

Helping Patients and Families Cope with Psychiatric Illnesses

주요 정신과 질환의 이해와 치료

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Depression

Everyone feels sad sometimes, but these feelings usually pass within a few days. Someone who suffers from depression may have trouble with his or her activities of daily living for weeks at a time. Depression is a serious illness that requires treatment.

* Causes

Several factors may contribute to depression:

- Genetics
People with a family history of depression may be more likely to develop depression than those without a family history of the illness.
- Brain chemistry
Chemicals in the brain are produced and released at different levels in people with depression.
- Stress
Loss of a loved one, a difficult relationship, or any stressful situation may trigger depression.

* Signs and Symptoms

Different people have different symptoms. Some symptoms of depression include:

- Feeling sad or "empty"
- Feeling hopeless, irritable, anxious or guilty
- Loss of interest in favorite activities
- Fatigue
- Not being able to concentrate or remember details
- Not being able to sleep or sleeping too much
- Overeating or not wanting to eat at all
- Thoughts of suicide or suicide attempts
- Aches or pain, headaches, cramps or digestive problems

* Treatment

The first step to getting the right treatment is to visit a doctor or mental health professional. He or she can conduct exams to rule out other conditions that may have symptoms similar to depression, and can determine if other medications may be affecting the person's mood.

1. Medication

Medications called antidepressants work well to treat depression. They can take several weeks to work. Talk to a doctor about any side effects experienced. Most side effects lessen over time. Antidepressants can have the following side effects:

- Headache
- Nausea, feeling sick to your stomach
- Difficulty sleeping or nervousness
- Agitation or restlessness
- Sexual problems

It's important to know that although antidepressants can be safe and effective for many people, they may present serious risks to some, especially children, teens and young adults.

Anyone taking antidepressants should be monitored closely, especially when first starting treatment. For most people, however, the risks of untreated depression far outweigh those of antidepressant medications when used under a doctor's careful supervision.

2. Psychotherapy

Psychotherapy can help treat depression by teaching individuals new ways of thinking and behaving, and encouraging them to change habits that may be contributing to the depression. Therapy can help someone understand and work through difficult relationships or situations that may be affecting the depression.

3. Electroconvulsive therapy

For severe depression that does not respond to medication or therapy, electroconvulsive therapy (ECT) is sometimes used. Although ECT once had a bad reputation, the treatment has greatly improved and can provide relief when other treatments fail. ECT may cause side effects such as confusion and memory loss. Although these effects are usually short-term, they can sometimes linger.

How can I help a loved one who is depressed?

If you know someone who has depression, first help him or her visit a doctor or mental health professional.

- Offer support, understanding, patience and encouragement.
- Talk to him or her, and listen carefully.
- Never ignore comments about suicide and report them to your loved one's therapist or doctor.
- Invite your loved one out for walks, outings, and other activities.

Anxiety Disorder

Anxiety Disorder is an illness characterized by fearfulness and uncertainty. Anxiety is a normal reaction to stress. It helps a person deal with a tense situation in the office, study harder for an exam, or keep focused on an important speech. In a healthy individual, anxiety can function as a coping mechanism. But when anxiety becomes an excessive, irrational dread of everyday situations, it becomes a disabling disorder. People with anxiety disorder are extremely worried about many things, even when there is little or no reason to worry. When these feelings of anxiety last for more than six months, a diagnosis of anxiety disorder can be made.

* Causes

There is no single cause of anxiety disorder. Most scientists agree that many risk factors—such as genes, family history, brain structure or hormones—likely act together to produce the illness.

* Signs and Symptoms

Anxiety disorder can be divided into the following categories, and its symptoms cluster around excessive, irrational fear and dread.

1. Panic Disorder

Panic disorder is characterized by sudden attacks of terror, usually accompanied by a pounding heart, perspiration, weakness, faintness, or dizziness. Panic attacks can occur at any time. An attack usually peaks within 10 minutes, but some symptoms may last much longer. Panic attacks usually produce a sense of unreality, a fear of impending doom, or a fear of losing control. A fear of one's own unexplained physical symptoms is also a symptom of panic disorder. People having panic attacks sometimes believe they are having heart attacks, losing their minds, or on the verge of death. They can't predict when or where an attack will occur, and between episodes may worry intensely and dread the next attack.

2. Obsessive Compulsive Disorder

People with obsessive-compulsive disorder (OCD) have persistent, upsetting thoughts (obsessions) and use rituals (compulsions) to control the anxiety these thoughts produce. For example, if people are obsessed with germs or dirt, they may develop a compulsion to wash their hands over and over again. If they develop an obsession with intruders, they may lock and relock their doors many times before going to bed. People with OCD may also be preoccupied with order and symmetry, have difficulty throwing things out, or hoard unneeded items.

