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Mental Health Disorders in ICD-10

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Table of Contents

Introduction	3
General Anxiety Disorder.....	3
Causes	4
Symptoms	4
Diagnosis	4
Treatment	4
Principle when working with people with GAD.....	5
Recommendations.....	5
Schizophrenia	5
Causes	6
Symptoms	6
Diagnosis	7
Treatment	7
Measurement of Rehabilitation	7
Principle when working with people with Schizophrenia.	8
Recommendations.....	8
Autism	8
Causes	8
Signs and Symptoms	9
Diagnosis	9
Treatment	9
Conclusion.....	10
References	10

Introduction

General Anxiety Disorder, Schizophrenia, and Autism, as mental health disorders from WHO ICD-10

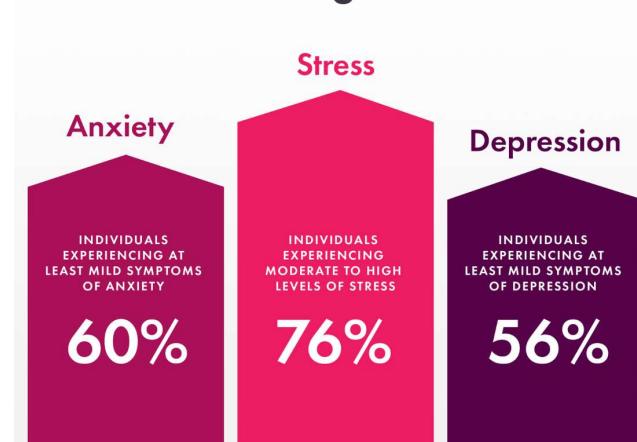
Mental illness is defined as an intellectual, emotional, or behavioural impairment that is clinically serious. It frequently accompanies anxiety or functional limitations in important areas. Many distinct types of mental disease exist. Mental diseases are sometimes referred to as mental health issues. The latter is a broader phrase that encompasses mental disorders, psychosocial impairments, and other mental state(s) linked to considerable discomfort, incapacitating symptoms, or a risk of self-harm. This website focuses on mental disorders and utilises the International Classification of ailments, Eleventh Revision (ICD-11) to categorise ailments.

A mental condition was present in 970 million people globally in 2019. That is 1 in every 8 people according to WHO (2022), with anxiety and depressive disorders being the most common. The COVID-19 epidemic has significantly increased the amount of people who experience anxiety and despair in 2020. Initial predictions point to a rise in major depressive disorder and anxiety disorders of 26% and 28%, respectively, in just one year.

General Anxiety Disorder

In life, anxiety is a regular occurrence. Many people worry about their well-being, money, or interpersonal issues. GAD sufferers, however, commonly experience anxiety or fear over these and other issues, even when there is little to worry about. Continuous anxiety or dread that affects how you live your life is one of the hallmarks of GAD. It is not the same as occasionally worrying or feeling anxious due to challenging circumstances in life. For months or even years, GAD patients struggle with ongoing anxiety. The group "F40-F48 Neurotic, Stress-Related, and Somatoform disorders" includes GAD. GAD is listed as F41.1. (NIH, 2022)

Mental Health & Wellbeing in 2023



Generalized anxiety disorder will be diagnosed in 6 out of 100 people in England each week, according to Mind. Over 8 million people in the UK are currently dealing with an anxiety disorder (Mental Health UK). According to the Mental Health Foundation, fewer than 50% of people with generalized anxiety disorder receive treatment. An estimated 822,000 workers experience stress, depression, or anxiety at work each year. (Joe, 2023)

Causes

Anxiety disorders, like other forms of mental disease, are crippling. They are not brought on by personal failings, character defects, or parenting problems. However, researchers are unsure of the precise cause of anxiety disorders.

They think the following factors are in play:

Chemical imbalance: Prolonged or intense stress can change the balance of chemicals in your body that control your mood. If you are under a lot of stress for a lengthy period of time, an anxiety condition may develop.

Environmental factors: An anxiety disorder can be triggered by a stressful event, especially in those who are genetically prone to it.

Due to inheritance, anxiety problems typically run in families. Similar to eye colour, they can come from either one or both parents.

(Cleveland Clinic, 2020)

Symptoms

GAD can alter your behaviour as well as the way you perceive the world. Depending on the type of anxiety disorder you have, your symptoms will change. The following are general signs of an anxiety disorder:

Psychological symptoms: Overthinking, racing thoughts, difficulty concentrating, emotions of dread, fear, or impending doom irritability, increased attentiveness, difficulty sleeping. Changes in appetite, a desire to leave the situation, dissociation (feeling disconnected from your own body, seeing things happen around you without feeling them.)

