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## Background and Relevant History

This paper discusses the personality disorder of Charlie Sheen. Online newspapers will be used to provide information on his background. On the other hand, scholarly literatures will be used to provide a substantiation for his personality disorder.
Popularly known by his stage name, Charlie Sheen, Carlos Irwin Estevez, is a renowned American actor. Carlos has appeared in different award-winning films. As a public figure, Carlos has always attracted attention. His image, when viewed through the lenses of the public's eyes, has been dramatically good and bad to some extent owing to his drug and alcohol abuse. Carlos’s home town is New York City; he was born here in 1965 (Washington Post Press, 2006). Carlos seems to have inherited passion for acting from his parents. His father was an actor; the mother was an artist. Carlos has Spanish roots because his grandparents were immigrants from Spain. As an actor, Carlos’s father had to travel to different locations, and as a result, the family decided to shift to Malibu in California. Carlos started his acting career while he was only nine; at that time, he was one of the characters of the film, ‘ the Execution of Private Slovik’. Both father and son featured in this movie, and it appears that his father’s acting role played a significant part in shaping his acting career (Washington Post Press, 2006).
Carlos had a strong foundation from home and school; Carlos took his acting career to a higher level while a student at Santa Monica High School (Washington Post Press, 2006). However, it appears Carlos over-concentrated on the acting thing at the expense of his academic studies. Consequently, he registered not so convincing grades, and his studentship at Santa Monica High School was canceled. This was a major turning point in his career. Now that there were no academic studies to worry about, Carlos concentrated on his acting career, and he set the tempo for his career. Since then, Carlos featured in different films, and his efforts have been recognized and honored; he has received reputable awards following his success. The popular teen drama, Red Dawn, was Carlos’s first professional film. Amongst the other famous T. V series that he featured in include Two and a Half Men, Spin City and Anger Management. He has featured in many other films and television series (Washington Post Press, 2006).
The Wraith, Platoon, Wall Street, Part Deux, Hot Shots, Scary Movie 3 & 4 and the Major League are the other award-winning films in which Carlos featured (Washington Post Press, 2006).
Carlos’s social life and personality have been marred with drama. It seems that he has difficulties maintaining a marriage; he has married thrice (Washington Post Press, 2006). Presently, Carlos has five children. His personality disorder became apparent in 2011 through the media; Carlos would give bizarre statements during interviews. Some of the famous statements that caught the attention of many was when he declared that he was ‘ Adonis DNA’, as well as a tiger-blood warlock (Washington Post Press, 2006). In addition, Things had apparently gone out of hand, and Carlos posted bizarre photos online. The photos seemed to mimic Carlos’s cigarette smoking prowess. At the same time, he was quoted saying not so good comments about this immediate employer, Warner Bros. Inc. Apparently, Carlos publicly and emphatically indicated that he is not a total bit chin drawn from another planet as he was made to act by his employer. Carlos emphasized that he no longer fancied the aspect of pretending (Washington Post Press, 2006).
Expulsion from high school and the utterances he made on-air or posted online were the earliest signs that Carlos was mentally unstable. He had difficulties maintaining a good working relationship and became aggressive to the extent of assaulting one of his wives. In addition, Carlos became increasingly irritated, and poor anger management accompanied this. Before realizing, he had a personality disorder, the co-occurrences of the disorder set in (substance abuse). However, with psychotherapy, his life can be restored to normalcy but this will take time.