3. Post-Traumatic Stress Disorder

Post-traumatic stress disorder (PTSD) is an anxiety disorder affecting some people who see or live through a dangerous event. It can result from any one of a variety of traumatic incidents, such as mugging, rape, torture, kidnapping, child abuse, car accidents, plane crashes, bombings, or natural disasters such as floods or earthquakes. Most people with PTSD repeatedly relive the trauma in their thoughts during the day and in nightmares when they sleep. People with PTSD may startle easily, become emotionally numb or become more aggressive, or even violent. Symptoms usually begin within three months of the incident but occasionally emerge months or years afterward.

4. Social Phobia

Social phobia is diagnosed when people have an intense, persistent, and chronic fear of being watched and judged by others and of doing things that will embarrass them. They can worry for days or weeks before a dreaded situation. This fear may become so severe that it interferes with work, school and other ordinary activities, and can make it hard to make and keep friends. Physical symptoms that often accompany social phobia include blushing, profuse sweating, trembling, nausea, and difficulty talking.

5. Specific Phobias

A specific phobia is an intense, irrational fear of something that poses little or no actual danger. Some of the more common specific phobias center on closed-in places, heights, escalators, tunnels, highway driving, water, flying, dogs, and injuries involving blood.

6. Generalized Anxiety Disorder

People with generalized anxiety disorder (GAD) go through the day filled with exaggerated worry and tension, even though there is little or nothing to provoke it. They anticipate disaster and are overly concerned about health issues, money, family problems, or difficulties at work. They think things will always go badly. At times, worrying keeps people with GAD from doing everyday tasks.

* Treatment

Anxiety Disorder causes people distress and creates difficulties when doing everyday tasks. If it is not treated properly, symptoms of AD may worsen and cause serious impairments to daily living.

- In general, anxiety disorders are treated effectively with antidepressants or anti-anxiety drugs, specific types of psychotherapy like Cognitive-Behavioral Therapy, or both. The effects of medication can vary depending on the person, and must be discussed with a doctor or mental health professional.
- Anxiety disorder can occur with other mental or physical illnesses, or substance abuse, and can grow worse as a result. Treatment of the anxiety disorder should take place after other concurrent conditions are managed.

How can I help a loved one who has Anxiety Disorder?

If you know someone who has Anxiety Disorder, first help him or her see a doctor or mental health professional. Offer support, patience and encouragement, and remember that the symptoms may be caused by the disorder.

Attention Deficit Hyperactivity Disorder(ADHD)

Attention deficit hyperactivity disorder is one of the most common childhood disorders and can continue through adolescence and adulthood. Symptoms include difficulty staying focused and paying attention, difficulty controlling behavior, and hyperactivity (over-activity). ADHD is a neurobiological disorder that affects three to seven percent of school-age children.

* Causes

Scientists are not sure what causes ADHD, although like many other illnesses, ADHD probably results from a combination of factors. Genes seem to play a large role. Researchers are also studying how brain injuries, nutrition, and the social environment might contribute to the disorder. Studies suggest a potential link between cigarette smoking and alcohol use during pregnancy and ADHD in children. In addition, preschoolers who are exposed to high levels of lead, which can sometimes be found in plumbing fixtures or paint in old buildings, may have a higher risk of developing ADHD.

* Symptoms and the Diagnosis

ADHD has three types.

1. Predominantly inattentive type

Children who show at least six of the symptoms below for six months or more:

- Is easily distracted, misses details, forgets things, and frequently switches from one activity to another
- Has difficulty focusing on one thing
- Becomes bored with a task after only a few minutes, unless doing something enjoyable
- Has difficulty focusing attention on organizing and completing a task or learning something new
- Has trouble completing or turning in homework assignments, often losing things (e.g., pencils, toys, assignments) needed to complete tasks or activities
- Does not seem to listen when spoken to
- Daydreams, becomes easily confused, and moves slowly
- Has difficulty processing information as quickly and accurately as others
- Struggles to follow instructions

2. Predominantly hyperactive-impulsive type

Children who show at least six of the symptoms below for six months or more:

Symptoms of hyperactivity:

- Fidgets and squirms in his/her seat
- Talks non-stop
- Dashes around, touching or playing with anything and everything in sight
- Has trouble sitting still during dinner, school, and storytime
- Is constantly in motion
- Has difficulty doing quiet tasks or activities

Symptoms of impulsivity:

- Is very impatient
- Blurts out inappropriate comments, shows emotions without restraint, and acts without regard for consequences
- Has difficulty waiting for things or waiting his or her turn in games
- Often interrupts conversations or others' activities

3. Combined type

Six or more symptoms of inattention and six or more symptoms of hyperactive-impulsivity are present. Most children have the combined type of ADHD.

