

Psychosomatic Disorder Summary

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PSYCHOSOMATIC DISORDER SUMMARY

Psychosomatic also referred to as Psychophysiological Condition refers to actual physical signs that occur rather than a particular organic cause in the body from or are caused by the mind and emotions (such as an injury or infection). The word psychosomatic means mind (psyche) and body (soma), which includes both mind and body. A psychosomatic disease arises from or is compounded by emotional stress and presents as physical pain and other symptoms in the body. Depression may also lead to psychosomatic disease, especially when extreme and/or chronic stress has compromised the body's immune system [1].

It is possible to classify psychosomatic disorders into three general groups. The first category involves persons who have both a mental (psychiatric) disorder and a medical condition, and the symptoms and treatment of each other are complicated by these diseases. The second category involves persons with a psychological condition that is a direct consequence of a medical diagnosis or its treatment, such as depression due to cancer and its treatment. Somatoform disorders are the third type of psychosomatic disease. Psychiatric conditions that are demonstrated by physical problems are somatoform disorders [2].

Risk considerations of psychosomatic illness

To a certain degree, psychological variables may affect a medical condition [3].

- Diabetes: Type-2 diabetic patients are more vulnerable to hypertension associated with stress. Hypertension has the same stress factors that worsen the diabetic condition.
- Cancer: The occurrence of cancer in people is responsible for several causative factors. Studies have shown that psychological stress can affect the capacity of a tumor to develop and spread, thereby worsening the cancer state.
- Stress: Owing to mental stress, certain medical problems occur.
- Hypertension: Certain factors causing psychology, such as negative emotional status, recurrent adverse stress, and social factors such as economic status and life events, have an indirect association with blood pressure levels.
- Arteriosclerosis associated with heart disease: Studies have

concluded that the occurrence of coronary heart disease is linked with many risk factors that are also a major cause of depression, anxiety, and stress.

- Respiratory problems: Mental stress is a significant triggering factor associated with the induction of bronchial asthma, apart from different etiological factors.
- Gastrointestinal issues: The formation of peptic ulcer is connected to an individual's traumatic life event.

PSYCHOSOMATIC DISORDERS TREATMENT

Cognitive behavior therapy

The treatment of choice for a psychosomatic disorder is also Cognitive Behavior Therapy (CBT). When they obtain a better understanding of their illness or circumstances, this therapy helps patients find new ways to deal with and overcome their issues. Patients can also learn to set reasonable expectations for life and recognize and modify habits or feelings that have detrimental effects on their lives [2]. CBT is about more than describing patterns of thought; it focuses about using a wide variety of techniques to help individuals resolve these feelings. Journaling, role-playing, relaxation methods, and mental distractions can include such strategies. Treatment and therapy *via* telepathy in Delray Beach, FL and also throughout the United States for psychosomatic disorders. Cognitive therapy focuses on the recognition and alteration of faulty or skewed thought patterns, emotional reactions, and behaviors. Dialectical Behavior Therapy (DBT) discusses emotions and actions by combining techniques such as mindfulness and emotional control. Multimodal therapy indicates that by discussing seven separate yet interconnected modalities, which are actions, effect, sensation, imagery, awareness, interpersonal causes, and drug/biological considerations, psychological disorders must be addressed. Rational Emotional Behavior Therapy (REBT) involves recognizing irrational beliefs, actively challenging these beliefs, and finally learning to understand and alter these patterns of thought.

Psychodynamic psychotherapy

Psychodynamic psychotherapy is a verbal form of communication that is used to help a person achieve emotional pain relief. It attributes emotional issues to the subconscious motives and conflicts of the patient. It is for this reason that such an effective treatment can be psychodynamic psychotherapy [5]. Psychodynamic psychotherapies

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Received: February 12, 2021; **Accepted:** February 20, 2021; **Published:** March 28, 2021

Citation: Smith I (2021). Psychosomatic Disorder Summary. 10:170.

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have evolved from psychoanalytic approaches which were initially meant to help people improve their personality.

You may define psychodynamic psychotherapy as either expressive or supportive. Expressive therapy is based on the idea that adolescence originates from the challenges we face in adult life. Usually, children do not have the ability to make effective decisions, but as they go through their own challenges, they have to find a way to deal with the circumstances they face. The techniques of adaptation that were established in childhood are no longer successful when we reach adulthood, and many people do not know that these strategies have outgrown them. Based on their new level of maturity and independence, a person can be taught more suitable ways of solving problems through the guidance of a therapist. Two different types of psychodynamic psychotherapy represent expressive and compassionate treatments, but this does not necessarily mean that they should be considered separate from each other. Depending on the patient's needs, most rehabilitation approaches can provide at least a little of each approach.

