

Somatic Symptom Disorders

- Physical complaints without organic basis
- Occur when a person manifests a psychological problem through a physiological (physical) symptom.

Forms:

Conversion Disorder:

Report the existence of severe physical problems with no biological reason. Loss/alteration of physical functioning due to stress. (Associated with Freud)

Illness Anxiety Disorder (hypochondria)

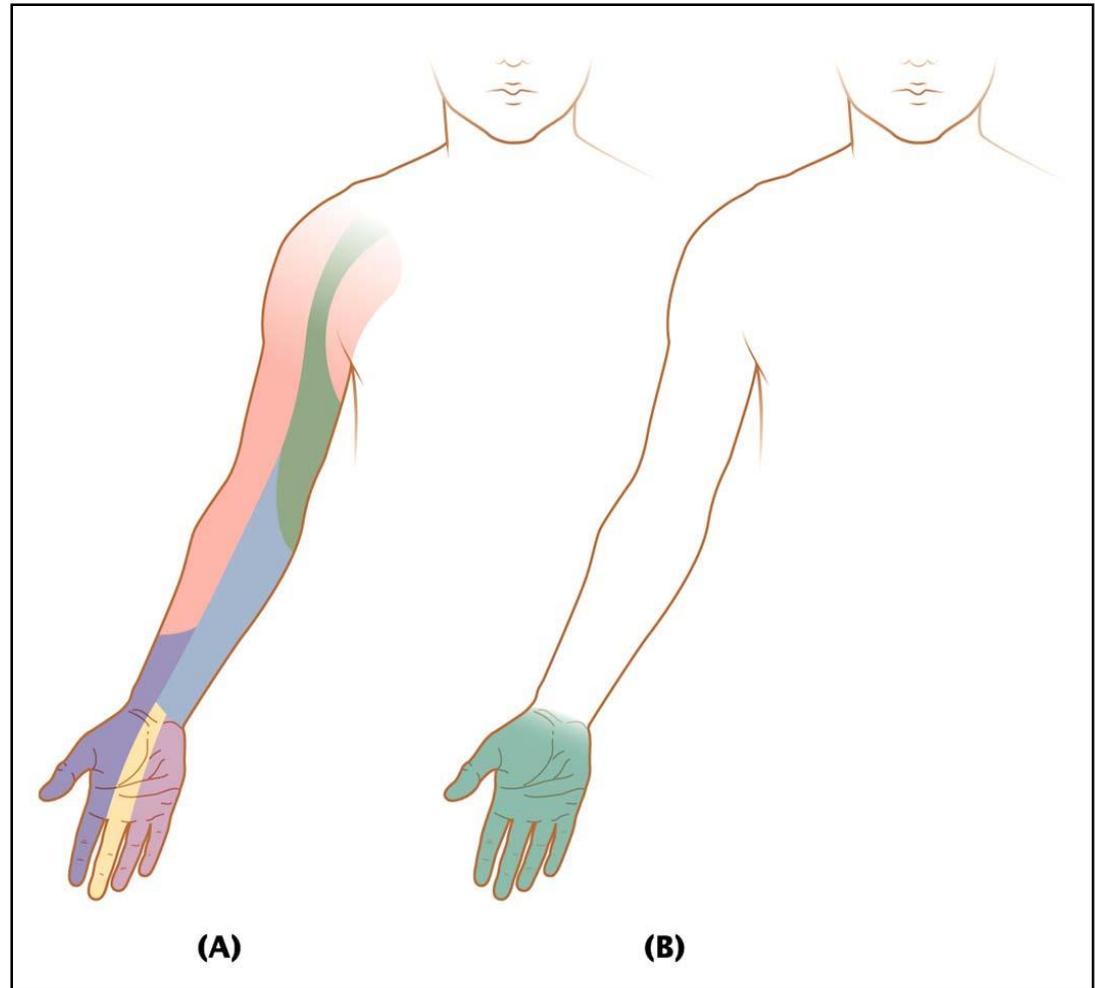
Client is preoccupied with fear that he/she has or will get a serious disease, leading to anxiety. Differs from Somatization due to focus on only 1-2 symptoms, fear they suggest future illness.

