

Mental and behavioural disorders present a different and distinct picture of the world. Some disorders are mild and some are severe. Some last a few weeks and some can last whole life. Some are not even visible without a thorough examination while others are impossible to hide even from the mere observer.

There are currently two widely established systems for classifying mental disorders:

- ✚ Chapter V of **the eleventh International Classification of Diseases** (ICD-11) produced by the World Health Organization (WHO);
- ✚ The **Diagnostic and Statistical Manual of Mental Disorders** (DSM-5) produced by the American Psychiatric Association (APA).

ICD		DSM
<ul style="list-style-type: none"> <li>Produced by Global health Agency Of UN.</li> </ul>	-----	produced by American Psychiatric Association
<ul style="list-style-type: none"> <li>Free and open resource for Public health benefit</li> </ul>	-----	intellectual property of APA
<ul style="list-style-type: none"> <li>For countries and front line Service providers</li> </ul>	-----	Primarily for psychiatrist and psychologist
<ul style="list-style-type: none"> <li>Global, multidisciplinary, multilingual development</li> </ul>	-----	Dominated by US, Anglophone perspective
<ul style="list-style-type: none"> <li>Approved by World Health Assembly</li> </ul>	-----	Approved by APA Board of Trustees and APA Assembly

As you can see both the classification is either for the frontline providers or for professionals. These are really helpful but it will take more of your time and energy so here we will discuss the common mental disorders and we will try to keep it as simple as possible.

## 1. Anxiety Disorder

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Anxiety disorders are a set of mental disorders characterized by significant and uncontrollable feelings of anxiety and fear such that a human well-being, work, and personal performance are severely impaired.

Anxiety may cause physical and cognitive symptoms, such as

- restlessness
- irritability
- easy fatiguability
- difficulty concentrating
- increased heart rate
- chest pain

- abdominal pain and a variety of other symptoms that may vary based on the individual.

There are several types of anxiety disorders, including

- Generalized anxiety disorder
- Specific phobia
- Social anxiety disorder
- Separation anxiety disorder
- Agoraphobia,
- Panic disorder
- Selective mutism.

Treatment helps most people with phobias. Options include medicines, therapy or both. There is tentative evidence to support the use of cognitive behavioural therapy and mindfulness therapy. Treatment options include lifestyle changes, therapy, and medications.

Lifestyle changes includes:

- Exercise, for which there is moderate evidence for some improvement
- regularizing sleep patterns
- reducing caffeine intake
- and stopping smoking.
- Stopping smoking has benefits in anxiety as large as or larger than those of medications.

Psychotherapy:

- Cognitive behavioural therapy (CBT) is effective for anxiety disorders and is a first-line treatment CBT appears to be equally effective when carried out via the internet compared to sessions completed face to face.
- Mindfulness Therapy

Medications:

- First-line choices for medications include SSRIs or SNRIs to treat generalized anxiety disorder, it is not often the best choice and If they are effective, it is recommended that they are continued for at least a year. Stopping these medications results in a greater risk of relapse.
- Buspirone and pregabalin are second-line treatments for people who do not respond to SSRIs or SNRIs.
- there is also evidence that benzodiazepines, including diazepam and clonazepam, are effective.

Since Medications often have some side effects especially with adults, hence they need to be provided carefully if provided at all.

## 2. Behavioural Disorder

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Behavioural disorder involves a pattern of disruptive behaviour in children which stay at least 6 months and cause problems at school, at home and in the community.

Behavioural disorders may involve:

- Inattention
- Hyperactivity
- Defiant behaviour
- Drug activity
- Criminal activity
- Impulsivity

Behavioural disorder includes

- oppositional defiant disorder (ODD)
- conduct disorder (CD)
- Attention deficit hyperactivity syndrome (ADHD)

➤ Risk Factors in children's Behavioural Disorder.

- Gender – boys are much more likely than girls to suffer from behavioural disorders. It is unclear if the cause is genetic or linked to socialisation experiences.
- Gestation and birth – difficult pregnancies, premature birth and low birth weight may contribute in some cases to the child's problem behaviour later in life.
- Temperament – children who are difficult to manage, temperamental or aggressive from an early age are more likely to develop behavioural disorders later in life.
- Family life – behavioural disorders are more likely in dysfunctional families. For example, a child is at increased risk in families where domestic violence, poverty, poor parenting skills or substance abuse are a problem.
- Learning difficulties – problems with reading and writing are often associated with behaviour problems.
- Intellectual disabilities – children with intellectual disabilities are twice as likely to have behavioural disorders.
- Brain development – studies have shown that areas of the brain that control attention appear to be less active in children with ADHD.

