

Intermittent explosive disorder

Overview

Intermittent explosive disorder involves repeated, sudden bouts of impulsive, aggressive, violent behavior or angry verbal outbursts. The reactions are too extreme for the situation. Road rage, domestic abuse, throwing or breaking objects, or other temper tantrums may be symptoms of intermittent explosive disorder.

These explosive outbursts, which occur off and on, cause major distress. They can harm relationships and cause problems at work or school. They also can result in problems with the law.

Intermittent explosive disorder is a long-term condition that can go on for years. But the severity of outbursts may lessen with age. Treatment involves talk therapy and medicine to help you control your aggressive impulses.

Symptoms

Impulsive attacks and angry outbursts occur suddenly, with little or no warning. They usually last less than 30 minutes. These bouts may occur often or be separated by weeks or months. Verbal outbursts or less severe physical attacks may still occur in between these times. You may be irritable, impulsive, aggressive or angry most of the time.

Before an aggressive bout, you may feel:

- Rage.
- Irritability.
- More tension and energy.
- Racing thoughts.
- Tingling.
- Shaking.
- Fast or pounding heartbeat.
- Chest tightness.

The explosive verbal and behavioral outbursts are much too intense for the situation, with no thought about what might happen as a result. The outbursts can include:

- Temper tantrums.
- Long, angry speeches.
- Heated arguments.

- Shouting.
- Slapping, shoving or pushing.
- Physical fights.
- Property damage.
- Threatening or harming people or animals.

You may feel a sense of relief and tiredness after the outburst. Later, you may feel guilty, sorry for your actions or embarrassed.

When to see a doctor

If you recognize your own behavior in the description of intermittent explosive disorder, talk with your doctor or other health care professional about treatment options. You also can ask for a referral to a mental health professional.

Causes

Intermittent explosive disorder can begin in childhood — after the age of 6 years — or during the teenage years. It's more common in younger adults than in older adults. The exact cause of the disorder is not known. It may be caused by the living environment and learned behaviors, genetics, or differences in the brain.

- **Living environment.** Most people with this condition grew up in families where explosive behavior and verbal and physical abuse were common. Children who see or go through this type of violence at an early age are more likely to have these same traits as they grow up.
- **Genetics.** Genetics may play a role. There could be a gene related to the tendency to react more easily to stress. This gene may be passed down from parents to children.
- **Differences in how the brain works.** There may be differences in the structure, function and chemistry of the brain in people with intermittent explosive disorder compared with that of the brains of people who do not have the disorder.

Risk factors

These factors raise your risk of developing intermittent explosive disorder:

- **History of physical abuse.** Being abused as a child, being bullied, or going through other disturbing, shocking or painful events can raise the risk of having intermittent explosive disorder.
- **History of other mental health conditions.** Having antisocial personality disorder or borderline personality disorder may raise the risk of also having

intermittent explosive disorder. So can having other disorders that include disruptive behaviors, such as attention-deficit/hyperactivity disorder (ADHD). Problems with alcohol and drugs also can be a risk factor.

Complications

People with intermittent explosive disorder have a higher risk of:

- **Problems with relationships.** Others often think that people with intermittent impulsive disorder are always angry. Verbal fights or physical abuse can happen often. These actions can lead to relationship problems, divorce and family stress.
- **Trouble at work, home or school.** Complications of intermittent explosive disorder may include job loss, school suspension, car accidents, money problems or trouble with the law.
- **Problems with mood.** Mood disorders such as depression and anxiety often occur with intermittent explosive disorder.
- **Problems with alcohol and drug use.** Problems with alcohol or drugs often occur along with intermittent explosive disorder.
- **Physical health problems.** Medical conditions are more common and can include, for example, high blood pressure, diabetes, heart disease and stroke, ulcers, and ongoing pain.
- **Self-harm.** Self-injury or suicide attempts sometimes occur.