In vivo exposure therapy

In several different forms of anxiety disorders, the fear of an individual is caused by a particular thing, environment, or circumstance. A type of cognitive behavior therapy that is used to minimize the anxiety associated with these stimuli is *In Vivo* Exposure Therapy [6]. Exposure Therapy has two main forms, including:

- **Flooding:** This form of exposure therapy requires rapid exposure to conditions that are feared. Systematic Desensitization, also known as Incremental Exposure, requires gradual exposure when anxiety levels become too high, combined with calming exercises.
- **Mindfulness training for stress reduction:** Mindfulness-based stress reduction for low-income, immigrant, and non-English-speaking communities is a rare and successful health care intervention. There is a pressing need for public and private support for program growth and research. For individuals who wish to provide MBSR programs in inner-city environments, teacher training and support is needed. An active communication network in inner-city settings between MBSR teachers may help prevent the burnout of teachers and lead to program progress by exchanging ideas and experiences. High-quality, supportive media coverage of MBSR services in the inner-city could improve the awareness and support of existing programs and facilitates their replication to more settings of health care. In order to create and maintain MBSR programs in inner-city environments, a substantial expenditure of resources, effort, devotion, and ingenuity is needed, but the potential benefit to their recipients health and well-being warrants just such an effort.

Medications

In the treatment of anxiety disorders, there are four main types of drugs widely used: Selective serotonin reuptake inhibitors relieve symptoms of anxiety by preventing serotonin re-absorption or reuptake by some brain nerve cells, making more serotonin available to boost mood. In contrast with tricyclic antidepressants, SSRIs such as citalopram, escitalopram, fluoxetine, paroxetine, and

sertraline typically cause less side effects. These medicines are beneficial for all types of anxiety disorders, although higher doses may be required for obsessive-compulsive disorder. Insomnia or sleepiness, sexual dysfunction, and weight gain may be common side effects [7]. Serotonin-Norepinephrine Reuptake Inhibitors or SNRI groups (venlafaxine and duloxetine) function at two levels: by increasing the amount of serotonin and norepinephrine neurotransmitters in the brain by inhibiting their reabsorption into the cells of the brain. SNRI's, specifically for generalized anxiety disorder, are considered to be a first line treatment. Stomach pain, insomnia, headache, sexual dysfunction, and a mild rise in blood pressure can be typical side effects. For short-term anxiety relief, benzodiazepines (alprazolam, clonazepam, diazepam, and lorazepam) are commonly used. In order to facilitate relaxation and alleviate muscle tension and other symptoms of physical anxiety, they are highly successful. Tricyclic Antidepressants have the same function as benzodiazepines, such as amitriptyline, imipramine, and nortriptyline. They are effective in the treatment of anxiety and have a lower risk of long-term use. Side effects (some of which may be significant) involve orthostatic hypotension, constipation, urinary retention, dry mouth, blurry vision and a decrease in blood pressure upon standing. If you encounter side effects, be sure to contact your doctor, even if you are not sure that a particular symptom is triggered by your anxiety disorder medication. Do not quit taking the drug without talking to the prescribing doctor, as often stopping a medication suddenly can trigger other health risks. By pursuing the treatment plan you and your healthcare provider design specifically for you, you can best treat the condition and reduce the chances of complications. This involves managing the regularly scheduled appointments for checkups and therapy.

CONCLUSION

Insomnia is a common issue that the nursing profession can and should address. It's a concern that's linked to a variety of other medical conditions. It has the ability to worsen other health problems if not treated. In the treatment of insomnia, the nurse's job includes assessing the disorder, discovering potential causes of insomnia, assisting the patient in making lifestyle changes to treat insomnia, and finally, assisting the patient in working with their doctor to use any drugs prescribed for insomnia management.

REFERENCES

1. Willacy H, Tidy C, Chang AS. Psychosomatic Disorders. *J Clin Sleep Med.* 2020;12:1.
2. Schimelpfening N. An Overview of Psychosomatic Illness. *Psychology.* 2020;18(3):393-403.
3. Khetrapal A, Thomas L. Psychosomatic Disorders *J Clin Psychology.* 2002;15(3):1.
4. Cherry K. What Is Cognitive Behavioral Therapy. *Psychotherapy.* 2020;2nd ed.
5. Rohini R. Positive What Are the Five Types of Insomnia? *Psychology.* 2018.
6. Krystal AD, Prather AA, Ashbrook LH. *In Vivo* Exposure Therapy: an update. *Res Nurs Health.* 2019;12: 323-389.
7. Healthgrades ES. Psychosomatic Illness. *Mental Health and Behavior.* 2020.