyperactivity Disorder (ADHD)

<b>Definition:</b> Neurodevelopmental disorder characterized by inattention, hyperactivity, and impulsivity.
<b>Symptoms:</b> Difficulty focusing, forgetfulness, fidgeting, excessive talking, interrupting others.
<b>Diagnostic Criteria:</b> Symptoms present before age 12, occurring in multiple settings (e.g., home and school), and causing significant impairment.
<b>Types:</b> Predominantly Inattentive, Predominantly Hyperactive-Impulsive, Combined.
<b>Prevalence:</b> Affects about 5-10% of children and 2.5% of adults.
<b>Treatment:</b> Medication (stimulants, non-stimulants), therapy (behavioral therapy), educational interventions.

## Treatment Approaches

### Deinstitutionalization

<b>Definition:</b> The process of replacing long-stay psychiatric hospitals with less isolated community mental health services.
<b>Goal:</b> To integrate individuals with mental illness into society and provide them with more humane and effective treatment.
<b>Challenges:</b> Lack of adequate community resources, homelessness, revolving door phenomenon (hospital readmissions).
<b>Impact:</b> Increased individual autonomy but also potential for increased vulnerability without sufficient support.
<b>Key Services Needed:</b> Housing, job training, mental health clinics, case management.

### Body Dysmorphic Disorder (BDD)

<b>Definition:</b> Preoccupation with perceived defects or flaws in physical appearance that are not noticeable or appear minor to others.
<b>Symptoms:</b> Repetitive behaviors (mirror checking, excessive grooming), seeking reassurance, comparing appearance to others.
<b>Diagnostic Criteria:</b> Preoccupation causes significant distress or impairment in social, occupational, or other important areas of functioning.
<b>Common Concerns:</b> Skin, hair, nose, stomach. Can focus on one or multiple body areas.
<b>Prevalence:</b> Estimated to affect 1-2% of the population.
<b>Treatment:</b> Therapy (CBT), medication (SSRIs).

### Obsessive-Compulsive Disorder (OCD)

<b>Definition:</b> Characterized by recurrent, unwanted thoughts (obsessions) that drive repetitive behaviors (compulsions) to reduce anxiety.
<b>Symptoms:</b> Obsessions (e.g., fear of contamination, need for symmetry), compulsions (e.g., washing, checking, counting).
<b>Diagnostic Criteria:</b> Obsessions and/or compulsions are time-consuming (taking more than 1 hour per day) or cause significant distress or impairment.
<b>Common Obsessions:</b> Contamination, harm, order, unwanted thoughts.
<b>Prevalence:</b> Affects approximately 1% of adults and 1-2% of children and adolescents.
<b>Treatment:</b> Therapy (Exposure and Response Prevention (ERP), CBT), medication (SSRIs).

### Cognitive & Behavioral Approaches

<b>Cognitive Approaches:</b> Focus on identifying and changing maladaptive thought patterns and beliefs.	<b>Behavioral Approaches:</b> Focus on changing maladaptive behaviors through techniques like exposure therapy and reinforcement.
<b>Example:</b> Cognitive Behavioral Therapy (CBT)	<b>Example:</b> Exposure and Response Prevention (ERP) for OCD
<b>Techniques (Cognitive):</b> Cognitive restructuring, thought records, challenging automatic thoughts.	<b>Techniques (Behavioral):</b> Exposure hierarchies, systematic desensitization, token economies.
<b>Goal (Cognitive):</b> To develop more realistic and adaptive thinking patterns.	<b>Goal (Behavioral):</b> To reduce or eliminate maladaptive behaviors and increase adaptive ones.

# Psychotherapy & Pharmaceuticals

## Pharmaceuticals

<b>Antidepressants (SSRIs, SNRIs):</b> Used to treat depression, anxiety disorders, OCD, and BDD. Increase the availability of serotonin and norepinephrine in the brain.
<b>Anti-anxiety Medications (Benzodiazepines):</b> Used for short-term relief of anxiety symptoms. Enhance the effects of GABA, a neurotransmitter that inhibits brain activity.
<b>Stimulants (Methylphenidate, Amphetamine):</b> Used to treat ADHD. Increase dopamine and norepinephrine levels in the brain.
<b>Antipsychotics:</b> Used to treat psychotic disorders like schizophrenia and bipolar disorder. Affect dopamine and serotonin neurotransmitter systems.
<b>Mood Stabilizers (Lithium, Valproate):</b> Used to treat bipolar disorder. Help to stabilize mood swings.
<b>Important Note:</b> Medication should always be prescribed and monitored by a qualified healthcare professional. Side effects and interactions with other medications are possible.

## Types of Psychotherapy

<b>Play Therapy:</b> Utilizes play to help children express their feelings and resolve emotional conflicts. Commonly used with young children who may have difficulty verbalizing their experiences.
<b>Humanistic Therapy:</b> Focuses on helping individuals develop self-awareness and reach their full potential. Emphasizes empathy, unconditional positive regard, and genuineness from the therapist.  <b>Example:</b> Client-centered therapy
<b>Exposure Therapy:</b> A type of behavioral therapy used to treat anxiety disorders. Involves gradually exposing individuals to feared stimuli to reduce anxiety responses.  <b>Example:</b> Used in treatment of phobias and OCD
<b>Cognitive Behavioral Therapy (CBT):</b> Combines cognitive and behavioral techniques to help individuals identify and change maladaptive thoughts and behaviors.