Body Dysmorphic Disorder

Preoccupation with imagined or exaggerated defects in physical appearance

Glove Anesthesia

- A conversion disorder in which a person can't feel their hand (B).
- Neurologically this is impossible because the sensory nerves of the hand and arm are organized as shown in (A) rather than (B).



Conversion Disorder



THE NOSE



YOUR SECRET TO A BEAUTIFUL FACE

Your nose is central to the way you feel about your appearance and the way other people first perceive you.

If you are in the slightest way unhappy about it, and feel it detracts from your looks, you will probably always be unhappy about it. So why put up with it any longer when it can so easily be corrected?

Nose reshaping or rhinoplasty, one of the most common of today's conservative cosmetic surgery procedures, involves the reshaping and realignment of your nose so that it is in proportion with the rest of your facial contours.

The latest techniques allow for the reshaping to be carried out internally thus avoiding the possibility of any external marks. The end result is the nose you want, the nose that suits you, and a new confident you.

Our comprehensive range of corrective procedures for women and men includes body breast, face, nose and ear reshaping, eyelid surgery, collagen implants, varicose and thromb vein removal, permanent eyelash line enhancement, baldness reversal and a unique non-surgical treatment for the aging face.

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PLEASE TELEPHONE US ON 0161 274 2494

THE HARLEY MEDICAL GROUP

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Do advertisements affect BDD?

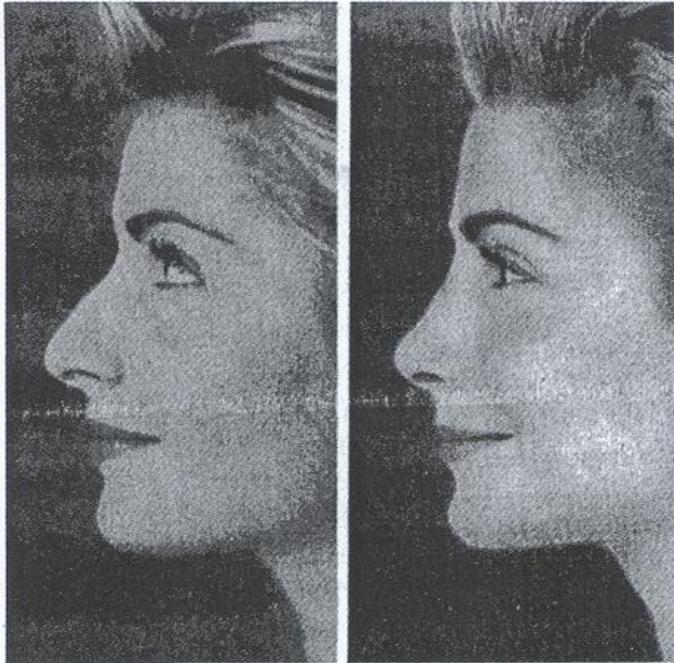
“Your nose is central to the way you feel about your appearance and the way other people first perceive you.”

“If you are in the slightest way unhappy about it, and feel it detracts from your looks, you will probably always be unhappy about it.”

Can you see the difference?

Before.

Happily Ever After.



Once upon a time there was a young lady who had a small problem.

She didn't like her nose. She felt that it kept her from looking and feeling her best. And that bothered her. For years. And years. Until one day she decided to do something about it. So she called New York Plastic Surgery Center for a free consultation.

Call 212.861.4100 Today To Schedule A Free Consultation
Or Receive Our Free Information Booklet.

The plastic surgery procedure she had waited years for took less than an hour. She was home in her own bed the same night. And the result will last a lifetime. Just another story with a happy ending. Except, for this young lady it was really more like a happy beginning.

New York Plastic Surgery, P.C.

800 Fifth Avenue, New York, New York 10021 212.861.4100



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- "Once upon a time there was a young lady who had a small problem. She didn't like her nose..."
- What might be the influence of shows like *The Swan* (Fox), *Extreme Makeover* (ABC), *I Want a Famous Face* (MTV), or *Dr. 90210* (E!)?
- Are pretty and handsome synonymous with attractive?