Some children with ADHD also have other illnesses or conditions. For example, they may have one or more of the following: a learning disability, oppositional defiant disorder, conduct disorder, anxiety, depression, bipolar disorder, or Tourette's syndrome.

* Treatment

ADHD symptoms usually appear early in life, often between the ages of three and six, and because symptoms vary from person to person, the disorder can be hard to diagnose. Treatments can relieve many of the disorder's symptoms, but there is no cure. With treatment, most people with ADHD can be successful in school and lead productive lives.

Currently available treatments focus on reducing the symptoms of ADHD and improving functioning. Treatments include medication, various types of psychotherapy, education or training, or a combination of treatments.

1. Medication

The most common type of medication used for treating ADHD is called a "stimulant." Although it may seem counterintuitive to treat ADHD with a medication that is considered a stimulant, it actually has a calming effect on children with ADHD. Many types of stimulant medications are available. A few other ADHD medications are non-stimulants and work differently than stimulants. For many children, ADHD medications reduce hyperactivity and impulsivity, and improve their ability to focus, work and learn. Medication may also improve physical coordination.

2. Psychotherapy

Different types of psychotherapy are used for ADHD. Behavioral therapy aims to help a child change his or her behavior. It might involve practical assistance, such as help organizing tasks or completing schoolwork, or can help work through emotionally difficult events. Behavioral therapy also teaches a child how to monitor his or her own behavior, including learning to give oneself praise or rewards for acting in a desired way. Parents and teachers also can give positive or negative feedback for certain behaviors. Clear rules, chore lists, and other structured routines can help a child control his or her behavior.

Therapists can teach children social skills, such as how to wait their turn, share toys, ask for help, or respond to teasing. Learning to read facial expressions and the tone of voice in others, and how to respond appropriately can also be part of social skills training.

How can I help a loved one with ADHD?

Children with ADHD need guidance and understanding from their parents and teachers to reach their full potential. Before a child is diagnosed, frustration, blame and anger may have built up within the family. Parents and children may need special help to overcome negative feelings. Mental health professionals can educate parents about ADHD and how it impacts a family. They also help the child and his or her parents develop new skills, attitudes and ways of relating to each other.

Sometimes, the whole family may need therapy. Therapists can help family members find better ways to handle disruptive behaviors and to encourage behavior changes. Finally, support groups help parents and families connect with others who have similar problems and concerns.

Bipolar Disorder

Bipolar Disorder, also called manic-depressive illness, is a brain disorder that causes unusual shifts in mood. Bipolar disorder severely affects day-to-day life. The manic and depressive moods experienced by those with bipolar disorder are different from the normal ups and downs that everyone goes through from time to time. Bipolar disorder symptoms can result in damaged relationships, poor job or school performance, and even suicide. But bipolar disorder can be treated, and people with this illness can lead full and productive lives. Average age at onset is 20 for both males and females. Some people suffer for years before they are properly diagnosed and treated, because bipolar disorder is not easy to spot when it starts. Like diabetes or heart disease, bipolar disorder is a long-term illness that must be carefully managed throughout a person's life.

* Causes

Most scientists agree that there is no single cause of Bipolar Disorder. Rather, many risk factors likely act together to produce the illness.

- Genes

Bipolar disorder tends to run in families, so researchers are looking for genes that may increase a person's chance of developing the illness. Children with a parent or sibling who has bipolar disorder are four to six times more likely to develop the illness, compared with children who do not have a family history of bipolar disorder.

- Biological factors

Abnormal brain structure and brain function, or an imbalance of key chemicals in the brain, are found in individuals with bipolar disorder.

- Anxiety

Children with anxiety disorders are more likely to develop bipolar disorder.

* Symptoms

People with Bipolar Disorder experience unusual emotional changes and mood swings that can cause sudden behavior changes. An overly joyful or overexcited state is called a manic episode, and an extremely sad or hopeless state is called a depressive episode. Sometimes, a mood episode includes symptoms of both mania and depression. These symptoms occur for most of the day, nearly every day, for at least one or two weeks. Sometimes symptoms are so severe that the person cannot function normally at work, school or home.

1. Manic Episode

- Increased sense of confidence and feelings of happiness
- Restlessness, agitation, short temper or anger over minor matters
- Rapid speech, racing thoughts and jumping from one idea to another
- State of distraction and trouble staying focused
- Increased energy, including trouble sleeping for days
- Impulsive, risky or aggressive behaviors
- Unrealistic beliefs, excessive spending sprees, gambling
- Impulsive or unrealistic business investment, impulsive sex or sexual promiscuity

2. Depressive Episode

- A long period of feeling depressed, sad and worthless
- Loss of interest in activities once enjoyed, including sex
- Fatigue, insomnia or hypersomnia, decrease or increase in appetite
- Trouble concentrating, remembering and making decisions
- Restlessness, irritation and constant worries
- Feelings of worthlessness, or excessive or inappropriate guilt
- Complaints of pain, like stomachaches and headaches
- Thoughts of death or suicide or suicide attempts

* Treatment

1. Medications : Bipolar medications help manage bipolar symptoms and extreme mood swings by helping to correct imbalances in brain chemistry. Medication must be diagnosed and prescribed by psychiatrists or psychiatric nurse practitioners.
2. Psychotherapy : Different kinds of psychotherapy, such as individual psychotherapy, family therapy, Cognitive Behavioral Therapy, and group therapy can help people change their behavior and manage their routines.

