



What is Dissociative Identity Disorder?

Ch. 5-Somatoform and Dissociative disorders

Have you ever spaced out?

◆ Dissociative experiences are somewhere in between a dream state and reality.



◆ Dissociation is a psychological state that produces a _____ from the psyche.

- thoughts
- _____
- _____
- identity

Can we lose touch with reality?

Extreme, chronic dissociation present in disorders

Mild

Example: _____

Why do we dissociate?

- ◆ Even when daydreaming, these dissociative moments result in a temporary _____.
- ◆ In situations involving trauma, this provides a break from the fear and pain of the trauma.
- ◆ This in some cases, produces a _____.

Two Types of Dissociative experiences:

- ◆ If you have an episode of *Depersonalization*, your perception becomes altered so that you temporarily feel _____
_____ at times you can lose sense of your own _____.



The patient feels like an observer of his life and may actually feel as if he were watching a movie.



- ◆ During an episode of _____ your sense of the reality of the external world is lost.
- ◆ This refers to experiencing familiar persons and surroundings as if they were strange or unreal.

- ◆ _____

I can't remember...

- ◆ Amnesia is not just associated with a head trauma, people can have the inability to recall information due to dissociation.

- ◆ _____

Test your Knowledge! True or False?

- ◆ Dissociative Identity Disorder is the same as Schizophrenia. _____
- ◆ DID is a VERY controversial psychological disorder. _____
- ◆ Four times as many women are diagnosed as men. _____
- ◆ DID is the result of genetics and biology. _____

Dissociative Identity Disorder (DID)

- ◆ This is one of the most controversial disorders, formerly called Multiple Personality Disorder.
- ◆ This dissociation disorder involves the creation of _____, which are *partially* independent _____ that exist within one body and mind.

- For DID to be diagnosed

Who's Effected?

- ◆ The estimated prevalence of DID in the U.S. population is from 1 in 500 to 1 in 5,000
 - Between 250,000 and 2,500,000 people.
 - Women are _____ to be diagnosed
 - _____

Separate People?

- ◆ People with DID may adopt as many as 100 new identities, all simultaneously coexisting.
 - _____
- ◆ When under the control of one alter, they may exhibit different behaviors, mannerisms, personalities, gender orientation, and physical properties
 - _____

Switch!!

- ◆ The transition from one alter to another is called a "switch".
- ◆ _____ . Due to this, amnesia is required for diagnosis, because sections of time are missing once the alter takes over.
 - Some people with DID display "Co-Consciousness" or _____ which varies from person to person.

What changes did you see?

◆ _____

- ◆ In one study, changes in handedness occurred in 37% of the cases (Putnam et al., 1986).

Is it just like how we see it in the movies?

- ◆ The person who usually becomes the patient and seeks treatment is _____. They usually become overwhelmed trying to hold the fragmented identity together.

- ◆ The alters are usually character-like, _____
 - "The Protector"
 - Handles conflict situations
 - "The Whore"
 - Handles sexuality, sometimes generating income as a prostitute.
 - "The child"
 - Usually represents the age when the child's psyche became fragmented.

Can this disorder be faked?

- ◆ This is a very controversial disorder and is difficult to determine whether or not the identities are "real" or if the person is faking them for several reasons.

- ◆ Research supports that persons with DID are _____ (Bliss, 1984).

The power of suggestion?

- ◆ There has been a lot of evidence to suggest that many alters can be _____

- ◆ In extreme cases, unethical therapists have encouraged the creation of additional alters by coercion and suggesting false memories.



Can professionals CREATE this disorder??

- ◆ Some psychologists believe that MPD is an _____
(physician-induced) behavioral syndrome, promoted by suggestion.
- ◆ It is thought by some that MPD, like hysterolepilepsy, is created by therapists. This previously rare and disputed diagnosis became popular after the appearance of several best-selling books and movies.

Just faking??

- ◆ Although the high suggestibility of these clients is a factor in the development of alters, research suggests that many people with fragmented identities are not consciously and voluntarily faking these alters.
 - Miller (1989) confirmed that DID patients display changes in visual acuity, manifest retraction, and eye muscle balance would be difficult to fake.
 - Changes in brain function have also been detected by using MRIs to observe brain changes during the time of the switch. Research has shown specific changes in hippocampal and medial temporal areas after the switch (Tsai et. Al, 1999)

The escape into a fantasy world is done to escape the physical and/or emotional pain to survive.



Causes

- ◆ Putnam et al., (1986) found that _____% of patients had experienced significant trauma, including sexual or physical abuse.
 - 68% reported a history of incest
- ◆ Ross et al., (1990) that 95% of patients reports sexual abuse with a tendency towards _____.
- This research reported documented incidences children being buried alive, tortured with matches, steam irons, razor blades or glass.

Is this like PTSD?

- ◆ There is a suggested “_____” that leads to DID. This theory suggests that trauma prior to age 9 may help explain the development of DID in those with a early history of trauma (Putnam, 1997).
- ◆ DID can be associated with events such as exposure to combat/war. There is a supported belief that DID is an extreme subtype of PTSD
 - But the symptoms vary based on this “window”

What Else Contributes?

- ◆ What seems to be most commonly agreed upon in the development of DID is the _____ during or after the abuse.
- ◆ Research has found a high correlation between _____ and the development of DID after trauma

Treatment

- ◆ Symptoms of DID may come and go, but the disorder _____.
The process for treatment of DID is not easy or agreed upon by professionals.
- ◆ The goal of treatment is to _____ into a single identity through long-term psychotherapy, which is usually long and emotionally painful (Ellason et al., 1997).
- ◆ The prognosis is somewhat unclear. Coon (1986) found that only 5 out of 20 patients achieved full integration of their identities.
 - Further research showed a 22.2% success for reintegration 2 years after treatment (Ellason, 1997).

New strategies for treatment

- ◆ Strategies clinicians are using today are based on successful treatments for PTSD, due to commonalities between DID and PTSD (Maladono, 1998).
- ◆ The goal for treatment is to identify triggers that provoke memories of trauma/dissociation and neutralize them.
- ◆ Most importantly, patients must confront and relive the early trauma so they can gain control (in their mind) over the events (Kuft, 1996).

Next class...

- ◆ Mood Disorders...depression and bipolar disorder.
