

Study Of Different Therapeutic Techniques

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Abstract

On the basis of the result of the application of psychological treatment techniques, it may concluded that PMR in combination with systematic desensitization is the most effective technique for the treatment of phobia PMR in combination with CBT IS the most effective technique of dissociative reactions. Anxiety can effectively be treated by PMR in combination with CBT or systematic desensitization.

- 1. The phobic patients treated by PMR and systematic desensitization were recovered in 15 days.*
- 2. The patients of dissociative disorders treated with PMR and CBT took 20 therapeutic days to recover completely.*
- 3. It took 30 sessions for the recovery of anxiety and dissociative reaction patients treated with PMR.*
- 4. Phobic patient has not recovered by the treatment of only PMR*
- 5. The phobic patients treated with PMR and CBT took 30 sessions to recover.*
- 6. The patients of dissociative reactions treated by PMR and systematic desensitization were relieved in 30 sessions.*
- 7. The anxiety patients treated with the combination of PMR and systematic desensitization or PMR and CBT took 15 sessions to recover of their disorders but took 25 sessions when treated with only PMR.*

Keywords: Disorder, Phobia, Anxiety,

Introduction

The word "**Psychology**" was referred to the study of the mind currently it is defined as a science that studies the behaviour of man and other living beings. The word behaviour refers to the activities of the organism that can either be observed by another person or by a study of such activities by using certain instruments or tools.

Man is essentially a living organism. Psychology is primarily concerned with the responses of these organisms to their outside world.

The Field Of Psychology

Psychology is interested in understanding the behaviour of people in different situations and contexts and also in applying the general Psychology principle in different fields of human life. The different fields of psychology are:

1. Clinical Psychology
2. Cunselling Psychology
3. Community Psychology
4. Developmental Psychology
5. Experimental Psychology
6. Educational Psychology
7. Industrial Psychology
8. Psychometric Psychology
9. Health Psychology
10. Social Psychology
11. Environmrnyal Psychology

12. Organizational Psychology

The Problem Of Classification

Classification has been carried out in different ways of abnormal behaviour. In 1952 the APA (American Psychiatric Association) adopted a classification of mental disorders that was based largely on a scheme worked out by the United States Army during World War II. In 1968 the APA adopted a modified classification worked out in the World Health Organization. This international classification permits mental health workers to compare incidence, types of disorders, treatment procedures, and other relevant data concerning mental disorders throughout the world.

Current Classification Of Mental Disorders

Diagnostic and Statistical Manual of Mental Disorder (Fourth Edition) devised by the American Psychiatric Association, DSM IV. There also exists a worldwide classification system, called the international classification of Diseases, 9th Edition (World Health Organization) ICD-10, which covers all diseases and disorders, both physical and mental. Both AP A and WHO have worked closely over the years to ensure compatibility between their two-classification systems. The mental disorders were classified in 10 categories or Axes:

-) Mental Retardation
-) Organic Brain Syndromes
-) Psychoses
-) Neuroses
-) Personality Disorders And Certain Other Nonpsychotic Mental Disorders
-) Psychophysiological Disorders
-) Special Symptoms
-) Transient Situational Disturbances
-) Behaviour Disorders Of Childhood And Conditions Without Manifest Psychiatric Disorder And Nonspecific Conditions

Personality

Personality has been regarded as a practical force in determining success or failure in life. The importance of personality increases as social life becomes more complex. A 'pleasing' personality in a complex society, simple cultures, where the scale of social relations is low and behaviour is regulated by old- age customs, personality is of less concern..

Personality Disorders

The behavior which is maladaptive and which causes significant harm to the individual is called personality disorders. Personality disorders are described as below:

-) Antisocial Personality
-) Paranoid Personality
-) Dependent Personality
-) Hystrionic Personality
-) Schizoid Personality
-) Obsessional Personality

Classification of Anxiety Disorders

Anxiety Disorders Classify In ICD10	Anxiety Disorders Classify In DSM IV
(A) Phobic Anxiety Disorders (i) Agoraphobia Without panic disorder With panic disorder (ii) Social phobia (iii) Specific phobia (B) Other Anxiety Disorders Panic disorders (i) Generalized anxiety disorders (ii) Mixed anxiety and depressive disorders	(i) Agoraphobia Without a history of panic Disorder (ii) Social phobia (iii) Specific phobia (i) Panic disorders without agoraphobia (ii) Generalized anxiety disorders

Research Design

The present paper apply the psychological intervention techniques for the treatment of cases of anxiety, phobia and dissociative reactions. It is a qualitative and utility research. Since the research is concerned with the treatment of psychological problems and thus improving their ability to adjust in the society and family make it a qualitative research.