Physical Symptoms: Sweating, Heavy and rapid breathing a pounding pulse, Blushing and hot flushes, a dry mouth Shaking, Hair fall, Extreme exhaustion or a lack of energy, Headaches, vertigo, and fainting. (NHS, 2022)

Aches and pains in the stomach, nausea, and vomiting.

Diagnosis

You are most likely to be diagnosed with GAD if symptoms persist for 6 months or longer. Your doctor or mental health professional may do the following to assist in the diagnosis of generalised anxiety disorder:

Perform a physical examination to look for signs that your anxiety is being caused by medications or an underlying medical condition. If a medical problem is suspected, request blood, urine, or other testing. Inquire in-depth about your symptoms and medical history. Use psychological surveys to aid in diagnosis. (Mayo Clinic, 2017)

Treatment

Even though generalised anxiety disorder (GAD) is a chronic illness, there are several effective therapies available. Before obtaining therapy for GAD specifically, these problems might need to be resolved if you also deal with depression or alcoholism, for instance.

(NHS, 2020)

Options for treatment include:

Psychotherapy: Working with a therapist can help people manage their symptoms more successfully. Cognitive behavioural therapy (CBT) is frequently recommended by doctors and mental health experts for anxiety since it is both safe and effective.

mindfulness-based treatments and acceptance and commitment therapy are two more forms of therapy that have shown potential in treating GAD. This therapy employs both acceptable and mindfulness approaches.

Medication: A doctor may occasionally recommend medication to address the symptoms of GAD.

Clinical professionals frequently prescribe selective serotonin reuptake inhibitors or serotonin and norepinephrine reuptake inhibitors for GAD. The effects of these drugs may not start to show for many weeks.

Buspirone: This is an anti-anxiety medicine that alleviates anxiety's bodily effects. It might take many weeks for buspirone to take effect.

Benzodiazepines: Doctors may occasionally prescribe benzodiazepines for short-term anxiety alleviation. These drugs work quickly, but they are very addictive and may not be appropriate for persons who have a history of addiction.

Principle when working with people with GAD.

When interacting with GAD patients:

develop a friendship and conduct yourself in a frank, interesting, and non-judgmental way.

- Examine the person's anxieties to better understand how GAD may be affecting them.
- Jointly examine treatment possibilities with the individual, demonstrating that decision-making is a shared process.
- Make sure that discussions take place in environments where dignity, privacy, and secrecy are upheld.
- Give the person information about the nature of GAD and the variety of treatments available that is appropriate for their level of understanding. (NICE, 2020)

Recommendations

Methods of coping with anxiety disorders include anxiety learning, mindfulness, relaxation techniques like yoga have been proven to be an effective way to reduce anxiety in women, dietary changes, breathing techniques, assertive learning, exercise, self-esteem building, exposure therapy, cognitive therapy, and structured problems. There are resolutions, medications, support groups, and more.

Schizophrenia

Schizophrenia is a persistent, severe mental illness that has an influence on a person's ability to think, behave, and express their emotions. Although it is less frequent than other severe mental disorders, schizophrenia has the potential to be the most persistent and crippling severe mental condition.

Schizophrenia patients typically struggle to adapt to social situations, work contexts, and learning environments. They could appear to have no sense of reality, feel scared, and withdraw. With the correct treatment, this chronic illness may be controlled even if it cannot be cured. (WebMD, 2022)

Around 24 million people, or 1 in 300 people (0.32%), worldwide suffer from schizophrenia. Adults (2) make up 1 in 222 of these rates or 0.45%. It does not occur as frequently as many other mental illnesses. (WHO, 2022)

Causes

It is unknown what specifically causes schizophrenia. However, schizophrenia has a biological basis and is a real illness, just like diabetes and cancer. Researchers have discovered a variety of factors that seem to increase a person's risk of developing schizophrenia, including:

1. Use of Drugs and Alcohol

According to research, if you already have schizophrenia, using recreational drugs may make your symptoms worse. In accordance with a few studies, people who use high-potency cannabis (often referred to as "skunk") while receiving treatment are also more prone to relapse.

Both smoking and drinking alcohol reduce the ability of medications to control your symptoms.

2. Stressful Events

Schizophrenia can occasionally be brought on by very stressful or life-changing situations. These kinds of tense situations are sometimes referred to as trauma.

For instance, losing a loved one, experiencing abuse or harassment, having financial difficulties, feeling lonely or alone, and being unemployed, being made homeless.

