

Psychiatric Disorders

Psychiatry is the study and medical treatment of mental health disorders, of which there are a wide spectrum. It integrates biological, social and psychological aspects of mental health to provide medical care for a wide range of symptoms.

When considering an Independent Medical Examination, psychiatric problems may be considered as a stand alone issue for a claimant. Increasingly psychiatric problems are also being seen as an issue to consider alongside an injury or condition which has been, for whatever reason, particularly traumatic for the claimant.

Common examples of psychiatric illness are Anxiety Disorders, Behaviour Disorders, Depressive Disorders and Personality Disorders. These are umbrella terms for many more specific psychiatric illnesses.

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Adjustment Disorder



An adjustment disorder is an emotional and behavioural reaction that develops within three months of a life stress, such as marriage or financial issues, a new job or stress in the workplace. The reaction of the patient is stronger or greater than what would be expected for the type of event that occurred.

Adjustment disorders can be acute, meaning symptoms last for less than six months, or chronic, meaning symptoms last for more than six months.

Symptoms include:

- Agitation;
- physical complaints; decrease in occupational function;
- depressed mood;
- palpitations;
- disturbance of conduct.

Treatment is psychotherapy aimed at relieving symptoms by achieving a level of adaptation that is comparable to the affected person's level of functioning prior to the stressful event. Treatment may also include relaxation techniques.

With any psychiatric illness, the results achieved from treatment depend entirely on the individual and their ability to respond and adapt.

Anxiety Disorders

Panic Disorder

Sufferers feel an irrational sense of panic and fear, manifesting itself as panic attacks during which a person has a racing pulse, shortness of breath and feels genuine terror. Fear of having an attack can often increase anxiety.

Obsessive Compulsive Disorder (OCD)

Obsessive Compulsive Disorder is characterised by intrusive thoughts that produce unhappiness, fear, anxiety or a combination of thoughts (obsessions) and behaviours (compulsions).



Posttraumatic Stress Disorder (PTSD)

Posttraumatic Stress Disorder (PTSD) is a severe anxiety disorder that develops as a result of the sufferer experiencing an extremely traumatic event, usually a life threatening or highly unsafe occurrence, to either the sufferer directly or someone in their vicinity, resulting in psychological trauma. The events can include natural disasters, war, physical abuse or a bad accident.

Posttraumatic Stress Disorder can occur at any time after the event, even years after.

Symptoms include:

- flashbacks;
- excessive awareness;
- feelings of guilt, anger or worry.

- violent outbursts;
- disturbed sleep or nightmares;

Treatment is aimed at relieving symptoms by getting the sufferer to actually recall the event and gain some control over emotions relating to the experience. Posttraumatic stress is often accompanied by other disorders which will need to be treated as well such as alcoholism and drug abuse, and medical conditions such as depression.

Depressive Disorders

Depression

Depression can vary greatly from person to person, in terms of severity, cause and prognosis. Symptoms are also diverse but include feelings of sadness or despair that do not go away. Depression can severely affect a person's day to day life, rendering them unable to complete even the most seemingly easiest of tasks. Causes are generally related to chemical imbalance in the brain and can often be influenced by environmental factors too.

Bipolar Disorder

Bipolar disorder is characterised by the presence of one or more episodes of abnormally elevated energy levels, cognition and mood with or without one or more depressive episode. The elevated moods are clinically referred to as mania or, if milder, hypomania. Individuals who experience manic episodes also commonly experience depressive episodes, symptoms, or mixed episodes in which features of both mania and depression are present at the same time.



Major Depressive Disorder

The essential feature of Major Depressive Disorder is a clinical course that is characterised by one or more major depressive episodes, without a history of manic, mixed or hypomanic episodes. Any depressive disorder relating to substance abuse cannot be included in this diagnosis, neither can any schizoaffective or personality disorder. If manic, mixed, or hypomanic episodes develop, the diagnosis is changed to bipolar disorder.

The exact cause of depression is still unknown although it is believed to be a mix of chemical imbalances in the brain and a genetic predisposition.

Symptoms include:

- # agitation and irritability; # extreme difficulty concentrating; # feelings of hopelessness
 and despair.
- dramatic change in appetite; extreme lack of energy;

Antidepressant drug therapy is indicated to treat any chemical imbalance present. This is teamed with psychotherapy which is directed as a reduction in negative thinking and teaching the sufferer how to cope with and overcome the depressive feelings. Treatment can take years to complete and has varying rates of success.

Dysthymia

Dysthymia is a milder but more chronic form of depressive disorder than the better known major depression. The dysthymia sufferer usually has a persistent depressed mood with related symptoms such as a loss of interest in life, and feelings of fatigue. Dysthymia can be diagnosed if depressive symptoms last more than two years and are accompanied by at least two other symptoms of depression. Sufferers are gloomy and pessimistic.

Personality Disorders

Antisocial Personality Disorder

Someone suffering from an antisocial personality disorder is referred to as a sociopath. It is defined as a pervasive pattern of disregard for, and violation of, the rights of others that begins in childhood or early adolescence and continues into adulthood. Antisocial Personality Disorder is sometimes known as Sociopathic Personality Disorder. Characteristics include lack of empathy, persistent lying and stealing, tendencies to get into fights, impulsivity, lack of remorse, and reckless disregard for safety, to name a few.

Narcissistic Personality Disorder

This is a personality disorder where the person has an exaggerated sense of self importance and individuality. They excessively crave attention and admiration and tend to be preoccupied by grandiose fantasies about themselves. They find interpersonal relationships difficult and tend to exploit others and lack empathy.

Avoidant Personality Disorder

This is a personality disorder where the sufferer feels they are inadequate in some way and tends to avoid social interaction because of a fear of humiliation, ridicule or rejection. These people are overly sensitive to criticism and their self image is poor.

Diagnosing Mental Disorders

The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision, also known as DSM-5, is a manual published by the American Psychiatric Association (APA) that includes all currently recognised mental health disorders. This manual is used as a diagnostic tool by mental health professionals.



Interesting Facts About Mental Health

According to the Black Dog Institute, Facts and Figures About Mental Health And Mood Disorders, Fact Sheet, 2020:

- Almost half of Australians will experience a mental illness in their lifetime.
- One in five Australians aged sixteen to eighty five experiences a mental illness in any year.
- Of the 20% of Australians with a mental illness in any one year, 11.5% have one disorder and 8.5% have two or more disorders.
- 54% of people with mental illness do not access treatment.

According to the National Health Report 2020:

- 2.3% of Australians have severe disorders, as judged by diagnosis, intensity and duration of symptoms, and degree of disability. Another 4.6% of the population have moderate disorders, and a further 9 to 12% have mild disorders.
- In 2020-21, one in five people (21.4% or 4.2 million) had a 12-month mental disorder:
 - * 16.8% (3.3 million people) had a 12-month Anxiety disorder.
 - * 7.5% (1.5 million people) had a 12-month Affective disorder.
 - 3.3% (650,800 people) had a 12-month Substance Use disorder.