## Diagnosis and Case Formulation

Charlie has a personality disorder. Seligman (1984) defines personality as a set of traits differentiate human beings; enduring mental and behavioral traits are the center of focus here. Personality disorders are characterized by different personality types and enduring behaviors that seem to be accompanied by some degree of distress or disability. Those behaviors are socially unacceptable, particularly with respect to the relationship with other humans (Seligman, 1984). The American Psychiatric Association’s Diagnostic manual (DSM-V) classifies personality disorders as mental disorders on axis two.
The DSM-V classifies personality disorders into three clusters: A, B, and C (Verona, Sprague & Javdani, 2012). However, the three clusters have four common features. Patients have distorted thinking patterns, interpersonal difficulties, over-or-under regulated impulse control and troublesome emotional responses (Verona, Sprague & Javdani, 2012). Cluster A is also known as the odd, eccentric cluster. Cluster A has schizotypal, schizoid and paranoid disorders. Cluster B is characterized not only as a dramatic, but also emotional and erratic cluster. Antisocial personality disorder, histrionic personality disorder, narcissistic personality disorder and borderline personality disorder are listed in this cluster. On the other hand, cluster C is regarded as the anxious and fearful cluster (Akiskal & Pinto, 1999; Verona, Sprague & Javdani, 2012).
Carlos has borderline personality disorder. Patients with this disorder have intense and unstable moods and emotions that tend to shift quickly. These people have angry outbursts, and most end up doing harmful things such as injury themselves, engaging in risky behaviors and substance abuse, among others. These actions are intended to sooth the patient in the shortest time possible. People with this disorder have difficulties being consistent; they often change relationships, careers, life goals and residences among other things. Such changes are radical and occur without an early warning. People with this disorder view the world in polarized terms. They have intense emotional reactions and difficulties in controlling those reactions. The inability to regulate those emotions causes them to act impulsively.
Carlos has once been hospitalized following the intake of excessive amounts of cocaine (US Magazine Press, 2011). This incident occurred in May 1998. Later that year, Carlos was made to undergo a probation, as well as confined in a rehabilitation center. While on an interview on TV, Charlie indicated that the hospitalization was after he had experimented the use of cocaine. (US Magazine Press, 2011). Apart from that, Carlos’s image has been tarnished at some points of his life following the use of cocaine. In December 2009, for example, Carlos is said to have assaulted, Brooke Mueller, one of his wives (US Magazine Press, 2011). He was fined $8, 500 for that offense. The jury found him guilty of three charges: third-degree assault, felony menacing, and criminal mischief. The following year in August, Carlos also pleaded guilty to misdemeanor assault. In return, the jury handed Carlos a 36-hours anger management sentence, and one month stay in drug rehab center, as well as 30 days of probation (US Magazine Press, 2011). In addition, Carlos caused damage amounting to $7, 000 in a hotel room; this incidence caused the hotel’s management to throw him out. Charlie pleaded guilty to overconsumption of cocaine after intense interrogations.
Carlos’s behaviors rhyme with the definition of borderline personality disorder. It has been shown that people with this condition lack consistency; they often change relationships, careers or goals in life. Carlos lacks consistency because he has married thrice. In addition, he has not been consistent with his career goals. On the other hand, people with borderline personality disorder are easily irritated and have poor anger management. Carlos showcased these traits when he destroyed a hotel room causing damage amounting to $7, 000. In addition, he is said to have assaulted one of his wives, and again, this is an indication of poor anger management. On top of that, it is an indication of another trait portrayed by people with borderline personality disorder: irrationality.
Humans are social, as well as biological organisms according to Carducci (2009). The biological traits are natural (hereditary) while social traits are nurtured (environment-dependent). Psycho-physiological, genetical and constitutional factors are biological in nature. Social and biological aspects of personality tend to be not only reciprocal, but also interactive. The environment (nurture) plays a critical role in the determination of the personality of a person. The influence of nurture on personality tends to be exhibited in different environmental conditions. In addition, it has been found to be a continuous learning process. Examples include lessons people learn from others such as their guardians or parents, peers, and the mass media. Carducci (2009) opines that lessons learned in such environments are essentials in adulthood, and can be employed in resolving marriage issues. On this note, the environment (nurture) must have been a principal factor in influencing Carlos’s personality. His parents, especially the father, peers, and the mass media all have played a part in shaping Carlo’s personality.