Sample

The study is related to three neurotic disorders viz., Anxiety, Phobia and Dissociative disorders. In each disorder there were 10 patients. The sample of the study has been selected from the department of psychiatry, King George Medical College, Lucknow and various psychological clinics in Lucknow.

Table-I: Presenting the Sample of the study

Characteristics of Patients		Anxiety	Phobia	Dissociative Disorder
No. of Patients	Male	8	7	4
	Female	2	3	6
Age range (Yrs.)		30-40	30-40	30-40
Educational standard		Graduation	Graduation	Graduation
Income		10,000	10,000	10,000
Duration of illness (Y rs.)		1-2	1-2	1-2

A sample of 30 patients of which 10 were in each category of disorder anxiety, phobia and dissociative

reactions were selected for the present study. Their age range was 30-40 years, their educational standard was graduation, and their monthly income was 10,000.

Therapeutic Techniques Applied

The study is related to three neurotic disorders Anxiety, Phobia and Dissociative Disorder. There are 10 patients in each disorder. The patients were characterized by the clinicians in different categories of psychological problems. Thereafter the following treatment techniques were applied in different combinations :

1. Cognitive Behavior Therapy
2. Systematic Desensitization
3. Jacobson's Progressive Muscular Relaxation Technique

Procedure

Patients in each group were put in three sub groups. First subgroup is treated by only progressive relaxation for two weeks. The second subgroup of patients were treated by progressive muscular relaxation combined with systematic desensitization. The third subgroup were treated by the combination of progressive muscular relaxation and cognitive behavior therapy. In first and second subgroup, there were three patients in each while in third subgroup there were four patients. The therapeutic procedure were applied everyday in the morning for an hour individually to each patient for a period of 30 days. The effectiveness of the treatment was assessed by the clinical interview.

Applications Of Techniques And Results

The therapeutic procedure describe in proceeding chapter were used for the treatment of patients of different disorders, anxiety, phobia and dissociative disorder. The number of patients treated by the techniques were as follows:

Table - 2 No. of patients treated by different treatment techniques

Treatment Techniques	Number of Patients		
	Anxiety	Phobia	Dissociative Disorders
PMR	3	3	3
PMR + Systematic Desensitization	3	3	3
PMR + CBT	4	4	4

Pre-treatment features of Anxiety

1. Whole body burn
2. Dry mouth
3. Frequent loose motions
4. Prickling sensation
5. Difficulty in inhaling
6. Feeling of discomfort over the heart
7. Awareness of missed beats
8. Poor concentration
9. Menstrual discomfort
10. Urine frequency

Pre-treatment features of Phobia

1. Tension
2. Headache
3. Back pains
4. Stomach upsets
5. Dizzy spells
6. Fear of cracking
7. Feelings of unreality
8. Difficulty in making decisions

Pre-treatment features of Dissociative disorders:

1. Repetitive thought
2. Loss of vision, hearing or smell
3. Inability to recall
4. Unable to remember important aspects
5. Patient feel two or more distinct personalities
6. Repetition of speech
7. Partial or complete loss of any or all of the normal cutaneous sensations over part or all of the body (Specify touch, pinprick, vibration, heat and cold)
8. Amnesia (Forget fullness)
9. Loss of the usual sense of personal identity

Evaluation of Treatment

After 30 days of treatment or at a point where the patient reported that he/she has no problem and they have fully recovered and evaluative session was devoted to assess the effect of treatment in which the patients undergo clinical interview in order to know whether they have any problem or not.

Follow-Up

Follow-up after six month for each patient was carried out in which they were interviewed to know if they had any problem in this period of six months but it was found that there were no specific problem related to their disorder.

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