➤ Treatment of behavioural disorder in children.

Treatment is usually multifaceted and depends on the particular disorder and factors contributing to it, but may include:

- Parental education – for example, teaching parents how to communicate with and manage their children.
- Family therapy – the entire family is helped to improve communication and problem-solving skills.
- Cognitive behavioural therapy – to help the child to control their thoughts and behaviour.
- Social training – the child is taught important social skills, such as how to have a conversation or play cooperatively with others.
- Anger management – the child is taught how to recognise the signs of their growing frustration and given a range of coping skills designed to defuse their anger and aggressive behaviour. Relaxation techniques and stress management skills are also taught.

- Support for associated problems – for example, a child with a learning difficulty will benefit from professional support.
- Encouragement – many children with behavioural disorders experience repeated failures at school and in their interactions with others. Encouraging the child to excel in their particular talents (such as sport) can help to build self-esteem.
- Medication – to help control impulsive behaviours.

### 3. Eating Disorder

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Eating disorders are when a person starts to overeat, or when someone begins to avoid food. Many eating disorders include overexertion, weight gain, and diet, which can lead to poor eating habits. These behaviours can greatly affect your body's ability to get proper nutrition.

#### ➤ Types of eating disorders.

- Anorexia Nervosa
- Bulimia Nervosa
- Binge-Eating Disorder
- Rumination disorder
- Avoidant/restrictive food intake disorder.

#### 🚩 Anorexia Nervosa

Most people with anorexia nervosa consider themselves to be overweight, even when it is obvious that they are underweight. Efforts to lose weight, even when underweight, can lead to serious health problems, sometimes to the point of starvation.

Anorexia nervosa displays the following symptoms:

- Very thin body (strength)
- The constant pursuit of thinness and unwillingness to maintain a normal or healthy weight.
- The biggest fear of being overweight Perverted body image
- Self-esteem heavily influenced by the ideas of weight and posture
- Denial of serious weight loss
- Lack of menstruation among girls and women Highly restricted food.

Others symptoms may also include:

- Osteoporosis (osteopenia or osteoporosis)
- Blurred hair and nails
- Dry and yellow skin
- Good hair growth throughout the body
- Minor anaemia and muscle weakness and weakness
- Severe constipation
- Low blood pressure, shortness of breath and heart palpitations
- Structural and cardiac damage

- Mental damage
- Multiple organ failure
- A decrease in body temperature, which makes a person feel cold all the time
- Tiredness, laziness, or feeling tired all the time
- Childlessness.



#### Bulimia Nervosa

Bulimia nervosa, in which poor people eat too much (binging) and try to empty their food (vomiting). The cycle of overeating and vomiting occurs anywhere from several times a week to several times a day.

Symptoms include:

- Chronic inflammation and
- Sore throat Swollen glands in the neck and jaw Tooth decay,
- Teeth become more sensitive and decaying due to exposure to stomach acid reflux disorder and other stomach problems
- Intestinal depression
- Irritability due to debilitating trauma
- Severe dehydration due to fluid
- Cleaning Electrolyte imbalances (very low or very high levels of sodium, calcium, potassium and other minerals) can lead to heart attacks.



#### Binge-eating disorder

If you have an eating disorder, you tend to overeat and indulge your appetite. You can eat faster or eat more than you intended, or you may not be hungry, and you may continue to eat even after you are comfortably full.



#### Rumination disorder

it is not caused by a health condition or other eating disorders such as anorexia, bulimia or binge-eating disorder. Food is returned to the mouth without nausea or shutting down, and regurgitation may not be intentional. Sometimes digested food is chewed and then swallowed or spit out.



#### Avoidant/Restrictive food intake disorder

This disease is characterized by a failure to meet your daily diet needs because you have no interest in eating; avoid foods with specific sensory characteristics, such as colour, texture, smell or taste; or you are worried about the effects of the diet, such as fear of choking.



#### PREVENTION

Prevention aims to promote healthy growth before the onset of eating disorders. It is also intended to diagnose eating disorders before it is too late. Children ages 5-7 are aware of cultural messages about body composition and diet. Prevention comes by bringing these issues to light. The following topics can be discussed with young children as well as adults.