## Treatment Plan

The treatment plan for Carlos will involve two strategies: psychotherapy and medications. Livesley (2001) opines that the psychotherapy is the most beneficial management regime of people with borderline personality disorder (Livesley, 2001). It is recommended that the treatment for borderline personality disorder must be customized to the patient’s needs. Psychotherapy that has a long-terms approach is the most effective. With respect to this disorder, there are four types of psychotherapy. They include mentalization based treatment, transference focused psychotherapy, schema-focused therapy, and dialectical behavior therapy (Turner, 2000). The use of transference focused psychotherapy and mentalization based treatment is anchored on psychodynamic principles.
On the other hand, dialectical behavior and schema-focused therapies are anchored cognitive behavioral principles (Turner, 2000). These approaches have been found to be essential in the minimization of self-injury. On top of that, borderline personality disorder experts emphasize the deployment of psychotherapy with long-term goals. Mentalization based treatment and dialectical behavior therapy top the list with respect to effectiveness (Livesley, 2001). Carlos must be made to understand he has a personality disorder that is manageable, and it is important for him to comply with psychotherapeutic strategies that will be engineered for his sake.
A review of various medications used in the management of borderline personality disorder has produced mixed results (Liu, 2011). The Cochrane Collaboration assessed various medications used in the treatment of borderline personality disorders (Liu, 2011). The results of that review indicated that as of now, there are no gold-standard medications that are effective in the management of abandonment, continuous feelings of desertedness, and self-disarrangement. These are the principal symptoms of borderline personality disorder. Some medications however can alleviate symptoms that stem from co-morbid conditions or some unique symptoms associated with borderline personality disorder (Liu, 2011). Haloperidol, an antipsychotic agent, been found to be an effective anger reduction medication. On the other hand, Flupenthixol tends to minimize suicidal behaviors (Liu, 2011).
Furthermore, antipsychotics such as aripiprazole helps in the minimization of interpersonal problems (Liu, 2011). Antidepressants can also be used; valproate semi sodium is an example. On top of alleviating depression, valproate semi sodium minimizes anger, and interpersonal challenges. Lamotrigine and topiramate can be used in the management of anxiety, anger, interpersonal problems and impulsivity (Liu, 2011). Carlos ought to be advised on the best combination to take. In order to address Carlos’s borderline personality disorder, it would prudent to combine both medications and psychotherapy. Again, it is important to emphasize on long-term goals. Psychotherapy should be commenced as soon as possible, but it should be augmented by the use of medications. Medications will be helpful in the management of anger and impulses on a short-term basis. For the case of Carlos, antidepressants and dialectical behavior therapy ought to be used.

## Prognosis

If left untreated, borderline personality disorder has undesirable consequences. The patient is likely to have dysfunctional social relationships, broken marriages, repeated job losses, frequent hospitalizations as a result of self-harm or accidents (Finagy, 1995). Others include engagements in physical fights, possible car accidents and cases of suicide. Persons with this disorder are likely to become substance abusers (like Carlos), develop antisocial personality disorder, post-traumatic stress disorder, depressive disorder, bipolar disorder and attention deficit disorder (Finagy, 1995). It is, therefore, important to address this condition as soon as possible so that Carlos should not develop this co-occurring disorders (Finagy, 1995).
Bateman and Fonagy (2012) contend that the natural course of borderline personality disorder, as well as its long-term outcome after treatment, is uncertain. Several treatments randomized trials have been found to minimize the major symptoms associated with this disorder. Because of the unpredictability and uncertainty of the disease and its treatment course, it is paramount for the therapist to keep a keen eye on the patient. On the other hand, Gunderson (2009) contends that this is the only mental disorder in which psychosocial treatments are the main approaches to treatment. It is important for therapists to help patients with borderline personality disorder to re-ignite their interests in personal involvements.
Carlos’s case is manageable. The most important thing is that he follows the recommended therapy. As noted earlier, psychotherapy has long-term goals. In order to ensure that those goals are met, it is vital to monitor the progress of the treatment. The therapist ought to conduct a follow-up on the progress of Carlos’s treatment plan. The therapist must make follow-ups at least once per month for a period of twelve months after the completion of the treatment window. During those visits, the therapist will examine cases of relapse. He should assess the clinical history of the patient in the past thirty days and guide the patient accordingly. For example, the therapist should assess how the patient manages anger, if they still use illicit drug (cocaine in this case) and how they relate with others. An improvement on this front will be an indication that the treatment is progressing well. Carlos’s case can be changed for the better; he should be advised and supported to be consistent with his therapy. The primary goal should target the withdrawal from the use of cocaine.
In summary, this paper has analyzed the clinical case of a public figure. In this case, Carlos Irwin Estevez otherwise known as Charlie Sheen has been the center of focus. Carlos’s behavior has been questionable on a number of occasions, and it was later realized that he had been using cocaine. Carlo’s substance abuse is a co-occurrence since his primary disorder is borderline personality disorder. Patients with this disorder have intense and unstable moods and emotions that tend to shift quickly. These people have angry outbursts, and most end up doing harmful things such as injury themselves, engaging in risky behaviors and substance abuse, among others. Because of the unpredictability and uncertainty of the disease and its treatment course, it is paramount for the therapist to keep a keen eye on the patient. Therefore, it is important for therapists to help patients with borderline personality disorder to re-ignite their interests in personal involvements. Carlos’s condition is manageable; the most important thing is for him to be consistent with his therapy.

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