

Assessment 2

Student name: Maria-Cristina Ilie

Student ID: 2008191

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Lecturer name: Bianca Sanfilippo

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Introduction

Mental disorders can be defined as clinical mental disturbances diagnosed in an individual's cognition, behaviour and emotional control (Huang *et al.*, 2019). The word psychopathology can be defined as the process of diagnosis of a mental disorder or behaviour of an individual (Wright and Woods, 2020). The study will be dealing with a critical examination of the classification, diagnosis, measurements of rehabilitation and treatment of three mental disorders which are general anxiety disorder, schizophrenia and Autism. Each of the mental disorders will be explained in detail in the study by understanding the general definition, classification, rates and prevalence of the disorder in the people in the UK and the global population. The causes, signs and symptoms of the disease are also mentioned in the study. The diagnosis and current treatment of the issue will be mentioned in the study. The recommendations and principles of care for people with the mentioned mental disorders will be provided in the study.

General anxiety disorder

What is generalised anxiety disorder?

Generalised anxiety disorder can be defined as a mental condition of an individual when they are unable to control their emotions in solving issues and daily life problems. This is seen to be lasting for more than 6 months and should be considered a health condition with rising intensity.

Classification of GAD within ICD-10

Generalised anxiety disorder is classified under "F40-F48 Neurotic, stress-related and somatoform disorders". Gad is under F41.1

People suffering from a general anxiety disorder in the UK.

People suffering from general anxiety disorder are seen to be rising with the changing social conditions. According to large population-based surveys, around 33.7% of the population is seen to suffer from this disorder once in a lifetime (Gov, 2022). According to Champion health (2022), 6 out of 100 people in the UK are seen to be suffering from the disorder. In 2013, more than 8.2 million cases of anxiety in the UK were seen in which women are seen as twice as likely to be found positive for this disorder (Mental health, 2022).



Work-related Stress, depression or anxiety in Great Britain

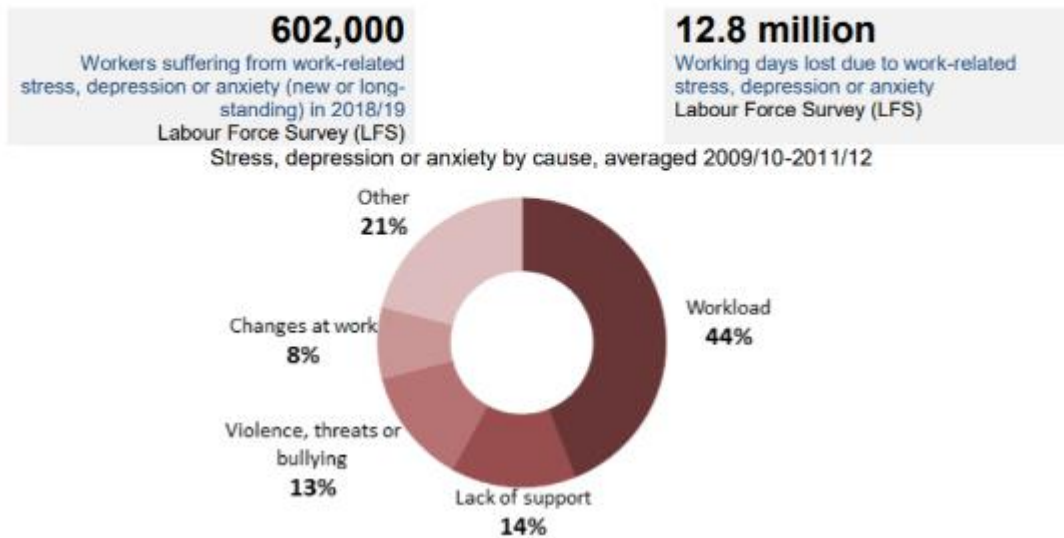


Figure 1: Rates of anxiety in working people in the UK

(Source: HSE, 2022)

Causes of anxiety (Aetiology)

The major causes of this disorder are seen to be coming from multiple sources. It can be carried in the genes of the parents. This disorder is seen to be arising from past experiences of mental stress and trauma such as bullying, child abuse, domestic violence and many more. Other diseases can also give rise to mental disorders such as painful long-term health conditions. General anxiety disorder is also seen to be induced by the use of drugs and excessive consumption of alcohol (NHS, 2022). The disorder is also seen to be arising with the social pressure individual experiences. The feeling of being left over, heartbreaks and more can also add to the issues of generalised anxiety disorder in people in the UK.