3. Inheritance (Genetic)

Your risk of developing schizophrenia rises if a parent or sibling has experienced psychosis. Even while they are unaware of the precise explanation, experts think that some genes may enhance the probability. There seems to be a link between living in certain areas and an increased risk of schizophrenia. For instance, according to some research, living in a metropolis increases the likelihood, however the exact cause of this is uncertain. (Mind, 2020)

Symptoms

The following are symptoms of Schizophrenia:

Delusions: These are erroneous ideas without any support. You could experience threats or torment, be the target of specific behaviours or remarks, be famous or talented, be in love with another person, or be in danger of a serious disaster. Most schizophrenia patients experience delusions.

Hallucinations. They typically involve hearing or seeing intangible things. A person with schizophrenia, however, is affected by a typical event with all its power and effect. The most common type of hallucination is hearing voices; however, they can take on any form.

Using ineffective thinking. The unorganised speech suggests unorganised thinking. Questions may include answers that are partially or completely unrelated, which might make dialogue difficult. Rarely, word salad the practice of weaving together unintelligible words may be used in conversation.

potentially hazardous symptoms. This phrase describes a reduced or non-existent capacity to carry out routine tasks. For instance, they could neglect their personal hygiene or exhibit

emotionlessness (by not making eye contact, speaking monotonously, or altering their expression). (Mayo Clinic, 2020)

Diagnosis

This might be done to search for any side effects and to rule out any other conditions that could be producing symptoms.

Drug and alcohol testing, as well as tests to help rule out illnesses with comparable symptoms, may be included. The doctor may also order imaging tests, such as an MRI or CT scan.

psychological assessment: A medical or mental health doctor observes and interviews a person to determine their mental state as well as their thoughts, feelings, delusions, hallucinations, use of drugs or alcohol, and predisposition for violence or suicide. Also included is a summary of family and personal history.

Diagnostic criteria for schizophrenia. A mental health practitioner or doctor may apply the criteria in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5).

Treatment

A combination of medication and talking therapy that is tailored to the patient is frequently used to treat schizophrenia.

Most of the treatment for schizophrenia patients is provided by mental health teams and community (CMHTs). The CMHT offers daily counselling and support to help you live as independently as possible.

A CMHT might contain and provide access to:

Occupational-focused therapists and community mental health nurses are two examples of social workers with training in mental health diseases.

Doctor of Psychology and Psychiatry, as well as chemists, therapists, and counsellors. The psychiatrist is frequently the team's most seasoned practitioner. When you have your first episode of schizophrenia, you should be sent to an early intervention team initially. The members of these professional teams that offer care and assistance frequently include psychiatrists, psychologists, mental health nurses, social workers, and support personnel. Depending on your needs, you might just need to routinely interact with one or two team members, or you could need the complete CMHT's support.

Hospital/Clinic Treatment

Very severe schizophrenia episodes may necessitate in-patient treatment at a hospital or mental health facility. The care team will inform the patient and urge self-admission if they believe that the patient would get the best treatment in a hospital or clinic.

The first line of treatment for acute schizophrenia symptoms is Antipsychotics. the purpose of impeding the brain's response to dopamine or other neurotransmitters.

When receiving talking therapies, people with schizophrenia may find it easier to deal with delusion and hallucination

Among the most common talking treatments for schizophrenia are Arts therapy, family therapy, and cognitive behavioural therapy (CBT)

Measurement of Rehabilitation.

We can only assess how well the medicines and care used to treat this illness work in preventing negative effects including self-harm and suicide, drug misuse, self-neglect, loss of dignity, and human rights abuses. The same metrics that are used to evaluate chronic mental illnesses can also be applied to evaluate life satisfaction.

This tool includes specific indicators that show the effectiveness and excellent treatment being provided to control the condition (see appendix b). <https://quirc.eu/quirc-sa/>. Because schizophrenia is a chronic condition, it is essential to assist service users in maintaining a good standard of living. We may assess this by using rehabilitative care metrics that are relevant to all chronic mental health problems.

Principle when working with people with Schizophrenia.

Inquire about the type of assistance that might be beneficial. This includes assisting them with daily tasks such as food shopping and housework, accompanying them to appointments, and reminding them to take their medication when they can't remember who they are.

When someone sees or believes something you don't believe, you may not know what to say or do, but it's vital to remember that their experiences are true to them.

Try to focus on the good as well. Setting small, achievable goals might be more beneficial than focusing on what they cannot achieve. It is critical to remember that a lack of interest and drive is a symptom of schizophrenia, not something the individual chooses to do.

It can be helpful to know the symptoms they may be experiencing and the coping strategies they may find helpful.