- Emotional diet - an easy way to talk about emotional eating is to ask children why they might eat without besides being hungry. Discuss the most effective ways to deal with emotions, emphasizing the importance of sharing your feelings with a trusted adult.

- No teasing - another idea is to emphasize that it isn't wonderful to say hurtful things about other people's body sizes.
- Listen to body - emphasize the importance of listening to the human body. That is, eat when you are hungry (not starving) and stop when you are full (not stuffed). Children understand these ideas accurately.
- Fitness and balance diet - teach children about genetics and body changes. Discuss their fears and hopes for greater growth. Focus on getting stronger and more nutritious.

#### ➤ TREATMENT

Treatment varies according to the type and severity of eating disorders, and usually more than one treatment is used. A variety of behavioural therapies have been developed for eating disorders and have been found to be helpful, and other forms of psychotherapy may also be helpful such as:

- Cognitive behavioural therapy
- Dialectical behaviour therapy
- Family therapy including "conjoint family therapy" (CFT), "separated family therapy" (SFT) and Maudsley Family Therapy.
- Behavioural therapy: focuses on gaining control and changing unwanted behaviours.
- Interpersonal psychotherapy (IPT)
- Cognitive Emotional Behaviour Therapy (CEBT)
- Art therapy
- Nutrition counselling and Medical nutrition therapy.

## 4. MOOD DISORDER

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Mood disorder is a type of mental disorder where persistent disturbance of mood is the underlying factor.

#### ➤ Most common types of mood disorder :

- Depression
- Bipolar disorders
- Substance-induced
- Due to another medical condition
- Not otherwise specified

Here, we are going to talk about two of the most common Mood disorder:

#### Depression

it is Persistent sadness and a lack of interest or pleasure in activities that were previously rewarding or exciting (anhedonia).

Depression is different from normal mood swings and short-term emotional responses to the challenges of daily life.

❖ Key facts:

- It has affected more than 264 million worldwide.
- It is predicted to become the no.1 killer by 2030.
- Women are more prone to depression than men.
- It is the leading cause of disability for the age 15-44 years.
- Treatment is available for mild , moderate and severe depression.

❖ Symptoms:

Although depression may occur only once in your life, people may have multiple episodes. During these episodes, symptoms occur almost all day, almost daily and may include

- Sadness and hopelessness
- Loss of interest or pleasure in small daily activities
- Change in weight (increased cravings or lose appetite)
- Difficulty sleeping or oversleeping
- Tiredness and lack of energy
- Feelings of worthlessness
- Trouble thinking, concentrating, or remembering things.
- Thoughts of death or suicide

❖ Prevention:

In our daily life we go through number of problems, it is not that every problem can make you depressed but certainly some life event can. So we should prepare ourself for the worst.

*“An ounce of prevention is worth a pound of cure.”*

- Building Social Interaction
- Enough sleep
- Exercise
- Gratitude journaling
- Sharing
- Focusing on meaningful work

## Bipolar Disorder

Bipolar disorder is a disorder characterized by changes in a person's mood, energy, and ability to work. People with bipolar disorder experience severe emotional distresses that often occur during different times of the day and weeks, called episodes of mood. These emotional episodes are classified as manic / hypomanic (abnormal or irritating mood swings) or depression (sad state). People with bipolar disorder often have periods of neutrality.

Bipolar disorder is more common in families: 80 to 90 percent of people with bipolar disorder have relatives with bipolar disorder or depression. There are two phases in bipolar disorders maniac and depressive/hypomaniac.

The manic phase is characterised by:

- Extreme happiness, hopefulness, and excitement
- Agitation
- Rapid speech
- Poor concentration and judgment
- Increased energy
- Less need for sleep
- Unusually high sex drive
- Setting unrealistic goals
- Paranoia

The depressive phase may include:

- Sadness and crying
- Feelings of hopelessness, worthlessness, and guilt
- Loss of energy
- Loss of interest or pleasure in everyday activities
- Trouble concentrating and making decisions
- Irritability
- Need for more sleep or sleeplessness
- Change in appetite
- Weight loss/gain
- Suicidal thoughts and attempts at suicide

## ➤ COMPLICATIONS

If timely treatment is not given, bipolar disorder can lead to:

- Broken and troubled relationships, both inside and outside the home
- Poor performance at school or work
- Alcohol and drug abuse
- Financial problems
- Suicide thoughts and attempts



➤ TREATMENT

Medications:

- Mood Stabilizers.
- Antipsychotic drugs
- Antidepressants
- Antianxiety Drugs

Therapy:

- Psychotherapy: Interpersonal and social rhythm therapy, cognitive behavioural therapy, psychoeducation and family-focused therapy are used.
- Electroconvulsive therapy (ECT): Passing mild electrical current to the brain to alter its chemistry and functioning. Usually given in severe cases.
- Transcranial magnetic stimulation (TMS): Applying a magnetic field to the brain to alter its functions; still being tested. Usually given in severe cases.

