

Disruptive, Impulse-Control and Conduct Disorders

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DISRUPTIVE, IMPULSE-CONTROL AND CONDUCT DISORDERS

- Disruptive, Impulse-control and Conduct disorders include conditions involving problems in the self-control of emotions and behavior.
- These disorders can cause people to behave angrily or aggressively toward people or property.

OPPOSITIONAL DEFIANT DISORDER

Diagnostic criteria:

A pattern of angry/mood emotional and behaviour symptoms that last at least six months.

1. DIAGNOSTIC CRITERIA

Angry and irritable mood

- Often losses temper.
- It often touchy or easily annoyed.

Argumentative or Defiant behaviour

- Often argues with adults or people in authority.
- Often blames other for his or her mistake.

ODD can vary in severity:

➤ *Mild:*

Symptoms occur only in one severity such as at home, school and work.

➤ *Moderate:*

Some symptoms occur in at least two severity.

➤ *Severe:*

Some symptoms occur in three severity.

2. SYMPTOMS OF ODD

- ▶ Throwing repeated temper tantrums.
- ▶ Excessively arguing with adults.
- ▶ Actively refusing to comply with requests and rules.

3. ETIOLOGY/CAUSES

Genetics:

A child's natural disposition or temperament and possibly neurobiological difference in the way nerves and brain function.

Environment:

Problems with parenting that may involve a lack of supervision, inconsistent or harsh discipline or abuse or neglect.

❖ Risk Factors

Possible risk factors for ODD include:

- ▶ Temperament
- ▶ Parenting issues
- ▶ Other family issues
- ▶ Environment

4. INTERVENTION

Positive parenting and early treatment can help improve behaviour and prevent the situation from getting worse. The treatment of ODD may include:

- ▶ Parent training.
- ▶ Parent-child interaction therapy (PCIT).
- ▶ Individual and family therapy.
- ▶ Cognitive problem-solving training.
- ▶ Social skills training.

INTERMITTENT EXPLOSIVE DISORDER

- Intermittent explosive disorder is an impulse-control disorder characterized by sudden episodes of unwarranted anger. This disorder is typified by hostility, impulsivity and recurrent aggressive outbursts.

1. DIAGNOSTIC CRITERIA

- ▶ Recurrent outbursts that demonstrate an inability to control impulses.
- ▶ Aggressive behaviour is grossly disproportionate to the magnitude of the psychosocial stressors.
- ▶ The individual must be at least six year old.
- ▶ The outbursts cause distress or impairment of functioning, or lead to financial or legal consequences.

2. SYMPTOMS

Aggravated episode may be

- ▶ Rage
- ▶ Irritability
- ▶ Increase energy
- ▶ Chest tightness
- ▶ Tremore
- ▶ Tingling

The explosive verbal and behavioural outbursts may include

- ▶ Temper tantrums
- ▶ Tirades
- ▶ Heated arguments
- ▶ Physical fights
- ▶ Shouting
- ▶ Slapping or pushing

3. ETIOLOGY/CAUSES

Cause of intermittent explosive disorder following

- ▶ Environment
- ▶ Genetic
- ▶ Difference in how the brain works

❖ Risk Factors

Factors include in intermittent explosive disorders

- ▶ History of physical abuse.
- ▶ History of the other mental health disorder.

4. INTERVENTION

The intervention or treatment of intermittent explosive disorders are following:

- ▶ Stick with your treatment.
- ▶ Practice relaxation techniques.
- ▶ Cognitive restructuring.
- ▶ Use problemt-solving.
- ▶ Learn ways to improve your communication.
- ▶ Change your environment.

CONDUCT DISORDER

- Conduct disorder is a mental disorder diagnosed in childhood or adolescence that presents itself through a repetitive and persistent pattern of behaviours in which basic rights of others.

1. DIAGNOSTIC CRITERIA

- ▶ As with adults mental illnesses in childrens are diagnosed based on signs and symptoms that suggest a prticular problem.

2. SYMPTOMS

- ▶ Aggressive behaviour
- ▶ Destructive behaviours
- ▶ Deceitful behaviour
- ▶ Violation of rules

3. ETIOLOGY/CAUSE

The cause of conduct disorder is following

- ▶ Biological
- ▶ Genetic
- ▶ Psychological
- ▶ Social

4. INTERVENTION

Treatment for conduct disorder is based on many factors including child age, symptoms as well as child ability to participate in specific therapies. Treatment usually consists of a combination of following

- ▶ Psychotherapy
- ▶ Medication

PYROMANIA

- When an interest or fascination with fire deviate from healthy to unhealthy people may instantly say its Pyromania.

1. DIAGNOSTIC CRITERIA

- ▶ Porposefully set fires on more than one occasion.
- ▶ Experience tension before setting fire and a release after.
- ▶ Derive pleasure from setting or seeing fires.

2. SYMPTOMS

- ▶ An uncontrollable urge to set fires.
- ▶ Pleasure, arush, or relief when setting or seeing fires.
- ▶ Tension or excitement around fire starting.

3. CAUSES OF PYROMANIA

- ▶ Having a diagnosis of another mental health condition, such as a conduct disorder.
- ▶ A history of abuse or neglect.
- ▶ Misuses of alcohol or drugs.

4. INTERVENTION

Options include:

- ▶ Cognitive behavioural therapy.
- ▶ Anti-Depressants.
- ▶ Anti-anxiety drugs.
- ▶ Anti-epileptic medication.

KLEPTOMANIA

- Kleptomania is the recurrent inability to resist urges to steal items that you generally don't really need and that usually have little value.

1. DIAGNOSTIC CRITERIA

- ▶ Kleptomania is diagnose based on your signs and symptoms.

2. SYMPTOMS

- ▶ Inability to resist powerful urges to steal items that you don't need.
- ▶ Feeling terrible guilt, remorse.
- ▶ Feelings pleasure, relief or gratification while stealing.

3. ETIOLOGY/CAUSES

- ▶ Addictive disorder.
- ▶ The brain opioid system.
- ▶ Problem with naturally occurring brain chemical fault serotonin.

4. INTERVENTION

- ▶ Kleptomania is treated by medication.