Signs and Symptoms

There are multiple signs and symptoms of anxiety. The identified signs and symptoms of the mental disorder are as follows.

Restlessness: People suffering from GAD can experience restlessness in their daily lives. People suffering from anxiety cannot stay still for the results or the outcome of some activity.

Sense of fear or dread: People with generalised anxiety disorder are seen to be experiencing a sense of fear or dread in their lives.

Difficulty in concentration: People with anxiety are seen to be having a hard time concentrating on their daily chores in their lives.

When anxiety can be diagnosed

Mental disorders are tough to diagnose as there can be multiple causes of the disorder. According to the NHS (2022), a generalised anxiety disorder can be difficult to diagnose. However, the disease can be identified and diagnosed with the provided processes.

Blood test: With the help of the blood test, healthcare professionals can identify the physiological condition of the patient. The blood test can identify the conditions such as anaemia which is a deficiency of iron and vitamin B 12. The excessive amount of hormones produced by the thyroid, that is, the condition of hyperthyroidism can cause the condition of anxiety.

Physical examination and psychological sessions: The examinations and psychological sessions can help healthcare professionals to identify the issue of anxiety in a patient.

Current treatments (give an evaluation = positive and negative). Divide the treatments according to the severity

The condition of anxiety can be treated with the help of cognitive behavioural therapy (CBT) which can support the process of handling a patient suffering from the condition of anxiety. With the help of the CBT test, one can identify the changes in the condition of people suffering from anxiety. The score of the patient is seen as 11 out of 21 which is showing moderate anxiety.

For the treatment of the mental disorder, the Generalised Anxiety Disorder Questionnaire GAD –7 can be used to understand the condition and plan to provide treatment to the patient (refer to Appendix A).

According to Zweerde *et al.* (2019), the use of cognitive behaviour therapy can support the treatment of patients with anxiety as it supports both short-term and long-term care. The condition can be cured with the help of the combined use of CBT and applied relaxation. Contradicting it Waller *et al.* (2020), states that the condition of the patient can get worse with the passage of time till the use of applied relaxation is used after ~2 months of treatment.

Measurements of rehabilitation. These are all the tools to chart progress during the rehabilitation process/treatments and to check the effectiveness of the treatments provided.

The measurement of rehabilitation of the mental disorder of generalised anxiety can be done with the help of the Generalised Anxiety Disorder Questionnaire GAD –7 to understand the condition and plan to provide treatment to the patient (refer to Appendix A).

Recommendations for improvement of anxiety (Complementary therapies)

The recommendations for improvement of generalised anxiety disorder are mentioned as follows.

Keep physically active such as yoga: This can support people with anxiety to suppress it as physical activities can regulate hormone regulations supporting the mental health of women (Shohani *et al.*, 2018).

Avoiding alcohol and recreational drugs: Avoiding alcohol and drugs can support the mental stability and cognition of the individual. This can improve the condition of anxiety.

Using stress management and relaxation techniques: This can highly improve the condition of an individual suffering from anxiety. As stress is one of the major inducers of anxiety, managing it can reduce anxiety.

These recommendations can support people with anxiety and help them in curing the condition.

Principles of care for people with a generalised anxiety disorder (GAD) (NICE)

A proper care principle for people with a generalised anxiety disorder is provided in the publications of the anxietyUK. According to anxietyUK (2022), the principles of providing care undergo multiple stages. The stages are mentioned below.

- Building a better relationship with the people suffering from the disorder.
- Providing information and treatment methods to the people suffering from the disease.
- Providing low-intensity psychological interventions and moving to high intensity such as CBT and applied relaxation.
- Uses of highly specialised treatment which includes uses of drugs and psychological treatment (AnxietyUK, 2022).