Recommendations

Antipsychotics are frequently suggested as the first line of therapy for schizophrenia symptoms during an acute episode. They function by obstructing the effects of dopamine or other brain neurotransmitters. Antipsychotics can typically diminish sensations of anxiety or aggressiveness after a few hours of treatment, but other symptoms, such as hallucinations, or paranoid thoughts, might take days or weeks to go away.

Autism

Autism spectrum disorders (ASDs) are neurological and developmental illnesses that affect how individuals connect with one another, communicate, learn, and behave. Its symptoms frequently appear in the first two years of life, even though it can be diagnosed at any age, thus the label "developmental disorder" for the illness. (NIHM, 2023)

Autism now affects 1-2% of the UK population, or 1 child and 2 adults per 100. As a result, the number of referrals in the system implies that there are around 100,000 children and 1,000,000 individuals in the UK with autism. It affects 1-2% of the world's population.

Classification (F80-F89 Disorders of psychological development, ICD, 2010)

Causes

Although the underlying cause of ASD is unknown, research suggests that a person's genes and environmental variables may combine to influence development in ways that lead to ASD. Having an ASD sibling, having older parents, having particular genetic illnesses (such as Down syndrome or Fragile X syndrome), and having a very low birth weight are all risk factors for ASD. (NIMH, 2023).

Signs and Symptoms

Symptoms are:

1. Do not respond to their name,
2. Avoid eye contact,
3. Don't laugh when you smile at them,
4. Very upset if he doesn't like a certain taste,
5. Sound or smell, repetitive movements, such as clapping, snapping, or swinging their body,
6. Don't talk as much as other kids,
7. Don't play pretend too much,
8. Repeat the same sentences.

In adults, symptoms include the following:

1. Don't seem to understand what others are thinking or feeling,
2. Unusual speech, such as repeating phrases and talking "with" other people,
3. Enjoy a strict daily routine and get annoyed if it changes,
4. Very interested in certain subjects or activities, become very upset if you ask them to do something,
5. Have difficulty making friends or prefer to be alone,
6. Take things literally - for example, they may not understand phrases like "broken leg", having trouble telling them how they feel. (NHS, 2022)

Diagnosis

First and foremost, you should inform someone if you or your kid exhibits symptoms of autism.

Any general practitioner, health visitor (for kids under 5), or other medical professional you or your child sees, such a doctor or other therapy, is available for consultation.

Ask the Special Education Needs Coordinator (SENCO) personnel at your kid's school to send you or your child for an assessment of autism that is performed by an expert in the field. There is no other method to determine whether you or your kid has autism.

A team of autistic professionals will conduct an autism evaluation to determine whether you or your kid has the disorder.

- Ask questions about problems parent and child are having.
- See how child and parent interact with others.
- Talk to people who know you or your child well, such as family, friends, your child's doctor, or teacher.
- At the end of the assessment, you will receive a report indicating whether you or your child has autism. (NHS, 2022)

Treatment

There is neither a therapy nor a cure for autism spectrum disorder. Treatment aims to improve your child's capacity to function by easing autism spectrum disorder symptoms and fostering growth and learning.

Programmes for behaviour and communication therapy concentrated on minimising problematic habits and imparting new abilities. Other initiatives try to educate kids on social skills or improve their interpersonal communication.

In family therapy, parents and other family members can learn how to play and engage with their kids to foster social skills, control problem behaviours, and impart communication and life skills.

Children with autism respond very well to educational programs that are structured. The rationale behind educational therapy is to improve their social skills, communication, and behaviour.

Speech therapy is pivotal depending on the child's needs to improve communication skills. Physical therapy to improve balance and movement.

No medicine can improve the main symptoms of autism spectrum disorder, but certain drugs can help control symptoms. For example, certain medications may be prescribed if a child is hyperactive. (Maya Clinic 2021)

Recommendations

Goals of ASD therapy includes maximising a person's capacity for independence and fostering their growth and learning. Critical social, communication, and behaviour skills may be learned by individuals with early intervention and continued assistance. Yoga and autism, as several research have shown that yoga may help children with autism behave better.

Conclusion

Person-centered care entails approaching care and support services while working with them in a completely new way. Individuals are placed at the heart of the process to identify their requirements and make decisions about when and how to seek help to go through life. This starts with individuals as people with their abilities, preferences, and aspirations. Adult social care needs to be fundamentally changed to connect all systems, procedures, personnel, and services with the requirements of individuals. (SCIE, 2010).

Healthcare professionals and related agencies should ensure to follow the guiding principles when working with people with mental health. For instance, their respect and rights, dignity, choice, partnership, and privacy.

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