## 5. Psychotic Disorder



Mental disorders characterised by disconnection from reality which results in strange behaviour often accompanied by disturbances of thought (excessive suspiciousness, guilt, etc) and perception (hearing voices, seeing things, feeling things, etc.).

➤ Key facts:

- More than a million cases a year in India.
- Common for age 18-35
- It can last for several years or last a lifetime.

➤ Types:

- Schizophrenia (most common)
- Brief Psychotic Disorder
- Delusional Disorder

🌈 Schizophrenia:

Mental disorders characterized by delusion, hallucinations, disorderly thoughts, speech and behaviours.

❖ Key facts:

- About 10% of persons with schizophrenia die by suicide
- 30% of patients diagnosed with this disorder had attempted suicide at least once during their lifetime.

- Schizophrenic illness reduces an affected individual's lifespan by an average of 10 years.

#### ❖ Symptoms:

The symptoms may vary with the individuals but the most common ones are mentioned below:

- Delusion
- Hallucinations and illusions
- Disordered thinking
- Disordered behaviour
- Flat affect- lack of emotional expression
- Agitation
- Inappropriate reactions
- Phobia
- Lack of pleasure or interest in activities
- Lack of motivation to do anything
- Decreased speech output

#### ❖ Causes:

There could be various causes of schizophrenia although the actual causes are still not fully understood by professionals some common are defined such as:

- Brain chemistry:
  - Abnormal functioning of neurotransmitters such as dopamine can cause schizophrenia.
- Heredity:
  - Schizophrenia tends to run in families. If a parent has the disorder, the offspring are susceptible to the disease.
- Abnormality in the brain:
  - Abnormalities such as shrinkage in brain, or circuitry dysfunction can cause schizophrenia.
- Complications during pregnancy and birth:
  - Chances of a child getting Schizophrenia are increased by infection or malnutrition during pregnancy and complications during birth such as brain injury.

#### ❖ Treatment:

There are no definite prevention measure but. However, early identification and treatment helps to control the symptoms. The treatment include *medication & psychotherapy*.

## MEDICATION

- Antipsychotics Drugs

## THERAPY

- Psychotherapy
- Electroconvulsive therapy
- Family counselling

## SPECIALIST TO CONSULT

- Psychiatrist
- Psychologist

## Brief Psychotic Disorder:

BPD is characterized by a sudden onset of psychotic symptoms, which may include delusions, hallucinations, irregular speech or behaviour, or catatonic behaviour.

### ❖ Key Facts:

- 9% of individuals who experience a psychotic episode are diagnosed with brief psychotic disorder.
- The average age that adults are first diagnosed with this disorder is age 30.
- women are two times more likely than men to suffer from a brief psychotic episode.

### ❖ Symptoms:

- Disorganized speech or not willing to speak to anyone
- Delusion (false perception about what has happened)
- Hallucination (hearing or seeing things that are not real)
- Illogical, confused thoughts and actions
- Major change in normal behaviour
- Staying still or sitting in a particular posture for long hours (catatonia)
- Emotional turmoil or confusion

### ❖ Causes:

The exact cause of brief psychotic disorder is not known. But there are some common factors which are mentioned by the professionals are:

- Genetics
- Major stress or trauma
- Childbirth
- A previous diagnosis of personality disorder or mood disorder

#### ❖ Treatment:

Certain BPD treatments can help reduce symptoms, teach coping strategies, and aid in recovery. These treatments include individual and family or group treatment, medication, and, in extreme cases, temporary hospitalization.

#### MEDICATION:

- Antipsychotics
- Tranquilizer's agent

#### THERAPY

- Cognitive behavioural therapy (CBT)
- Cognitive enhancement therapy (CET)
- Acceptance and commitment therapy (ACT)
- Family and group therapy