

Generalized anxiety disorder case study



**ASSIGN
BUSTER**

Case Study: Anxiety Answer Sheet

Diagnosing Tina

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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.)

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)?

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.)

Tina does
exhibit a
marked,
persistent,
and
disproportiona
te 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?

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.)

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.

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?

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.

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).

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).

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.

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?

Abnormal
levels of
Norepinephrin
e 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?

The Locus

Ceruleus is an

area of the

brain where

there is a

large

concentration

of neurons

that use

Norepinephrin

e. When this

area

experiences

stimulation, it

causes a

reaction that

leads to panic.

8. What role might GABA play in her symptoms?

GABA is an

inhibitory

neurotransmit

ter, which

causes certain

neurons to
stop firing
upon its
release. It is
possible that
Tina suffers
from a
deficiency of
this
neurotransmit
ter which
leads to her
disorder.

Treating Tina

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

Short-term
psychodynami
c 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.

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?

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?

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?

Benzodiazepine
drugs such as
Alprazolam
also known as
Xanax have
been shown to
treat Panic
Disorder with
the most
success.

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

Cognitive

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 experiences 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?

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.

In my opinion,
I have read
nothing that
would lead me
to believe that
any treatment
would
contradict
another
treatment if
used in
conjunction
with it. If
anything 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.