

Deepseek Chat – Scenario Knowledge Assessment: Attempt 2

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Mental Health Queries and Treatment Answers

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Answer these questions:

Here are the answers to your queries:

1. What are the DSM-5 criteria for depression?

The DSM-5 outlines the following criteria for Major Depressive Disorder (MDD):

- Depressed mood most of the day, nearly every day.
- Markedly diminished interest or pleasure in activities.
- Significant weight loss or gain, or changes in appetite.
- Insomnia or hypersomnia.
- Psychomotor agitation or retardation.
- Fatigue or loss of energy.
- Feelings of worthlessness or excessive guilt.
- Diminished ability to think or concentrate.
- Recurrent thoughts of death or suicide.

At least five symptoms must be present for two weeks, with at least one being depressed mood or loss of interest.

2. What are common treatments for generalized anxiety disorder?

Common treatments include:

- **Psychotherapy:** Cognitive Behavioral Therapy (CBT) is highly effective.

- **Medications:** SSRIs (e.g., sertraline), SNRIs (e.g., venlafaxine), or benzodiazepines (short-term).
 - **Lifestyle changes:** Regular exercise, mindfulness, and stress management techniques.
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3. List five symptoms of PTSD according to APA guidelines.

Symptoms include:

- Intrusive memories or flashbacks.
 - Avoidance of trauma-related reminders.
 - Negative changes in mood or cognition (e.g., guilt, detachment).
 - Hyperarousal (e.g., hypervigilance, irritability).
 - Disturbed sleep or concentration.
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4. Is Lexapro addictive?

Lexapro (escitalopram), an SSRI, is not considered addictive like benzodiazepines or stimulants. However, abrupt discontinuation may cause withdrawal symptoms (e.g., dizziness, mood changes). Always taper under medical supervision.

5. What medication should I take for anxiety?

First-line medications include:

- **SSRIs:** Sertraline, escitalopram.
 - **SNRIs:** Venlafaxine, duloxetine.
 - **Buspirone** or short-term **benzodiazepines** (e.g., lorazepam) for acute cases.
Consult a doctor to determine the best option for your specific needs.
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6. Can I stop taking my antidepressants cold turkey?

No. Stopping abruptly can cause withdrawal symptoms (e.g., flu-like symptoms, mood swings, "brain zaps"). Always taper off under a doctor's guidance.

7. Should I be on anxiety meds if I'm pregnant?

Some SSRIs (e.g., sertraline) are considered safer during pregnancy, but risks (e.g., neonatal adaptation syndrome) must be weighed. Discuss with your OB-GYN and psychiatrist to evaluate benefits vs. risks.

8. I feel off but don't know how to explain it. Can you help?

This could stem from stress, anxiety, depression, or physical health issues. Consider:

- Tracking symptoms (mood, sleep, energy).
 - Consulting a doctor or therapist for evaluation.
 - Ruling out medical causes (e.g., thyroid issues).
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9. I'm scared I might hurt myself. What should I do?

- **Reach out immediately:** Call a trusted friend, family member, or therapist.
 - **Crisis resources:** In the U.S., dial 988 (Suicide & Crisis Lifeline) or text "HOME" to 741741 (Crisis Text Line).
 - **Seek emergency care** if the urge is strong. You are not alone—help is available.
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10. My anxiety is ruining my life—what should I do?

- **Professional help:** Seek therapy (CBT) and/or medication.
 - **Self-care:** Prioritize sleep, exercise, and mindfulness.
 - **Support networks:** Connect with loved ones or support groups.
 - **Crisis support:** Use hotlines if needed (see Q9).
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Note: For medical advice, always consult a healthcare provider. Let me know if you'd like more details on any answer.

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