Similarly, NICE has provided guidelines which can support patients with generalised anxiety disorder. The guidelines from NICE carry similar steps as providing low-intensity intervention, high-intensity intervention and use of drugs (NICE, 2022).

Schizophrenia

Definition

Schizophrenia is a severe chronic mental disorder which can affect the way a person is thinking, acting and expressing emotions (Ripke *et al.*, 2020). There are around 24 Million patients in the world with schizophrenia which is around 0.32% of the total global population (WHO, 2022). Moreover, almost 1% of the people in the UK suffer from schizophrenia which covers around 220,000 people (NHS, 2022). Both males and females are seen to be having this disease at nearly equal rates (Gov, 2022).

classification

“Schizophrenia ICD –10 is classified as a schizotypal and delusional disorder (F20-F29).”

Causes (Aetiology)

Schizophrenia is seen to be arising from multiple sources which are as follows.

Genetics: The disease of schizophrenia can be induced by genetic crossing overs and also can be carried from the parents to the offspring.

Restricted brain development: The disease can also arise from the abnormal brain development of the individual (NHS, 2022).

“The exact cause of schizophrenia is not fully understood, but it is believed to be the result of a combination of genetic, environmental, and brain chemistry factors. Research suggests that an individual's genetic makeup may make them more susceptible to developing schizophrenia, and certain environmental factors, such as exposure to stress or certain infections, may also increase the risk of developing the disorder”. Abnormalities in brain chemistry, such as an imbalance of certain chemicals called neurotransmitters, may also play a role in the development of schizophrenia.

Signs/Symptoms

“Schizophrenia is a chronic and severe mental disorder that affects how a person thinks, feels, and behaves. The signs and symptoms of schizophrenia can vary from person to person”, but generally include:

Delusions: False beliefs that are not based in reality

Hallucinations: Seeing, hearing, or sensing things that are not there

Disorganised thinking: Struggling to organise thoughts and speak clearly

Disorganised behaviour: Struggling to carry out everyday activities or perform basic self-care (Mayoclinic, 2022).

Negative symptoms: Lack of motivation, emotion, or expression

Cognitive symptoms: Difficulty with memory and concentration

It's important to note that everyone experiences these symptoms differently and to a different degree. It's also important to seek help from a mental health professional if you or someone you know is experiencing these symptoms (NHS, 2022).

Diagnosis

The diagnosis of schizophrenia is typically made by a mental health professional, such as a psychologist or psychiatrist, based on a thorough evaluation of an individual's symptoms, behaviours, and medical history.

To diagnose schizophrenia, a mental health professional will typically use a combination of methods, including

Physical examination: To rule out other potential causes of the individual's symptoms, such as a medical condition or the use of certain medications.

Psychological assessment: To evaluate the individual's thoughts, feelings, and behaviours, as well as their family and personal history (Mayoclinic, 2022).

Laboratory tests: To rule out other potential causes of the individual's symptoms, such as drug abuse or a medical condition.

Diagnostic criteria: The mental health professional will consider whether the individual meets the diagnostic criteria for schizophrenia, as outlined in the DSM-5 (the diagnostic manual used by mental health professionals).

It's important to note that the diagnosis of schizophrenia requires careful evaluation and consideration of all available information, and may involve multiple visits to a mental health professional.

Current treatments

There are several treatment options available for schizophrenia, and the most appropriate treatment plan will depend on the individual's specific symptoms and needs. The main treatments for schizophrenia include

Medications: Antipsychotic medications are the primary treatment for schizophrenia and can help to reduce symptoms such as delusions and hallucinations.

Psychotherapy: Individual or group therapy can help individuals with schizophrenia to cope with their symptoms and improve their social and occupational functioning.

Rehabilitation and social support: Rehabilitation and social support services, such as vocational training and assistance with daily living activities, can help individuals with schizophrenia to improve their quality of life (NHS, 2022).

Hospitalisation: In some cases, individuals with schizophrenia may require hospitalisation to manage severe symptoms or to ensure their safety.

