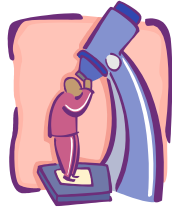


Chapter 6

Somatoform Disorders,
Psychological Factors
Affecting Medical
Conditions, and
Dissociative Disorders



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**Somatoform
Disorders**

**Psychological Factors
Affecting
Medical Conditions**

In each set of disorders covered by this chapter, the body expresses psychological conflict and stress in an unusual fashion.

**Dissociative
Disorders**



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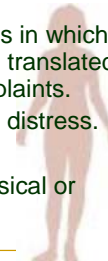
Somatoform Disorders

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SOMATOFORM DISORDERS

soma = "body" in Greek

- A wide variety of conditions in which psychological conflicts are translated into physical problems or complaints.
- Impair functioning, causes distress.
- No physiological basis.
- Won't be indicated on physical or neurological tests.



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Conversion Disorder

Conversion Disorder:

A somatoform disorder involving the translation of unacceptable drives or troubling conflicts into physical symptoms.

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CONVERSION DISORDER

Four categories of symptoms:

- Motor symptoms or deficits.
- Sensory symptoms or deficits.
- Seizures or convulsions.
- Mixed presentations.

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Somatization Disorder

Somatization Disorder:

A somatoform disorder involving the expression of psychological issues through bodily problems that have no basis in physiological function.

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SOMATIZATION DISORDER

- May be exaggerating a real physical condition.
- Not deliberately “faking.”
- Mostly women.
- Do not voluntarily seek psychotherapy.

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Pain Disorder:

A somatoform disorder in which the only symptom is pain that has no physiological basis.

Related to somatization disorder is pain disorder.



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Body Dysmorphic Disorder

Body Dysmorphic Disorder:

Somatoform disorder in which people are preoccupied, *almost* to the point of being delusional, with the idea that part of their body is ugly or defective.

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BODY DYSMORPHIC DISORDER

- Gender based concerns.
 - Men - Body build, genitals, hair.
 - Women - Weight, breast size or shape, facial features, scars, aging.
- The “defects” are imagined or grossly exaggerated.
- Obsessed with looking at it, thinking about it, concealing it.



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Hypochondriasis

Hypochondriasis:

Somatoform disorder characterized by the misinterpretation of normal bodily functions as signs of serious illness.

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HYPOCHONDRIASIS

- Preoccupation with perceived abnormal functioning.
- Distress that medical tests do not confirm their fears.
- Many also suffer anxiety or depression.
- Unlike somatization or conversion disorder, there is no abnormal bodily function or medical symptoms.

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RELATED CONDITIONS

These conditions and behaviors also involve a focus on the body, but are not somatoform disorders because the individuals know they are not really ill.

- MALINGERING
- FACTITIOUS DISORDER
- MUNCHAUSEN'S SYNDROME
- FACTITIOUS (or MUNCHAUSEN'S) BY PROXY

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THEORIES OF SOMATOFORM DISORDERS

- MOTIVATIONS FOR ILLNESS
 - Primary gain
 - Secondary gain
- INTEGRATIVE EXPLANATION

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TREATMENT OF SOMATOFORM DISORDERS

- Explore need to play the sick role.
- Evaluate stress.
- Provide behavioral techniques to control symptoms.

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Psychological Factors Affecting Medical Conditions

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PSYCHOLOGICAL FACTORS AFFECTING MEDICAL CONDITIONS

- AXIS I DISORDERS
- PSYCHOLOGICAL SYMPTOMS
- PERSONALITY TRAITS
- MALADAPTIVE HEALTH BEHAVIORS
- STRESS-RELATED PHYSIOLOGICAL RESPONSES

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THEORIES OF MIND-BODY INTERACTION

- STRESS
- COPING STRATEGIES FOR STRESS
 - Problem-focused
 - Emotion-focused
- PSYCHONEUROIMMUNOLOGY
- EMOTIONAL EXPRESSION
- PERSONALITY FACTORS

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Illnesses Aggravated by Stress

Illness	Autonomic Mechanism
Ulcers	Gastric secretion
Hypertension	Blood vessel constriction
Coronary heart disease	Cardiac function
Asthma	Bronchial function
Susceptibility to infections	Immune system

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TREATMENT FOR PSYCHOLOGICAL FACTORS AFFECTING HEALTH

- BEHAVIORAL MEDICINE
 - Take responsibility for health
 - Initiate and maintain healthy behaviors
 - Stop unhealthy behaviors
- STRESS INOCULATION TRAINING
 - Cognitive focus and method
 - Guided self-dialogue
 - Coping self-statements
 - More adaptive lifestyle

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Sleep Disorders

Dyssomnias:

Disturbances in the amount, quality, or timing of sleep.

Primary Insomnia

Primary Hypersomnia

Circadian Rhythm Sleep Disorder

Breathing-Related Sleep Disorder

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Sleep Disorders

Parasomnias:

Conditions involving abnormal behavior or bodily events during sleep or sleep-wake transitions.

Nightmare Disorder

Sleep Terror Disorder

Sleepwalking Disorder

Narcolepsy

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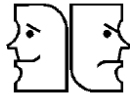
Dissociative Disorders

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DISSOCIATIVE IDENTITY DISORDER

Dissociative identity disorder:

A dissociative disorder, formerly called *multiple personality disorder*, in which an individual develops more than one self or personality.



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DISSOCIATIVE IDENTITY DISORDER

- Alters
- Usually fewer than 10 identities
- Host
- Memory Gaps



The disorder is highly controversial.

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THEORIES OF DISSOCIATIVE IDENTITY DISORDER

Highly Traumatic
Childhood Explanation
vs.
Sociocognitive Model

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TREATMENT OF DISSOCIATIVE IDENTITY DISORDER

- GOAL
 - Integrate alters.
- METHODS
 - Hypnotherapy
 - Cognitive Behavioral Techniques



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DISSOCIATIVE AMNESIA

- Unable to remember details and experiences associated with traumatic or stressful event
- Four forms:
 - Localized
 - Selective
 - Generalized
 - Continuous



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DISSOCIATIVE FUGUE

formerly called psychogenic fugue

Dissociative fugue:

A dissociative disorder in which a person, confused about personal identity, suddenly and unexpectedly travels to another place and is unable to recall past history or identity.

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DEPERSONALIZATION DISORDER

Depersonalization:

An altered experience of the self, ranging from feeling that one's body is not connected to one's mind to the feeling that one is not real.

Depersonalization Disorder:

A dissociative disorder in which the individual experiences recurrent and persistent episodes of depersonalization.

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