

## Chapter Eight

1. Munchausen syndrome is a type of mental illness in which a person repeatedly and deliberately creates or fabricates symptoms of a disease in themselves in order to obtain medical treatment, attention or sympathy. People most prone to this disorder are those who most often have a history of frequent hospitalizations, those who have a job in the healthcare industry and those with a history of childhood trauma or abuse. At this time, the exact cause of the illness is unknown; however, it is believed to be related to psychological or emotional issues such as low self-esteem, a need for control, or possibly a result of abuse or some trauma.

3. In order to diagnose somatic symptom disorder, the patient meet the following criteria as per the DSM-5:

- One or more somatic symptoms that are distressing or result in significant disruption to daily life. (“Somatic Symptom Disorder - Causes, Symptoms, Dsm 5, Treatment - Health Jade”)
- Excessive thoughts, feelings, or behaviors related to the somatic symptoms, or significant distress or interference with social, occupational, or other important areas of functioning.
- The somatic symptom can’t be fully explained by a medical condition, the direct effects of a substance or another mental disorder.
- The somatic symptoms are not better accounted for by another medical condition.

Furthermore, the symptoms must meet the above criteria for a period of at least 6 months.

The severity of the disorder is also rated on the degree of distress, interference with functioning and the number and type of symptoms.

4. Somatic Symptom Disorder (SSD) is characterized by two distinct patterns:

- Persistent type: A person experiences symptoms that persist for an extended period of time, often 6 months or more. The symptoms the individual is experiencing are distressing and result in significant impairment in daily functioning; however, the person doesn't have a history of medical condition that can explain the symptoms.
- Predominantly Hypochondrial type: A person experiences excessive and persistent fears of having a serious illness, despite medical evaluations that haven't indicated any evidence of a medical condition. The fear of having a serious illness may be so severe that it interferes with the persons daily life, work or relationships.

6. The main difference between the two is that in the case of Illness Anxiety Disorder (IAD), the person's primary concern is the fear of having a serious illness and in the case of traditional Psychophysiological Disorders the focus is on the physical symptom themselves. In the former, the person's fear of illness is not in proportion to the actual risk of having a serious illness and this leads to significant distress, anxiety and a functional impairment of daily living.

7. Behavioral theorists view illness anxiety disorder as a learned response to environmental cues, while cognitive theorists suggest that it is due to distorted thinking patterns. Both perspectives highlight the role of psychological factors in the development and maintenance of this disorder. Behavioral theorists suggest that illness anxiety disorder is a learned response to certain environmental cues. According to this theory, individuals with this disorder have learned to

associate bodily sensations or symptoms with the possibility of having a serious illness. This may have been reinforced by previous experiences of receiving attention, sympathy, or reassurance when they expressed concerns about their health. As a result, they become hypervigilant to bodily sensations, which leads to the persistent worry and preoccupation with illness.

On the other hand, cognitive theorists suggest that illness anxiety disorder is due to distorted thinking patterns. According to this theory, individuals with this disorder tend to interpret physical sensations as evidence of a serious illness, even when there is no medical evidence to support their beliefs. These individuals often engage in catastrophic thinking, which means they assume the worst possible outcome and worry about it excessively. Cognitive theorists propose that the underlying cognitive biases that contribute to this disorder include selective attention to health-related information, overgeneralization, and catastrophizing.

10. African Americans tend to experience higher levels of stress and trauma as a result of systemic racism, prejudice, discrimination and other forms of racial injustice. These experiences can contribute to the development of physical symptoms related to psychological factors, leading to increased risk for psychophysiological disorders. Also, systemic barriers to accessing mental health services, such as cultural competence, stigma and financial constraints can prevent minorities from receiving appropriate care and treatment. Furthermore, African Americans experience generational trauma from slavery and Jim Crow which are untreated.

11. Relaxation training is an effective therapy that can help individuals reduce stress, anxiety, and tension, and improve their overall physical and mental health. It is a safe and natural method

of treatment that can be practiced by individuals of all ages and backgrounds. Relaxation training is a type of therapy that aims to help individuals reduce stress, anxiety, and tension by teaching them relaxation techniques. These techniques may include deep breathing, progressive muscle relaxation, visualization, or meditation. The goal of relaxation training is to help individuals learn how to relax their body and mind, which can lead to improved physical and mental health. By practicing relaxation techniques, individuals can reduce their levels of stress hormones, lower their blood pressure, decrease muscle tension, improve their mood, and enhance their overall sense of well-being. There is a significant amount of research supporting the effectiveness of relaxation training in reducing symptoms of anxiety, depression, and other mental health disorders. Relaxation training has also been found to be effective in treating a variety of physical health conditions, such as chronic pain, hypertension, insomnia, and headaches. By helping individuals manage their stress and anxiety, relaxation training can also improve their immune system functioning and promote better overall health.

