What are Somatoform Disorders?

Chapter 6
Somatoform Disorders, Psychological Factors Affecting Medical Conditions, and Dissociative Disorders

Module Objectives

- What are Somatoform Disorders?
  - What are some forms of somatoform disorders?
- What are the causes for these disorders?
- How can they be treated?

Somatoform disorders occur when psychological conflicts become translated into ______________________
_____________________
_____________________

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_____________________
Hypochondriasis is a persistent fear of having a serious medical illness.

The fear or idea is based on the

_____________________________________
_____________________________________
_____________________________________

Some may focus on heart rate, perspiration, pain, or something minor, like a cough.

“I have a headache…I must have a brain tumor!”
Does the medical assurance from doctors reduce this worry?

People with Hypochondriasis often see many doctors, looking for someone to confirm the illness.

Who does this disorder affect?

- The prevalence of this disorder in the general population is not fully known, it is approximated that this effects about 3% of the population (Escobar, 1998).
- However, the sex ratio is actually 50/50 (Kirmayer, 2003).
This disorder tends to be episodic, with hypochondriacal periods lasting from months to years.

It is widely agreed that Hypochondriasis is a disorder of cognition.

Research has confirmed that patients with hypochondriasis show enhanced perceptual sensitivity to illness cues.

People with this disorder also tend to interpret ambiguous stimuli as threatening.
Patients with hypochondriasis have a high rate of comorbidity. In one study, 88% of patients with hypochondriasis had one or more concurrent disorders.

- Dysthymic disorder (45.2%)
- Somatization disorder (21.4%)
- Panic disorder (16.7%)

These patients are ___________________________________________________________________

What causes people to develop this?

- Hypochondriasis tends to run in families, suggesting ___________________________________________________________________

  - BUT...Some research suggests that this can also be a learned behavior as seen evidenced in children with hypochondriasis who report the same concerns as family members.

Treatment

- __________________________________________________________________________

  - CBT showed a 76% improvement rate (Warwick et al., 1996)

- Medications are seldom used, but SSRI's may be considered.
Conversion Disorder

This term was made famous by Freud, who believed the anxiety resulted from unconscious conflicts that was "converted" into physical symptoms.

Conversion disorders tend to be

- Paralysis
- Blindness
- Difficulty speaking

Those who report blindness often can avoid objects in their visual field, as well as those reporting paralysis of the legs might get up and run somewhere in an emergency and are astounded they were able to do this.
Unlike conversion disorders that are not under the person’s physical control,______________________________

______________________________

______________________________

______________________________

Why are you such a faker?

- Somewhere in between conversion and faking physical symptoms are factitious disorders.

- People with this disorder fake physical or psychological

  ________________________________

  ________________________________

- Commonly referred to as

  ________________________________

Patients with factitious disorders produce or exaggerate the symptoms of a physical or mental illness by a variety of methods

- Contaminating urine samples with blood
- Taking hallucinogens
- Injecting themselves with bacteria to produce infections
Munchausen Syndrome by Proxy

- This disorder is a factitious disorder, but really an atypical form of ________________________
- The parent may resort to extreme tactics to create __________________________________________
  - Usually establish a positive relationship with the medical staff.

Children affected are typically preschool age, although there have been reported cases in children up to 16 years old.

Who does this disorder effect?

There are equal numbers of boys and girls, however, 98% of the perpetrators are female.
Conversion disorders are relatively rare in mental health settings, often because people with these symptoms are more likely to consult a neurologist or specialists.

It was concluded that environmental stress, especially sexual abuse, are common among children and adolescents with conversion disorder (Roelofs et al., 2002).

Few studies have evaluated the effectiveness of treatment, but the principle strategy is to identify and attend to the traumatic/stressful life event, if it is still present and remove the sources of secondary gain.
What’s Next?

- Dissociative Identity Disorders