NEUROTIC DISORDERS

SOMATOFORM DISORDER

LECTURE NO: 6

DEPARTMENT OF MENTAL HEALTH NURSING

VSPM'S COLLEGE OF NURSING & RESEARCH CENTRE, NAGPUR

PURPOSE STATEMENT

At the end of the session the students will be able to gain knowledge regarding somatoform disorder and will apply this in to clinical practice.

LEARNING OBJECTIVES

Sr No	Learning Objectives	Domain	Level
1	Explain somatoform disorder and its types	Cognitive	Must know
2	Discuss diagnosis for somatoform disorder	Cognitive	Must know
3	Explain treatment for somatoform disorder.	Cognitive	Must know
4	Explain nursing intervention for somatoform disorder.	Cognitive	Must know

LEARNING OBJECTIVES

Sr No	Learning Objectives	Domain	Level
5	Explain the follow up care for neurotic disorders.	Cognitive	Must know

SOMATOFORM DISORDER

• Somatoform disorders are characterized by physical symptoms suggesting medical disease, but without demonstrable organic pathology or a known pathophysiological mechanism to account for them.

CONT...

• They are classified as mental disorders because pathophysiological processes are not demonstrable or understandable by existing laboratory procedures, and there is either evidence or strong presumption that psychological factors are the major cause of the symptoms.

- These disorders are characterized by repeated presentation with physical symptoms which do not have any physical basis, and a persistent request for investigations and treatment despite repeated assurance by the treating doctors.
- These disorders are divided into following categories:
 - 1. Somatization disorders
 - 2. Hypochondriasis
 - 3. Somatoform autonomic dysfunction
 - 4. Persistent somatoform pain disorder

Etiology

The exact cause of somatic symptom disorder isn't clear, but any of these factors may play a role:

- Genetic and biological factors.
- Family influence.
- Personality trait of negativity.
- Decreased awareness of or problems processing emotions.
- Learned behavior.

1.SOMATIZATION DISORDER

- Somatization disorder is characterized by chronic multiple somatic symptoms in the absence of physical disorder.
- The symptoms are vague, presented in a dramatic manner and involve multiple organ systems.

SIGN & SYMPTOMS

- Multiple somatic complaints unexplained by medical findings.
- Complaints of pain in at least four different location.
- Two gastrointestinal, one sexual or reproductive and one neurologic symptom
- Moderate to severe anxiety

CONT....

- Inability to voluntarily control the symptoms
- Dependency with demanding, attention getting behaviours.
- Secondary gain.
- Significant distress or impairment in social or occupational areas.

2.HYPOCHONDRIASIS

- Hypochondriasis is defined as a persistent preoccupation with a fear or belief of having a serious disease despite repeated medical reassurance.
- It affects 1 to 5 % of the general population.
- The disorder is equally common among men and women, and the most common age of onset is in early adulthood.

SIGN & SYMPTOMS

- Fear or preoccupation with body functioning misperceived as a major illness.
- Repeated health care visits seeking verification of fear, (doctor shopping)
- Symptoms reported in specific detailed

Cont....

- Involvement of one or more body systems
- Unconvinced by repeated examination, investigations and reassurance that disease does not exists.
- Impaired social and family relationships.

3.SOMATOFORM AUTONOMIC DYSFUNCTION

- In this disorder, the symptoms are predominantly under autonomic control, as if they were due to a physical disorder.
- Some of them include palpitations, hiccoughs, hyperventilation, irritable bowel, dysuria, etc.

4.PERSISTENT SOMATOFORM PAIN DISORDER

- The main feature of this disorder is severe, persistent pain without any physical basis.
- It may be of sufficient severity so as to cause social or occupational impairment.
- Preoccupation with the pain is common.

DIAGNOSIS

- Physical workup to rule out medical and neurological conditions.
- Complete patient history with emphasis on current psychological stressors.
- Tests to rule out underlying organic diseases.

TREATMENT

Drug therapy

- Antidepressants
- Benzodiazepines

Psychological treatment

- Supportive psychotherapy
- Relaxation therapy

NURSING INTERVENTION

- Before a somatoform determination, a physical examination and diagnostic testing are necessary to rule out any underlying pathology.
- Create an accepting safe and supportive atmosphere that allows open communication with the patient.

CONT...

- Should focus on the whole person, including psychological, social and family factors in additions to the physical symptoms
- It must be remembered that they are not consciously trying to be sick or avoid responsibilities.
- Respond to patient with understanding and patience.
- Identify types of primary and secondary gain achieved by symptoms.

- Encourage the patient to keep a diary of daily happenings and feelings, along with physical symptoms.
- Encourage the patients to make decisions and take responsibility for situations related to them.
- Help the patient to identify more effective coping mechanisms rather than the somatic symptoms.

FOLLOW UP CARE

• The people with anxiety disorders, somatoform disorders and dissociative disorders are often treated in the community clinics, physician office and psychiatric OPDs. Issues to be considered during outpatient therapy include, identifying and strengthening support symptoms and locating community resources.

CONT...

• For people with anxiety disorders, the goal is effective management of stress and anxiety, not the total elimination of anxiety. Learning anxiety management techniques and effective methods of coping with life and its stresses is essential for overall improvement in life quality.

- Follow-up interventions are especially helpful for anxiety disorder patients. During follow up meet with patient and family members to discuss realistic expectations for the patient.
- Teach the patient stress management techniques such as relaxation, guided imagery and meditation, encourage him to practice regularly.
- Teach the patient about medications and life style changes like, exercise regularly, eat well balanced meals, get enough rest and sleep, limit intake of caffeine and alcohol.

- Encourage the patient to express his feeling through laughing, crying etc.
- It is important for the nurse to educate the patient and family members about the physiology of anxiety, early symptoms of anxiety to prevent it from escalating (for example, sweaty palms, racing heart, difficulty concentrating or attending).
- Educate the patient and family about medication (therapeutic dose, frequency of administration, side effects, untoward effects) and the importance of compliance.

- Teach the patient and family to identify stressors and situations that promote or exacerbate anxiety and to avoid them as much as possible.
- Teach the patient and family how to access community resources and support groups, reliable educational sources on the internet.

SUMMARY

So far, we have discussed about

- Somatoform disorder and its types.
- Diagnosis for somatoform disorder.
- Treatment for somatoform disorder.
- Nursing interventions for somatoform disorder.
- Follow up care for neurotic disorders.

APPLIED ASPECTS

• By this class the student nurse will be able to plan care for patient with somatoform disorder.

REFERENCES

• R Sreevani, "A guide to mental health and & psychiatric nursing" 3 rd edition, jaypee publishers.

Niraj Ahuja , "A short text book of psychiatry"
20 th year edition , jaypee publishers .

MUHS EXAM APPEARED QUESTIONS

• Explain somatoform disorder. Enlist types of somatoform disorder.

(SAQ 5 marks)

THANK YOU

ACKNOWLEDGEMENT

Department wishes to acknowledge with thanks

• Efforts of Ms Liji Varghese for making this LRM

Staff of the department for content validation

• MET department for guidance & format validation