How can I help someone with Bipolar Disorder?

There is no cure for Bipolar Disorder, but people can maintain a normal life with ongoing treatment. Support from family and friends is extremely important. Listen to the person with bipolar disorder and encourage him or her to comply with prescribed treatment modalities.

Schizophrenia

Schizophrenia is a serious brain illness. Many people with schizophrenia are disabled by their symptoms. People with schizophrenia may hear voices that other people don't hear. They may think other people are trying to hurt them. Sometimes they don't make sense when they talk. The disorder makes it hard for them to keep a job or take care of themselves.

* Causes

- Genetics
- The environment
- Different brain structure and brain chemistry

* Symptoms

Schizophrenia symptoms range from mild to severe. There are three main types of symptoms.

1. Positive symptoms

- Hallucinations: when a person sees, hears, smells or feels things that no one else can. "Hearing voices" is common for people with schizophrenia. People who hear voices may hear them for a long time before family or friends notice a problem.
- Delusion: when a person believes things that are not true. For example, a schizophrenic individual may believe that people on the radio and television are talking directly to him or her. Sometimes they believe they are in danger, and that other people are trying to hurt them.
- Thought disorders: ways of thinking that are not usual or helpful. People with thought disorders may have trouble organizing their thoughts. Sometimes a person will stop talking in the middle of a thought or make up words that have no meaning.
- Movement disorders: may appear as agitated body movements. A person with a movement disorder may repeat certain motions over and over. At the other extreme, a person may stop moving or talking for a while, a rare condition called "catatonia."

2. Negative symptoms

- Speaking in a monotone voice
- Showing little or no facial expression
- Trouble planning and sticking with an activity, such as grocery shopping
- Limited speech

3. Cognitive symptoms

Cognitive symptoms are not easy to see, but they can make it hard for people to have a job or take care of themselves. They include:

- Trouble using information to make decisions
- Problems using information immediately after learning it
- Difficulty paying attention

* Treatment

There is no cure for schizophrenia. But medication and psychosocial treatment can help control symptoms.

1. Medication

Several types of antipsychotic medications can help, and the type of medication depends on the patient. Sometimes a person needs to try different medications to see which work best for him or her. Medications can cause side effects. While most side effects last only a few days, others take more time to disappear. Patients should always tell their doctor about these problems:

Blurry vision / Involuntary body movements, such as shaking / Dizziness /
Drowsiness / Rapid heartbeat / Feeling restless / Menstrual problems /
Sensitivity to the sun / Skin rashes / Stiffness in the body

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Patients should not stop taking a medication without their doctor's help. Suddenly stopping a medication can be dangerous, and it can make the symptoms of schizophrenia worse.

2. Psychosocial Treatment:

- Family education: ways to help the whole family learn how to cope with the illness and help their loved one
- Illness management skills: ways for the patient to learn about the illness and manage it from day to day
- Rehabilitation: help with getting a job and performing activities of daily living
- Self-help groups: support from other people with the illness and their families
- Therapy: talking with a therapist about living with the illness and learning how to manage symptoms, such as hearing voices or having delusions

How can I help someone I know with schizophrenia?

Caring for and supporting a family member with schizophrenia can be difficult. People with the disorder may not want treatment. They may stop taking their medication. If this happens, you may need help from the police or a hospital. Doctors at the emergency room can check your loved one and decide whether he or she needs professional help.

It's important to respect a person with schizophrenia. But you do not have to allow dangerous behavior. Stay in touch with your loved one's doctors. Talk to them about how to help your family member through good and bad times.

Check to see if there are any support groups in your area. Talking to others who care for people with schizophrenia may help your whole family.

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* 응급 상황에는 어떻게 해야 하나요?

- 의사에게 전화 한다.
- 911에 전화한다.
- 가까운 응급실로 간다.

Need Help?

You can ask your primary care physician and check the phone book for mental health professionals. You can also contact a mental health specialist, such as a psychiatrist, psychiatric nurse practitioner, social worker, psychologist or mental health counselor. Visit a community mental health center in your community. You may be able to request that the school conduct an evaluation.

* What if I or someone I know is in crisis?

- Call your doctor.
- Call 911 for emergency services.
- Go to the nearest hospital emergency room.

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