

# [Generalized anxiety disorder case study](https://assignbuster.com/generalized-anxiety-disorder-case-study/)

Case Study: Anxiety Answer Sheet

Diagnosing Tina

* Student Name: Robert Gianella

Diagnosing Generalized Anxiety Disorder:

1a. Refer to the DSM-IV checklist for generalized anxiety disorder. Which of Tina’s symptoms meet any of the criteria? (Be sure to match specific symptoms with specific criteria.)

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| The symptoms that Tina exhibits that meet the criteria of General Anxiety Disorder are potential excessive or ongoing anxiety and worry about two or more activities or events. The case does not state whether this has continued for at least 3 months as the checklist states is the requirement but she does feel that something else bad will happen after she lost her husband. Her anxieties or worries revolved around her twin daughters being abducted, or their school bus crashing. She also exhibits restlessness and/or muscle tension as she describes that she has begun drinking to “ calm her nerves,” as well as describing the feeling of her body being “ tied in knots.” Her behavior is also being affected by the anxiety or worry as she is unable to sleep without drinking beforehand. She also exhibits a significant degree of distress or impairment in that she finds it hard to drive, to the point that she has had to pull over because she was having difficulty breathing.  |

1b. Based upon your review of Tina’s symptoms and the diagnostic criteria, could Tina be diagnosed with generalized anxiety disorder or not (and if not, why not)?

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| Based on what I have read in the case study, I would have to say that she could be diagnosed with General Anxiety Disorder.  |

Diagnosing Specific Phobia:

2a. Refer to the DSM-IV checklist for specific phobia. Which of Tina’s symptoms meet any of the criteria? (Be sure to match specific symptoms with specific criteria.)

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| Tina does exhibit a marked, persistent, and disproportionate fear of bridges, as well as anxiety when she is forced to encounter a bridge, and if it were possible she would actually avoid them, and they so cause her a significant amount of distress  |

2b. Does Tina have a specific phobia and if yes, what is the feared object?

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| Tina could be diagnosed with a specific phobia due to her apparent fear of bridges.  |

Diagnosing Panic Disorder:

3a. Refer to the DSM-IV checklist for panic disorder with agoraphobia and the checklist for panic disorder without agoraphobia. Which of Tina’s symptoms meet any of the criteria? (Be sure to match any specific symptoms with specific criteria.)

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| Tina reported suffering from shortness of breath, rapid heartbeat, sweating, and the belief that she might be dying of a heart attack. She does not state whether this is the first time this has happened, thought it could be inferred, we would need to know for sure in order to determine if the attacks are recurrent. She does seem to be worried about having additional attacks of this type which meets the requirement of either a concern or worry that she might, and states that she has gotten to the point where she does not want to drive which points to a change in behavior related to her attack(s).  |

3b. Does Tina meet the diagnostic criteria for panic disorder with agoraphobia or panic disorder without agoraphobia or neither? Explain why you believe your choice is the most appropriate diagnosis.

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| Tina may fit the criteria for Panic Disorder without Agoraphobia, if more information could be determined to find out whether she has positively suffered from more than one attack. This diagnosis if there have been a number of attacks is appropriate because she does not state that she has any other fears of being in public besides the fear of crossing bridges and the DSM-5 checklist states that there must be fear of at least 2 different situations.  |

Understanding Tina’s Disorders:

1. How would the Socio-Cultural Perspective explain Tina’s GAD?

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| According to the Socio-Cultural perspective Tina’s GAD might be explained by many factors. First she grew up in a poor family. Also there is the fact that her husband was controlling and also the person that made the money. Tina did not have a job nor did she want one, her responsibilities were to keep a clean house, cook large dinners (which were demanded by her husband), pick up the parts for her husband’s side business, and billing the customers. The loss of her husband may not have created a financial problem for Tina, but not having to take care of his needs coupled with the growing independence of her daughters has left Tina feeling alone, unwanted, and unneeded.  |

2. Explain Tina’s GAD from the Existential Perspective.

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| Tina’s GAD could be explained from an existential perspective in that Tina appears to view the idea that she has no one to answer to with the passing of her husband and the increased independence of her twin daughters as a burden instead of a blessing. She does not see that she has freedom, instead she believes that she will forever be alone because of her physical appearance, and the fact that she is middle aged with 2 children creating a low self-worth in Tina’s mind, this low self-worth is the potential cause of her disorder.  |

3. Explain Tina’s GAD from the Cognitive Perspective (please identify any basic irrational assumptions that Tina is making, even if they may be unspoken).