Measurements of rehabilitation

The measurement of rehabilitation can be done with help of two different ways. One of the methods is with the help of psychological therapies and the other method is with the use of medications. With the help of psychological therapy sessions, the patients can clearly state their conditions and the healthcare professionals can measure the condition of the patient. Moreover, the symptoms experienced by the patients can be highlighted with the help of therapies. With the help of medications and diagnosis, healthcare professionals can make progress in understanding the condition of the patients (Gov, 2022). With the help of psychological therapies, healthcare professionals can neglect the chances of self-harm, suicide and self-neglect. The therapies where the patients get to talk and express themselves can reduce the chances of substance misuse as well as violation of human rights. This can be highly supported with the help of Indicators for rehabilitative care in Appendix B.

Guidance and principle of care NICE

With the help of the guidelines provided by NICE, patients of schizophrenia can be understood. Following the guidelines, it suggests that healthcare and care providers look after the patients. The first stage is to recognise the symptoms and understand the disease. The second stage is to provide treatment by focusing on long-term recovery. Lastly, it looks for coexisting health problems in patients affecting schizophrenia (NICE, 2022).

Recommendations

The recommendations for the caregiving and treatment of schizophrenia patients can be done with the use of the following pointers.

- Recognising and preventing psychosis.
- Early treatment of 1st stage psychosis.
- Treating people with acute psychosis episodes, also known as schizophrenia.
- Supporting long-term recovery.
- Checking for associated health issues (NICE, 2022).

Autism

Definition

Autism can be defined as a developmental disability which can be caused by the altered growth of the brain (Marotta *et al.*, 2020). Around 75,000,000 people in the global population are seen to be autists which is measured to be around 1% of the global population (Cross river therapy, 2022). In the UK, 1 in every 100 children and 1-2 out of 100 adults are seen to be autistic (Hogrefe, 2022). However, males are seen to be more susceptible to this disease where the rate suggests to be 3:1 in men and women (Gov, 2022).

Classification

Autism is classified by WHO under F80-F89 Disorders of psychological development, ICD, 2010 (WHO, 2022).

Causes (Aetiology)

Most people having autism are seen to be getting the disease from their parental genes. Autism is profoundly caused by genetic diseases in the offspring of the newer generation. Moreover, diseases such as Down's syndrome, fragile X syndrome are seen to be causing the diseases by 10% (WebMD, 2022). The rates of getting into the spectrum of autism are seen to be high when there are cases of autism in parents and siblings.

Signs /symptoms

The signs and symptoms of the disease of autism can be identified as follows.

Disabilities in social communication and interaction skills: The social, communication and interaction skills in autistic patients are seen to be confined as they cannot perform communication with people normally.

Restricted or repetitive behaviours: People having autism are seen to have restricted or repetitive behaviours. Autistic children repeat words, sentences and actions over and over again which shows signs of echolalia (CDC, 2022).

Other symptoms of autistic people have delayed language, movement, learning and cognitive skills. People with autism are hyperactive, lack focus and are impulsive. Adding to it, the patients are seen to experience sleeping and unusual eating behaviours. They do not have well regulation of mood or emotions. Stress and anxiety are seen to be secondary signs of autism.

Diagnosis

The diagnosis of the disease of a child less than 5 years can be done in multiple ways as mentioned below.

- By checking the behaviour of the child while interacting and learning things
- By taking the child to a general physician if the symptoms are identified or doubted.
- With the use of special educational needs (SEN) can be used in the process of diagnosis and identification of the disease.
- Writing down the signs and symptoms can be highly supportive in the process of identification and pinpointing identification of the disease (NHS, 2022).

With the help of these processes, the diagnosis of the disease can be facilitated and promoted in providing care and cure.

Current treatments

Autism can be treated with multiple actions which are mentioned below.

Speech and language therapy: Speech therapies can support children with autism. Language therapies can support autistic children in learning and understanding language in a better way promoting communication.

Occupational therapy: Occupational therapy is another approach to the treatment of autism. With the help of occupational therapy, children can perform activities and make progress in their mental condition.

Physiotherapy: Physiotherapy can support the diagnosis of the disease and can provide medications to promote the treatment of autism patients.

