

Disorder	Symptoms	Bio/Neuro	Psychological	Environmental
<ul style="list-style-type: none"> Reactive Attachment Disorder 	<ul style="list-style-type: none"> Inhibited emotionally Emotionally withdrawn Social and emotional disturbance 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> Related to neglect or insufficient care 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> Disinhibited Social Engagement Disorder 	<ul style="list-style-type: none"> Approaching and interacting with unfamiliar adults in over familiar and disinhibited manner 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> Related to neglect or insufficient care 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> PTSD 	<ul style="list-style-type: none"> After exposure to intense trauma: Recurrent recollection and distress related to neglect or insufficient care Applies to anyone over 6 	<ul style="list-style-type: none"> Smaller hippocampi Hippocampus is important for memory Lower than normal levels of Cortisol High levels of NE can trigger Serotonin plays a role SSRI Betablocker 	<ul style="list-style-type: none"> Intense reactions to trauma but also the reliving of the event through intrusive and recurrent thoughts, images, and dreams Sometimes hallucinations occur Lower IQ Depression Self medicating, negatively reinforced 	<ul style="list-style-type: none"> Traumatic environment
<ul style="list-style-type: none"> Acute Stress Disorder 	<ul style="list-style-type: none"> After exposure to intense trauma, recurrent recollection and distress related to the trauma with marked arousal 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> Adjustment Disorder 	<ul style="list-style-type: none"> Development of behavioral or emotional symptoms within 3 months of the onset of a 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> Separation Anxiety Disorder 	<ul style="list-style-type: none"> Excessive anxiety concerning 	<ul style="list-style-type: none"> Increase in amygdala 	<ul style="list-style-type: none"> Can be a developmental issue 	<ul style="list-style-type: none"> Decrease in parental warmth

	<ul style="list-style-type: none"> separation from home or caregiver • 4 weeks for kids • 6 months for adults 			
<ul style="list-style-type: none"> • Selective Mutism 	<ul style="list-style-type: none"> • Failure to speak in certain situations but not others • 1 month min duration 	<ul style="list-style-type: none"> • Antidepressants are useful 	<ul style="list-style-type: none"> • No evidence 	<ul style="list-style-type: none"> • No evidence
<ul style="list-style-type: none"> • Specific Phobia 	<ul style="list-style-type: none"> • Marked fear or anxiety cued by social or performance situation • 6 month 	<ul style="list-style-type: none"> • Common in families that have phobias • MZ twins high concordance 	<ul style="list-style-type: none"> • Conditioning, both operant and classical 	<ul style="list-style-type: none"> • Environment is the trigger
<ul style="list-style-type: none"> • Social Anxiety Disorder 	<ul style="list-style-type: none"> • Marked fear or anxiety cued by social or performance situations • 6 months 	<ul style="list-style-type: none"> • Runs in families • Amygdala responds differently to novel faces • Less 5HT and Dop in hippocampus • Less Basal Ganglia activity • Biases in attention and memory 	<ul style="list-style-type: none"> • Conditioned association • Internal conflict • Fear of criticism 	<ul style="list-style-type: none"> • Social situations
<ul style="list-style-type: none"> • Panic Disorder 	<ul style="list-style-type: none"> • Recurrent unexpected panic attacks 	<ul style="list-style-type: none"> • Low Gaba levels • Stimulants, carbon dioxide, and sodium lactate can trigger • Oversensitive fear network 	<ul style="list-style-type: none"> • Misinterpretations of physiological sensations • Catastrophic thoughts 	<ul style="list-style-type: none"> • Result from misinterpreting the environment
<ul style="list-style-type: none"> • Agoraphobia 	<ul style="list-style-type: none"> • Fear or anxiety of being in situations from which escape would be difficult if incapacitating or embarrassing symptoms occur • 6 months 	<ul style="list-style-type: none"> • Genetic link • SSRI's indicate serotonin link 	<ul style="list-style-type: none"> • Develop a safe person • CBT • Know their reaction is excessive and unreasonable 	<ul style="list-style-type: none"> • Fear of marketplace or outside world
<ul style="list-style-type: none"> • Generalized Anxiety Disorder 	<ul style="list-style-type: none"> • Nearly constant state of worry and 	<ul style="list-style-type: none"> • Superior temporal gyrus has more grey and white 	<ul style="list-style-type: none"> • Hypervigilant • Illusions of control 	<ul style="list-style-type: none"> • Fear environment because they lack control

	<p>apprehension about a wide variety of events or activities</p> <ul style="list-style-type: none"> 6 month period 	<p>matter, and is larger in R hemisphere</p> <ul style="list-style-type: none"> Sensitive parasympathetic nervous system Disregulation of GABA, 5HT and NE 	<ul style="list-style-type: none"> Worry keeps form having panic attacks Overwhelmed ego 	
<ul style="list-style-type: none"> OCD 	<ul style="list-style-type: none"> Recurrent obsession and compulsions that cause distress 	<p>neural loop- basal ganglia caudate nucleus connection w/ FL, thalamus& BG</p> <p>more grey matter/active FL</p> <p>abnormal birth</p> <p>epilepsy</p> <p>head trauma</p> <p>infection</p> <p>strep (rheumatic fever)</p> <p>PANDA (not latent)</p> <p>Sydenham's chorea (latent 6 mo)</p> <p>too much/ too little serotonin</p> <p>monozygotic 65%</p> <ul style="list-style-type: none"> relatives 10% 	<p>operant conditioning</p> <p>obsessive thoughts</p> <p>unacceptable thoughts</p> <p>attention to perceived threatening stimuli</p> <p>remembering perceived threatening stimuli</p> <p>confidence in accuracy</p>	<p>increased stress</p> <p>socioeconomic stress</p> <p>culture</p> <p>family members' resentment</p>
<ul style="list-style-type: none"> BDD 	<ul style="list-style-type: none"> Preoccupation with imagined or minor physical defect in appearance 	<ul style="list-style-type: none"> Higher prevalence in those who have first degree relatives with OCD 	<ul style="list-style-type: none"> CBT more effective than SSRI 	<ul style="list-style-type: none"> Childhood neglect and abuse Current social standards
<ul style="list-style-type: none"> Hoarding Disorder 	<ul style="list-style-type: none"> Persistent difficulty discarding possessions, resulting in excessive clutter 	<ul style="list-style-type: none"> No psychopharm 	<ul style="list-style-type: none"> Mildly exposing hoarders to get them to get rid of possessions 	<ul style="list-style-type: none"> Clutter everywhere
<ul style="list-style-type: none"> Trichotillomania 	<ul style="list-style-type: none"> Excessive hair pulling 	<ul style="list-style-type: none"> Multiple gene involvement 	<ul style="list-style-type: none"> Negatively reinforced 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> Excoriation 	<ul style="list-style-type: none"> Recurrent picking of the skin 	<ul style="list-style-type: none"> Co morbid with anxiety and depression 	<ul style="list-style-type: none"> No evidence 	<ul style="list-style-type: none"> No evidence
<ul style="list-style-type: none"> Dissociative Amnesia 	<ul style="list-style-type: none"> Unexplained inability to recall 	<ul style="list-style-type: none"> No clear evidence for bio/genetic 	<ul style="list-style-type: none"> Memory loss is the result of unconscious repression 	<ul style="list-style-type: none"> Stressors or overwhelming life events related to onset