

Psychological disorder analysis essay



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Marla appears to suffer from Dysthymic disorder. I will discuss the origin of dysthymic disorder based on the socio-cultural viewpoint. Now that we have a diagnosis, I will explain the disorder and offer treatment methods to alleviate Marla's symptoms.

Marla is a 42-year-old Hispanic female who comes to the mental health clinic complaining of having trouble sleeping, feeling “ jumpy all of the time,” and experiencing an inability to concentrate. These symptoms are causing problems for her at work, where she is an accountant.

Marla's symptoms are vague and could be caused by several different psychological disorders. Some possible disorders that could be causing Marla's symptoms are major depressive disorder, attention deficit disorder, dysthymic disorder, and post traumatic stress disorder.

Note that these are just some of the possible disorders that could be the culprit of Marla's symptoms. When Marla entered my office, she seemed to be anxious and feeling down. I politely asked her to come into my office and have a seat.

I then began talking with Marla to make her feel more at ease.

Once she seemed to be more comfortable, I began to ask her a series of questions in order to form a diagnosis. The dialogue took place as follows:
Tiffany: Good morning Marla. My name is Tiffany. I will be performing your clinical assessment today. How are you feeling today? Marla: I'm doing okay, I guess.

I've been having problems sleeping lately and cannot seem to concentrate. I also feel jumpy all of the time. Tiffany: Marla, I'd like to begin by having you tell me a little about yourself.

Marla: Well, I'm originally from Mexico. I moved to the United States with my family when I was eight. I became a citizen shortly thereafter.

I am single and do not have any children. I am a college graduate and work as an accountant. Tiffany: How long have you been having problems with sleeping, concentrating, and feeling "jumpy"? Marla: It's hard to say really. I've felt like this for a long time but it seems that everything has gotten much worse over the last few years. Tiffany: Do you have any history of mental illness in your family, Marla?

Have you ever been diagnosed with a psychological disorder and if so are you taking medication for it? Marla: There is some history of depression in my family but nothing severe.

I have never been diagnosed with anything and am not currently taking any medications. Tiffany: Are you having any physical symptoms, if so, have you seen your primary care physician for them? Marla: I have been losing weight and feeling sick to my stomach lately. I went to see my primary care physician and she said there was no medical cause for my symptoms and suggested I speak with a psychologist.

Tiffany: Have you ever been involved in a traumatic event such as: a car accident, being a victim of a crime, experienced the loss of a loved one, or

been a part of a natural disaster? Marla: No, nothing that has been life threatening or that has affected my personal life.

Tiffany: Marla, you said that you have been having trouble sleeping. Do you have any recurring dreams that affect how you feel when you wake up in the mornings? Marla: I don't think so. I just have problems with being able to sleep. I just can't seem to get comfortable and my mind seems to race when I close my eyes.

Tiffany: What about your social life? Do you have a lot of friends and stay closely connected to your family? Marla: I really don't have any friends.

I talk to people at work but I feel like they don't want to do anything with me. As far as my family goes, we really don't talk much. Tiffany: You said you feel jumpy all of the time. Can you explain to me how you feel jumpy? Is there anything that makes you feel more comfortable? Marla: I seem to get scared over the tiniest things and am always watching to see if someone is going to hurt me. I'm more comfortable when I'm alone but still can't seem to find anything that makes me happy.

Tiffany: Have you ever experienced suicidal thoughts or thought about hurting yourself or others? Marla: No, not really. I'm afraid of dying and I could not do harm to anyone. Tiffany: Marla, I think I know what is causing your symptoms but there is just one more question I'd like to ask you. Do you feel as if you are all alone and cannot do anything to change the way you feel? Marla: Yes, that's exactly how I feel.

I feel like no matter what I do nothing ever seems to change. It's like a cycle that has no end.

Now that we have had a chance to discuss matters further, I would like to review the information and make a diagnosis. Based upon what you have told me, it appears that you are suffering from a condition known as dysthymic disorder. Dysthymic disorder is a psychological disorder very similar to depression.

With dysthymic disorder patients have difficulty sleeping; problems with appetite, either not eating enough or eating too much; a lack of energy and feeling fatigued; a low self-esteem; have trouble concentrating; and feel hopeless most of the time.

Clients with dysthymic disorder also have a depressed mood most of the time that has existed for at least two years. During this two year period the client has never been free of a depressed mood for more than two months. The final diagnostic criterion is that the client has not had a major depressive episode or manic episode during the first two years. (McGraw-Hill, 2007). Dysthymic disorder has no known cause but we can speculate as to what has caused Marla's onset of dysthymic disorder.

The stress involved in moving to the United States from Mexico at a young age likely initiated the disorder.

Marla likely watched her family struggle as they worked towards obtaining citizenship and learning to fit in with the American culture. Marla likely had trouble fitting in at school and became depressed at an early age. The social

and family stress ultimately left an imprint in Marla's mind that despite her attempts she would never fit in.

According to A. D. A. M. , Inc.

(2010), " As with major depressive disorder, dysthymia occurs more women in women than in men and affects up to 5% of the general population.

Dysthymia can occur alone, or together with more severe depression or another mood or psychiatric disorder. (Dysthymia, para. 7). The treatments available for dysthymic disorder are the use of medications and therapy. I feel that it is best to start Marla out on a mild serotonin reuptake inhibitor and schedule weekly appointments for interpersonal therapy.

In the event that serotonin reuptake inhibitors are not effective we can try tricyclic antidepressants. We may also use cognitive/behavioral therapy to treat Marla's social dysfunctioning. We will monitor Marla carefully so that we do not have any dangerous side effects from the medication she will be taking as well.

Marla is a client who suffers from dysthymic disorder.

She has had symptoms that have persisted for longer than she can remember. She recently sought help for her symptoms because they have become worse and started affecting her job. According to A. D. A. M.

, Inc. (2010), " Dysthymia is a chronic condition that lasts many years.

Though some people completely recover, others continue to have some symptoms, even with treatment. Some people need to continue taking medication and undergoing therapy. " (Dysthymia, para. 9).

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