Measurements of rehabilitation

The measurement of rehabilitation can be done with the use of the childhood autism rating scale (CARS). This scale has 15 domains which can represent the condition of the child with autism. "The domains are as follows; relating to people, imitation, emotional response, body use, object use, adaptation to change, visual response, listening responses, taste, smell and touch responses and use, fear or nervousness, verbal communication, activity level, level and consistency of intellectual response and general impressions". This is further explained in Appendix C.

Recommendations

People suffering from autism can also consider yoga as an alternative way to cure the issue of autism. The contemporary uses of yoga can be highly supported by the process of making progress in the treatment of the disease as it provides mental stability as well as physical exercise. This type of practice can be highly supportive in improving cognitive abilities.

Guidance and principle of care- NICE

With the help of the NICE guidelines, one can identify the required steps to be taken while considering an autism patient. The guidelines are stated below.

- The individual needs and requirements must be considered while providing care to them.
- The preferences and values of the patients are to be considered too.
- Seeing a GP or a healthcare expert every once in a while is recommended by the guidelines.
- Provided medications must be continued only till the healthcare expert has prescribed them (NICE, 2022).

Conclusion

The overall study provided a detailed understanding of three of the mental disorders which are generalised anxiety disorder, schizophrenia and autism. With the help of the recommendations and care-providing processes, the study suggested that people treat patients equally. With the help of a person-centred approach based on the human rights Act can support the well-being of the patients. This is supported by the Equality Act 2010 for the equal treatment of the people in society.

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Appendices

Appendix A

Generalised Anxiety Disorder Questionnaire (GAD-7)	
Over the last 2 weeks, how often have you been bothered by any of the following problems?	
Feeling nervous, anxious or on edge?	Not at all Several days More than half the days Nearly every day
Not being able to stop or control worrying?	Not at all Several days More than half the days Nearly every day
Worrying too much about different things?	Not at all Several days More than half the days Nearly every day
Trouble relaxing?	Not at all Several days More than half the days Nearly every day

Being so restless that it is hard to sit still?	☐ Not at all ☒ Several days ☐ More than half the days ☐ Nearly every day
Becoming easily annoyed or irritable?	☐ Not at all ☐ Several days ☒ More than half the days ☐ Nearly every day
Feeling afraid as if something awful might happen?	☐ Not at all ☐ Several days ☒ More than half the days ☐ Nearly every day
Total= 11 /21	Moderate anxiety

Appendix B: Indicators for rehabilitative care:

Quality Indicator for Rehabilitative Care (QuIRC-SA)

The indicators to be considered are these:

Living Environment: The patients of schizophrenia can get the support of the living environment and can get included in society.

Therapeutic Environment: The therapeutic environment can support people with dementia and similar problems.

Treatments and Interventions: With the help of treatment and interventions, schizophrenia patients can develop curing processes.

Self-Management and Autonomy: The steps taken by individuals having schizophrenia can be highly effective in treating the condition.

Social Interface: The social interface can support people in making communication and exchange of thoughts which can support the patients.

Human Rights: With the help of human rights such as the Equality Act 2010 can support patients in feeling included.

Recovery-Based Practice: The recovery-based practices can directly put impact the patients by promoting the recovery processes.

Appendix C

CARS domains	Patients with autism (n=10)
	Mean±SD/n (%)
Relating to people	2.80±0.82
Imitation	2.25±0.71
Emotional response	2.50±0.47
Body use	2.50±1.01
Object use	2.20±0.75
Adaptation to change	1.90±0.56
Visual response	2.85±0.78
Listening response	2.05±0.68
Taste, smell, and touch response and use	1.65±0.66
Fear or nervousness	2.15±0.81
Verbal communication	2.90±0.77
Nonverbal communication	2.25±0.67
Activity level	2.40±0.51
Level and consistency of intellectual response	2.70±0.67
General impressions	3.30±0.78
Total CARS score	36.35±4.84
Severity of ASD (%)	
Mild-moderate	5 (50)
Severe	5 (50)

Figure 1: Childhood Autism Rating Scale

(Source: Kumar *et al.*, 2018)