Body Dysmorphic Disorder



Personality Disorders

Cluster A

Odd and eccentric

Marked by **eccentricity, odd behavior**, not psychosis

Share a superficial similarity with schizophrenia (a milder version)

Cluster B

Dramatic, emotional, or erratic

Being **self-absorbed, prone to exaggerate importance of events**

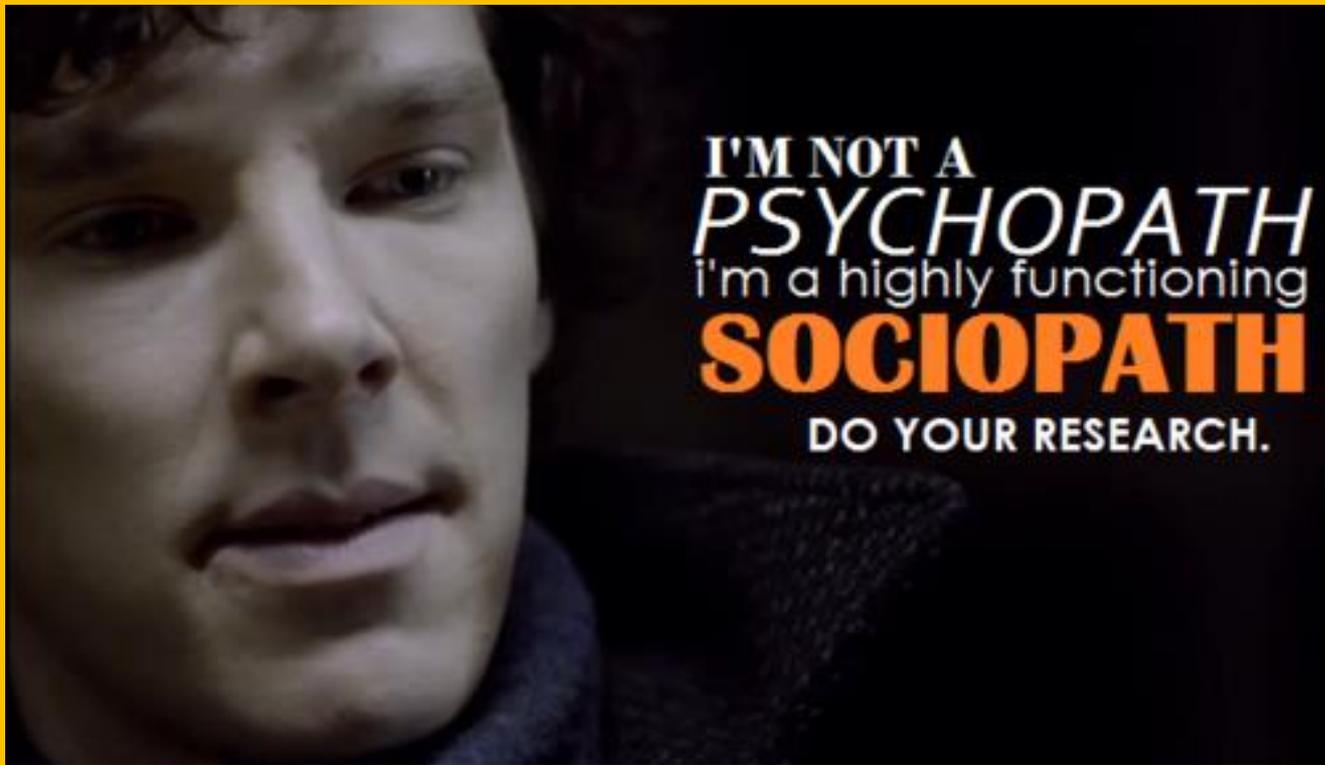
Having difficulty maintaining close relationships.

Often associated with risky behavior, puts self in danger.

Cluster C

Anxious and fearful

People are often **anxious, fearful, and depressed**



Sherlock
Holmes is
neither. Why?

- No one with this disorder freely admits to being one.
- He cares for Watson.
- He cares for Ms. Hudson
- He cares for Irene Adler
- He has a conscience

There is really no distinction between the two anymore.

