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Essay #2

1. The majority of the time, people with generalized anxiety disorder have excessive anxiety and worry about everything. Free-floating anxiety has been used to characterize their issue in the past. They frequently experience muscle tightness, feel restless, tense, or on edge; fatigue easily; struggle to concentrate; and have sleep issues. The symptoms cause a decline in quality of life and endure at least six months. However, many individuals with the illness can maintain social connections and employment duties, albeit with considerable difficulty. Anxiety over a wide range of situations and activities is a symptom of a generalized anxiety disorder.
13. According to Carl Rogers, anxiety arises when individuals discover they are unwilling to embrace who they have grown to be. According to him, anxiety results from a mismatch between one's true self and one's ideal self. An interpersonal psychodynamic approach to treating GAD conceptualizes this avoidance in terms of defensive mechanisms. Through the formulation and interpretation of fundamental conflictual relationship themes, the interpersonal causes of the ignored feelings are addressed.
14. More people than others have different phobias. In comparison to phobias of meat, grass, and homes, phobias of animals, heights, and darkness are more prevalent. Theories frequently propose that humans as a species have the propensity to acquire certain anxieties to explain these distinctions. As a result of the fact that people are supposedly

ready to develop some phobias but not others, this concept is known as readiness. More people than usual experience some specific phobias. There is a biological propensity for certain anxieties to arise in particular animals, according to theory. Behavioral approaches explain how phobias are formed and maintained primarily by using classical conditioning and operant conditioning. One of the most important theories for describing the genesis of certain phobias is the preparedness theory. According to the hypothesis, only species that have threatened human life at some point throughout human development are subject to fear conditioning, and once learned, memories of such dangers are resilient to extinction.

18. My brother once had a panic attack to the point that he fainted at work. He suffers from anxiety so there were many times that he would feel anxious throughout the day and a few times he would experience hyperventilation. Breathing as deeply, softly, and slowly as you can through your nose is one method that might help lessen the severity of panic attacks. You should gradually exhale through your lips while taking calm, deep breaths. Counting slowly from one to five on each inhale and exhale may be beneficial for some people. Think about your breathing while you close your eyes. Thankfully I don't think I have any phobias. I don't see myself as an anxious person so thankfully there's nothing that I'm severely afraid of. But when there are times when I feel worried or anxious I pray and read the Word of God. Another way that I tend to cope with my worries is by talking it out with a person I trust and having them speak the truth over me and also encourage me.
25. The network of nerve fibers that links the central nervous system to every other organ in the body is known as the autonomic nervous system (ANS). The body's endocrine system

is a group of glands that helps regulate vital processes including development and sexual activity. The brain region known as the hypothalamus initiates the characteristics of arousal. Neurotransmitters in the hypothalamus are produced when our brain perceives a situation as hazardous, causing neurons across the brain to fire and chemicals to be released throughout the body. The autonomic nervous system and the endocrine system are two critical systems that the hypothalamus activates. All of the body's other organs are connected to the central nervous system (the brain and spinal cord) via a vast network of nerve fibers known as the autonomic nervous system (ANS). The uncontrollable functions of the organs, like respiration, heartbeat, blood pressure, sweating, and the like, are controlled by these fibers. A network of glands spread out across the body makes up the endocrine system. Responsibilities of the ANS and endocrine system frequently cross over. Both the sympathetic nervous system and the hypothalamic-pituitary-adrenal (HPA) pathways are brain-body channels, or routes, by which these systems induce arousal.

26. By the DSM-5, acute stress disorder is diagnosed if the symptoms appear within four weeks after the traumatic incident and continue for less than a month. Posttraumatic stress disorder (PTSD) is diagnosed if the symptoms last longer than a month. In the months or years following the traumatic incident, or even sooner, PTSD symptoms may start to appear. A full clinical syndrome only appears in 25% of PTSD patients six months or more after their traumatic event. For less than a month following a traumatic event, a person with acute stress disorder will feel dread and symptoms that are connected to it. Long after experiencing a traumatic incident, a person may suffer from posttraumatic stress disorder (PTSD), which causes them to feel terror and other associated symptoms. Acute stress disorder develops into posttraumatic stress disorder in

at least half of all cases, according to studies. Acute stress disorder symptoms and PTSD symptoms are nearly identical, except for changes in onset and persistence.

29. Dissociative amnesia prevents sufferers from remembering crucial details of their life, frequently traumatic ones. Memory loss is far more severe than ordinary forgetfulness, and it is not due to physical causes like a brain injury. A painful or disturbing incident frequently serves as the direct cause of an episode of amnesia. An inability to recall significant personal experiences and information is a symptom of dissociative amnesia. A person with memory problems has difficulty recalling significant information from their past, particularly information that is traumatic or stressful. Dissociative fugue is a severe variation of dissociative amnesia. In this place, people not only lose track of their identities and former lives' specifics but also flee to a completely new place. Some folks only travel a small distance and are unable to meet many new friends. Their short-lived, abruptly ending fugue might last just a few hours or days. In some situations, though, the individual could leave their hometown and adopt a new name to forge new connections, a new identity, and possibly a new career path. When a person has a dissociative fugue, a kind of dissociative amnesia, they may go to a new place or adopt a new identity while simultaneously forgetting their history. Usually, fugues come to a sudden conclusion. When patients are discovered before their condition of the fugue has ended, therapists may find it essential to ask them a lot of questions about the specifics of their life, frequently remind them who they are, and even start psychotherapy before they regain their memories. Some of these people forget the events of the fugue phase as they move on from their past. Most persons who have a dissociative fugue retrieve most or all of their memories and never experience them again.

39. Although PTSD can result from any stressful event, there is a handful that is more typical than others. The list includes situations such as sexual assault or abuse, natural disasters, mishaps that cause harm or danger, or being in danger of losing one's life. Serious accidents, physical or sexual assault, abuse, including domestic or child abuse, being exposed to traumatic events at work, including remote exposure, serious health issues, such as being admitted to intensive care, and childbirth experiences, such as losing a baby, are examples of the types of events that can result in PTSD. More unexplained bodily symptoms are more common in those who are in crisis. Some individuals will have physical symptoms as a result of stress during a crisis, including headaches, aches and pains, nausea, and low-grade fevers. Rapid problem-solving and invention can be sparked by a crisis to address a perceived clear and immediate threat. The effect of the disruption and the creativity it sparked can inspire support to get ready for the next crisis, which will increase resilience for the next occurrence.