12. The effectiveness of hypnosis may depend on a variety of factors, including the skill of the therapist, the individual's level of suggestibility and motivation, and the specific condition being treated. While hypnosis may not work for everyone, it can be a safe and non-invasive therapy that may be worth exploring for individuals seeking alternative forms of treatment for various mental and physical health issues. Hypnosis is a state of focused attention and heightened suggestibility that allows individuals to access their subconscious mind and make changes to their thoughts, feelings, and behaviors. (“Here’s How Hypnotherapy Can Reduce Post-Traumatic Stress”) Hypnosis typically involves a therapist guiding the individual into a trance-like state through relaxation techniques, such as deep breathing or visualization. During hypnosis, the individual may be given suggestions to modify their behavior or beliefs, or they may be guided

through a therapeutic process to address specific issues, such as anxiety, phobias, or addictions. Hypnosis can also be used to help individuals manage pain, improve sleep, and enhance performance in sports or other activities. The effectiveness of hypnosis has been a topic of debate in the scientific community, with some studies suggesting that it can be a powerful tool for behavior change, and others finding limited evidence to support its effectiveness. The research on hypnosis is complicated by the fact that it is difficult to measure and control for individual differences in suggestibility and hypnotizability.

13. Biofeedback training is a technique used to teach individuals how to control and regulate their physiological responses to stress and other environmental stimuli. During biofeedback training, individuals are connected to sensors that measure various physiological parameters, such as heart rate, blood pressure, skin temperature, and muscle tension. As the individual engages in specific activities or experiences stress, the biofeedback machine provides real-time feedback on their physiological responses. Through this process, individuals can learn to identify and control their physiological responses through techniques such as relaxation, deep breathing, or visualization. The effectiveness of biofeedback training has been extensively studied, and research suggests that it can be an effective therapy for a variety of conditions, including anxiety, chronic pain, headaches, high blood pressure, and incontinence. Biofeedback has also been shown to be effective in improving athletic performance, enhancing cognitive function, and reducing symptoms of post-traumatic stress disorder (PTSD).

## Chapter Nine

24. Research has shown that eating disorders affect people of all races and ethnicities. However, some studies suggest that there may be differences in the prevalence of eating disorders among different racial and ethnic groups. For example, studies have found that rates of anorexia nervosa

and bulimia nervosa are higher among white women than among women of other racial and ethnic groups. However, rates of binge eating disorder and purging disorder may be more similar across different racial and ethnic groups. It is important to note that these differences may be influenced by factors such as social and cultural norms around body image and eating behaviors, access to healthcare and treatment, and experiences of racism and discrimination. It is also important to recognize that eating disorders can affect anyone, regardless of their race or ethnicity.

31. Binge-eating disorder (BED) is a mental health disorder characterized by recurring episodes of eating large amounts of food within a short period of time and feeling out of control while doing so. According to the Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM-5), the criteria for diagnosing BED include:

- Recurrent episodes of binge eating: A person with BED experiences recurrent episodes of binge eating, which are characterized by eating an abnormally large amount of food within a discrete period of time (e.g., within 2 hours) and feeling a sense of loss of control during the episode.
  
- Binge-eating episodes include at least three of the following:
  - Eating much more rapidly than usual.
  - Eating until feeling uncomfortably full.
  - Eating large amounts of food when not feeling physically hungry.
  - Eating alone because of feeling embarrassed by how much one is eating.

- Feeling disgusted with oneself, depressed, or very guilty afterward.
- Binge eating occurs, on average, at least once a week for three months.
- The binge eating is not associated with recurrent use of inappropriate compensatory behaviors (e.g., purging, fasting, excessive exercise) as seen in bulimia nervosa.
- The binge eating is not accounted for by the presence of another mental health disorder such as anorexia nervosa or bulimia nervosa.
- The binge eating does not occur exclusively during the course of anorexia nervosa, bulimia nervosa, or avoidant/restrictive food intake disorder.