One can do research and find varying explanations about how the two may differ, but they are inconsistent, and unnecessary to differentiate between, because they are no longer used. What used to be described as sociopathic or psychotic disorders is now known as ***Anti-Social Personality Disorder.***

Antisocial Personality Disorder [APD]

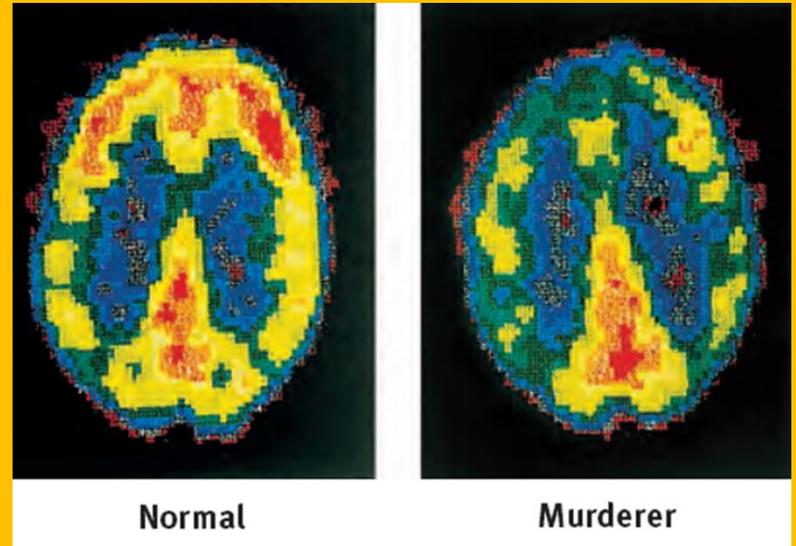
Antisocial personality disorder refers to acting impulsively or fearlessly without regard for others' needs and feelings.

*Criminality is not an essential component of antisocial behavior.
("Sociopath next door")*

Other differences include:

- less amygdala response when viewing violence.
- an overactive dopamine reward-seeking system.

"They glibly rationalize their actions by characterizing their victims as weak and deserving of being conned or stolen from" (Comer, 1997)



- People who commit murder seem to have less tissue and activity in the part of the brain that suppresses impulses.

Antisocial Personality Disorder

- Tend to be skillful at manipulating people.
- Are not distressed by the pain they cause, often perceived as lacking any moral conscience.
- May be able to "fake" emotions to avoid being "found out."
- They tend to lie and steal
- Respond with lower levels of stress hormones in stressful situations.
- May be able to "fake" emotions to avoid being "found out."



Narcissistic Personality Disorder

- Characterized by self-centeredness
- They exaggerate their achievements, expecting others to recognize them as being superior.
- They tend to be choosy about picking friends, since they believe that not just anyone is worthy of being their friend.
- They are generally uninterested in the feelings of others and may take advantage of them.



Obsessive Compulsive Personality Disorder



- Different than OCD
- Characterized by a general psychological inflexibility, rigid conformity to rules and procedures, perfectionism, and excessive orderliness.
- people with OCPD tend to stress perfectionism above all else, and feel anxious when they perceive that things aren't "right".
- OCPD does not include obsessions and compulsions like turning lights on and off 5 times or locking/unlocking a door 10 times.

OCD

It is possible to
have both

OCPD

- May make lists because it may prevent the death of a loved one.
- Usually distressed by having to carry out their rituals.
- Spend a great deal of time engaged in ritualistic behavior.
- Usually seek help due to the psychological stress caused by having to carry out obsessions, or for troubling nature of obsessions
- Severity of OCD may fluctuate over time

- May make lists because list-making is a good way to work efficiently.
- View need to make lists or be organized as necessary or beneficial.
- Usually seek treatment because of the conflict caused between you and family and friends related to your need to have others conform to your way of doing things.
(ie. - those around you are anxious, and require you to seek help.)
- OCPD symptoms are chronic with little change.

Low levels of anxiety would be most characteristic of:

- A. antisocial personality disorder.
- B. dissociative identity disorder.
- C. obsessive-compulsive disorder.
- D. paranoid schizophrenia.