

The special challenges of neurological based behavior essay sample

[Psychology](#), [Behaviorism](#)



Neurological based behavior is serious problem faces my many. There are several such neurological problems such as Attention deficit hyperactivity disorder (ADHD), Autism, Bipolar disorder, Schizophrenia, etc. People suffering from each of these disorders need special care in the hospitals, society and their own homes. There are different types of depressive disorders, such as Dysthymic, Bipolar, Cyclothymic disorder, Mood disorder due to a general medical condition, Substance-Induced Mood Disorder, Seasonal Affective Disorder (SAD), Postpartum Depression and Premenstrual Dysphoric Disorder. However, within each of these types there are variations in the number of symptoms, their severity, and persistence. This paper discusses some of the special challenges of neurological based behavior.

Attention deficit hyperactivity disorder (ADHD) is a chronic behavioral disorder of childhood onset (by age seven). Children with ADHD have trouble paying attention in school, at home or at work. It is characterized by behavior that is hyperactive, impulsive, and/or inattentive. Children with ADHD may appear functionally impaired in many areas and may engage in a broad array of problem behaviors that frustrate and disrupt family, school, and peer relationships.

Their inability to sit still and pay attention in class may lead to school failure, truancy, and dropping out. A combined effort, with parents, teachers and doctors working together, is the best way to help children with ADHD. Some children benefit from counseling or from structured therapy. Families may benefit from talking with a specialist in managing ADHD-related behavior and

learning problems. Medicine also helps many children (Familydoctor. org, 1999).

Autism is a neuropsychiatric disorder that lasts all through a person's lifetime. It is part of a group of disorders known as Autism Spectrum Disorders (ASD). It is characterized by significant deficits in communication and social interaction, as well as stereotyped and repetitive behaviors (Paul and Wetherby, 2005). It is a severe developmental disorder that affects the way a child sees and interacts with the rest of the world. It limits their ability to interact with others socially and most of the times try to avoid human contact.

Since communication deficits are at the core of the autistic syndrome, these deficits affect all aspects of the child's functioning. Effective communication intervention requires not only specialized knowledge in communication, but also proper understanding of ASD. Meeting the social, behavioral, and communicative challenges requires a broad knowledge base with perspectives from many disciplines (Diehl, 2003). Treating and special care is essential for these communication disorders of children with autism.

Bipolar disorder also known as manic depression is a class of mood disorders in which the person experiences states or occurrence of depression or mania, hypomania, or mixed states which severely disabling psychiatric condition. Mood swings cause impairment not only in one's mood, but also in one's energy level, sleep pattern, activity level, social rhythms and thinking abilities.

Bipolar disorder is more common in adolescents. Detection can be problematic, particularly given that the presentation is similar to major depression. As a result, youth with bipolar disorder may not be diagnosed accurately until they reach a psychiatric inpatient unit (Burns, *et al.* 1999). Bipolar disorder can also badly affect spouses, family members, friends, and people in the workplace. The stigma of mental illness has not been eradicated, though the move to equate mental illness with physical illness has resulted in greater understanding on some fronts. We still have a long way to go in this area (Bloom and Schafer, 1998).

The modern day treatments include mood stabilizer treatment that can dramatically halt the turbulent course of bipolar disorder, reduce the risk of suicide, increase life expectancy, increase productivity and functioning and 40-75% of patients who respond to mood stabilizers achieve a reasonable occupational status and ability to live independently (Goldberg et al, 1995). Still there is a long way to go in case of treatments for bipolar disorder.

With the present day advancement in medical sciences and genetics, in future it would be possible that such disorders are diagnosed and treated at a very early stage even before the symptoms are shown. Medical science and its advancement has helped many of the dreaded diseases under control, it is proposed that the future research in the field of mental health will also be helpful for patients to diagnose and treat the disease and also find a complete cure for the disease.

Schizophrenia is a serious mental illness and patients experience progressive personality changes and a breakdown in their relationships with the outside world. They have disorganized and abnormal thinking, behavior and language and become emotionally unresponsive or withdrawn (AstraZeneca 2003). Schizophrenia is a mental disorder that affects around 1 in every 100 people.

The exact cause of schizophrenia is still unknown. There are many different theories that presume to explain the etiology of the disease. The different hypotheses include: Environmental and developmental aspects, Neuro-pathological, Brain Imaging, and Neurophysiologic findings, and abnormalities in neuro transmitters. Neurotransmitters implicated in the development of schizophrenia include: dopamine, serotonin, norepinephrine, and gamma-aminobutyric acid.

Multiple approaches would be required to understand these neurological problems. Parallel research in areas such as basic neurobiology, neurophysiology, microscopic neuroanatomy of the brain, and integrative neuroscience, as well as a continued search for environmental factors, will be essential for understanding these disorders. Besides, knowledge on these issues will also facilitate for devising new treatments.

References

AstraZeneca, *Schizophrenia* (2003) Retrieved on 21 October 2007 from <http://www.patienthealthinternational.com/article/501557.aspx>

<https://assignbuster.com/the-special-challenges-of-neurological-based-behavior-essay-sample/>

Bloom, A. and Schafer, D. (1998) *History of Mental Illness and Early Treatment in a Nutshell*. Retrieved on 20 October 2007 from <http://www.bipolarworld.net/Bipolar%20Disorder/History/history.html>

Burns, B. J., Hoagwood, K., and Mrazek, P. J. (1999) Effective Treatment for Mental Disorders in Children and Adolescents, *Clinical Child and Family Psychology Review*, Vol. 2, No. 4, : 199-254.

Diehl, S. F. (2003). Clinical Forum: Prologue: Autism spectrum disorder: The context of speech-language pathologist intervention. *Language, Speech & Hearing Services in Schools*. Washington: Jul 2003. Vol. 34, Iss. 3; pg. 177.

Familydoctor.org (September 1999), ADHD: What Parents Should Know, *American Academy of Family Physicians*, Retrieved on 20 October 2007 from <http://familydoctor.org/118.xml>

Goldberg, J. F., Harrow, M., Grossman, L. S. (1995) Course and Outcome in Bipolar Affective Disorder: A Longitudinal Follow-Up Study. *Am J Psychiatry*. 152: 379-384.

Paul, R. and Wetherby, A. (2005) New Autism Collaboration Develops Practices in Communication Assessment for SLPs *ASHA Leader*. Rockville : Mar 1, 2005. Vol. 10, Iss. 3; pg. 11-13.