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| From a cognitive point of view Tina sees her twins not wanting to hang around with her as them not loving or approving of her, and even thought the idea of dating occasionally appeals to her, she fears that no one will want to date her because of her appearance and children, this idea haunts her thoughts and causes her to think about it constantly. All of these feelings cause the grim view that Tina has on her life.  |

4. Explain Tina’s Phobia from a Behavioral Perspective (please use classical conditioning as a possible example).

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| I do not see anything that from a classical conditioning standpoint that would cause her Phobia. Nothing in the complaint or history states that anything happened to Tina on a bridge that would have created a connection between a fear of bridges and the bridges themselves. Perhaps she has a negative view of bridges because during her husband’s treatments they were constantly crossing them and she has created a negative connection between. Another theory could be that while driving across a bridge she heard a news report on the radio about a bridge collapsing which now causes her to believe that it will happen where she lives.  |

5. Explain Tina’s Phobia from a Psychodynamic Perspective.

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| The Psychodynamic perspective states that Tina’s past experiences could be the cause of her phobia. Growing up poor, having a controlling husband that did not allow for her to make decisions, her husband getting sick and passing away. All of this possibly combined to create the feeling that Tina experiences about a bridge collapsing while she is on it.  |

6. Considering the biological correlates or causes of Tina’s panic disorder, what role does the neurotransmitter norepinephrine play in her panic disorder?

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| Abnormal levels of Norepinephrine have been found to lead to panic disorder, When the brain does not produce enough of this neurotransmitter or produces it in an abnormal way, the result is typically either Panic Disorder with Agoraphobia or Panic Disorder without Agoraphobia. Tina’s disorder is probably linked to a deficiency of this neurotransmitter.  |

7. What does Tina’s locus ceruleus have to do with her panic disorder?

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| The Locus Ceruleus is an area of the brain where there is a large concentration of neurons that use Norepinephrine. When this area experiences stimulation, it causes a reaction that leads to panic.  |

8. What role might GABA play in her symptoms?

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| GABA is an inhibitory neurotransmitter, which causes certain neurons to stop firing upon its release. It is possible that Tina suffers from a deficiency of this neurotransmitter which leads to her disorder.  |

Treating Tina

1. Which Psychodynamic technique has been found to be the most useful in the treatment of GAD?

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| Short-term psychodynamic therapy has been found to have a significant on the levels of anxiety, worry, and the difficulties that those that suffer from it have socially.  |

2. Explain why a humanistic approach would be helpful in treating Tina’s GAD.

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| The humanistic approach relies on a client-centered therapy that allows the client to experience positive support from the therapist. This positive support aids in creating a better feeling of self worth in the client. The client also gains a feeling of acceptance, and aid them in being honest with themselves about what they need, what they think, and how they feel.  |

3. How might you use Rational-Emotive Therapy to treat Tina’s GAD?

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| Rational-Emotive might be useful in getting the client to stop believing in incorrect ideas, while replacing them with positive and better fitting ideas about themselves, their fears and their feelings about the world and people around them.  |

4. How would Systematic Desensitization be used to treat Tina’s phobia of bridges?

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| Systematic Desensitization would help Tina learn to relax while crossing the bridges that she has to cross in her daily life. Tina would first learn to relax, and then the therapist might begin to use small steps to make Tina learn to be more comfortable with using bridges.  |

5. What medications have proven useful for treatment with panic disorder?

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| Benzodiazpine drugs such as Alprazolam also known as Xanex have been shown to treat Panic Disorder witht eh most success.  |

6. What role could cognitive therapy play in Tina’s treatment for panic disorder?

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| Cognative therapy could be utilized to treat Tina’s Panic Disorder by teaching her what is really going on in her body and what the feelings that she experainces when an attack comes on really are. It would also help her by teaching her various relaxation and breathing techniques to aid in calming herself. This type of therapy also makes it possible to bring on an attack in a controlled way so that she can learn to put all of these skills together under therapist supervision.  |

7. Considering that Tina may be treated for comorbid disorders, how do you see the treatments for the various disorders complementing each other?

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| All of the disorders that Tina may be treated for can all be treated using the same model as the text lists how each model would aid in treatment.  |

8. Is there any reason to think that any of the treatments would be contraindicated when utilized together? Explain why/how or why/how not.

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| In my opinion, I have read nothing that would lead me to believe that any treatment would contradict another treatment if used in conjuction with it. If anyting it would aid in the treatment. As mentioned before, each model has specific things it does for each disorder , some may not be as successful when used with other treatments but I do not believe that there would be any adverse effects from using them together.  |