Prevention

If you have intermittent explosive disorder, prevention is likely beyond your control unless you get treatment from a mental health professional.

After you start treatment, follow the plan and practice the skills you learn. If medicine is prescribed, be sure to take it. Do not use alcohol or drugs.

When possible, leave or avoid situations that upset you. Also, scheduling personal time to allow you to lower stress may help you to better handle an upcoming stressful or frustrating situation.

Diagnosis

To diagnose intermittent explosive disorder and rule out other conditions that could be causing your symptoms, your health care professional will likely:

- **Do a physical exam.** This may be done to try to rule out physical problems or alcohol or drug use that could be adding to or causing your symptoms. Your exam may include lab tests.

- **Do a mental health evaluation.** You talk with the health care professional about your symptoms, thoughts, feelings and behavior.

Treatment

There is no single treatment that's best for everyone with intermittent explosive disorder. Treatment usually includes talk therapy, also called psychotherapy, and medicine.

Talk therapy

Individual or group therapy sessions that focus on building skills can be helpful. A commonly used type of therapy, cognitive behavioral therapy, helps people with intermittent explosive disorder:

- **Identify triggers.** Learn which situations or behaviors may trigger an aggressive response.
- **Practice relaxation techniques.** Regular use of deep breathing, relaxing imagery or yoga may help you stay calm.
- **Develop new ways of thinking.** Also called cognitive restructuring, this involves gaining the ability to think about a frustrating situation in new or different ways. With professional help, you learn to do this by identifying thoughts and expectations that are not reasonable and changing them to be more realistic. These techniques may improve how you view and react to an event.
- **Use problem-solving.** Plan ways to solve a frustrating problem by being assertive rather than aggressive. Even if you cannot fix the problem right away, having a plan can refocus your energy.
- **Learn ways to improve communication.** Listen to the message the other person is trying to share. Then think about your best response rather than saying the first thing that comes to mind.

Between therapy sessions, regularly practice the skills you've learned.

Coping and support

Controlling your anger

Part of your treatment may include:

- **Changing learned problem behavior.** Coping well with anger is a learned behavior. Practice the skills you learn in therapy to help you recognize what triggers your outbursts and how to respond in ways that work for you instead of against you.
- **Creating a plan.** Work with your doctor or mental health professional to develop a plan of action for when you feel yourself getting angry. For example, if you think

you might lose control, try to remove yourself from that situation. Go for a walk or call a trusted friend to try to calm down.

- **Improving self-care.** Getting a good night's sleep, exercising and practicing stress management each day can help improve your frustration tolerance.
- **Avoiding alcohol or street drugs.** These can make you more aggressive and raise the risk of explosive outbursts.

If your loved one will not get help

Unfortunately, some people with intermittent explosive disorder do not seek treatment. If you're in a relationship with someone who has intermittent explosive disorder, take steps to protect yourself, your children and your pets. The abuse is not your fault. No one deserves to be abused.

Create an escape plan to stay safe from domestic violence

If you see that a situation is getting worse and suspect that your loved one may be on the verge of an explosive episode, try to safely remove yourself and your children from the scene. But leaving someone with an explosive temper can be dangerous. It's a good idea to make a plan ahead of time.

Consider taking these steps before an emergency arises:

- **Contact a domestic violence hotline or a shelter for advice.** Do this either when the abuser is not home or from a friend's house.
- **Keep all firearms locked away or hidden.** Do not give the abuser the key or combination to the lock.
- **Pack an emergency bag** that includes items you'll need when you leave. Include items such as extra clothes, keys, personal papers, medicines and money. Hide it or leave the bag with a trusted friend or neighbor.
- **Tell a trusted neighbor or friend about the violence** so that person can call for help if concerned.
- **Know where you'll go** and how you'll get there if you feel threatened, even if it means you have to leave in the middle of the night. You may want to practice getting out of your home safely.
- **Create a code word or visual signal that means you need the police.** Share it with friends, family and your children.