

B.B. Misra

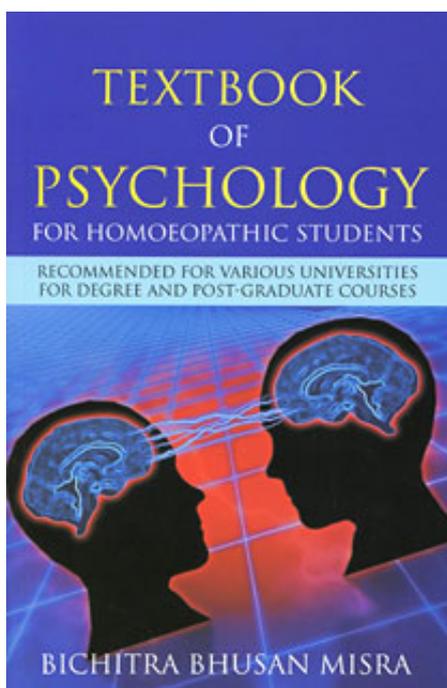
Textbook of Psychology for Homoeopathic Students

Extrait du livre

[Textbook of Psychology for Homoeopathic Students](#)

de [B.B. Misra](#)

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A. ANXIETY

Anxiety may be defined as a painful emotional experience with cognitive, somatic, emotional and behavior involvement giving rise to over concern leading to panic or severe fear, which may be real or imaginary and may be related to present, past, future.

The cognitive involvement of anxiety leads to anticipate a diffused and certain danger.

Somatically involvement sets up the organism -

1. to meet threat, by means of emergency responses like increase in blood pressure and heart rate, perspiration, inhibition of functions of immune and digestive system and
2. express itself externally as pale skin, tremor, pupillary dilation etc.

The emotional involvement results in —

1. a sense of dread or panic and
2. physical expressions like nausea, vomiting, diarrhea, chills etc.

Behavioral involvement entails both voluntary and involuntary behaviors like -

1. carrying on a fight or
2. opting for a flight.

Anxiety serves as a vital survival function; it is a warning system that is activated whenever a person perceives a danger or threat. In anxiety, the symptoms are caused by a rush of adrenaline and other chemicals that get the body ready to make a quick getaway from danger.

B. NORMAL ANXIETY

Nobody is immune from anxiety. Everyone encounters feelings of anxiety from time to time. Anxiety can be explained as a sense of uneasiness, nervousness, worry, fear or dread of what's about to happen?

Feelings of anxiety, which rest on the person and the circumstance, can be mild, moderate or severe. An individual can experience a mild anxiety in the form of uneasiness or nervousness or an intense anxiety in the form of fear, dread, or panic.

Again, it's natural for an individual to go through a state of anxiety under a new, unfamiliar, or challenging situation. For example; facing an important interview, a test or a major class presentation can trigger normal

anxiety in us. Such situations can cause us to feel 'threatened' and not actually a threat to our safety. Of course these can cause us to feel "threatened" by possible embarrassment, worrying about making a blunder, faltering over words, being accepted or rejected, losing self-importance etc. We can also experience physical sensations like throbbing of heart, sweaty hands, or a nervous stomach, which can be a part of normal anxiety, which subsides unconsciously within a reasonable amount of time. Very often an anxiety can be a boon to us. It can make us alert, watchful, and ready to meet the ensuing problems in an efficient manner.

C. ANXIETY NEUROSIS

This term was coined by Freud. In recent days it is superseded by ICD 10 (International Classification of Disease, version 10) to 'Generalized Anxiety Disorder' (see below under 'Anxiety Disorders'). Moreover, patient (rather the client) must not be injured mentally by the label 'neurotic'.

D. ANXIETY DISORDERS

We have already appreciated the positive aspects of anxiety. It helps us handle a tense situation competently in a working place, study harder for an examination, and keep focus on an important oration or talk. But when anxiety becomes excessive, irrational, and too strong, it interferes with our normal functioning and makes us dread in undertaking a routine task. It causes us to feel paralyzed or tongue-tied and we cannot do what we need. It robs away our efficiency and integrity in discharging ordinary ordeals. This excessive, intense, incessant and irrational anxiety articulated in terms of fear, nervousness, worry or dread is called anxiety disorder. Anxiety disorders cause us to feel preoccupied, distracted, tense, and always on alert.

Anxiety disorders can take many shapes. It can make us so uneasy around people that we avoid them, we isolate ourselves from social gatherings and even we miss prospective friendships. It may fill us with various obsessive thoughts or incomprehensible dread of carrying out ordinary activities. Anyhow, we find various types of anxiety disorders, out of which following five types are very important in our day to day state of affairs.

- I. Generalized anxiety disorder (GAD).
- II. Obsessive-compulsive disorder (OCD).
- III. Panic disorder (PD),

- IV Post-Traumatic stress disorder (PTSD).
- V Phobic disorders (*Social phobia being most common*).

I. Generalized Anxiety Disorder (GAD)

We have already talked about normal anxiety. Worrying, more or less is a common affair for all of us. Becoming worry is not always bad. Many a time, worry helps us plan for future, make us sure that we are prepared for the interview or presenting a topic for a seminar etc. May the process of worry be never a pleasant drive but without it nothing seems to walk off smoothly. But what will happen if we cannot produce a positive result for us? And most importantly what is the usefulness of that worry; if we cannot stop it. Rather, we know that it is doing us no good and possibly making everyone unhappy else around us. These features characterize Generalized Anxiety Disorder (GAD).

Generalized anxiety disorder or GAD is characterized by excessive, exaggerated anxiety and worry at everyday life events. Patients who are suffering from generalized anxiety disorder always tend to expect a catastrophe or a disaster form oblivion. Sometimes, just the thought of getting through the day produces anxiety in them. They can't stop worrying about health, money, family, work or working place. Their worries are frequently found to be unrealistic. Moreover, their anxieties are out of proportion to the situation. Their day to day life becomes a constant state of worry, fear and dread. Ultimately, over anxiety interferes with their daily functioning, work, social activities and relationships. They suffer from insomnia, startle easily, can't relax, and have difficult in concentration. They also suffer from irritability, headache, nausea, fatigue, tremor, muscle tension, pain at various parts of body, difficulty swallowing, twitching; sweating, dyspnoea, hot flushes etc.

Anyhow GAD is diagnosed when a person

- a. Suffers from an anxiety, which is incessant, excessive, unrealistic, and finds difficult to control the anxiety about a variety of everyday problems for at least 6 months (The DSM-IV criteria) *DSM and IV stands for Diagnostic and statistical Manual of Mental Disorder and 4th edition respectively.*
- b. having at least three of the following troubles:
 - Restlessness
 - Easily tired

- Difficult concentration
- Irritability
- Muscle tension
- Insomnia

Causes of GAD

The exact cause of GAD is not known, but following 4 factors come out to contribute to its development.

1. *Genetics*: It has a role for the development of GAD as it tends to run in families.
2. *Neurotransmitters*: Various studies have revealed that GAD is associated with abnormal levels of certain neurotransmitters in the brain.
Neurotransmitters are the special chemical messengers, which carry information from nerve cell to nerve cell. Alteration in the level neurotransmitters interferes in carrying messages between cells and thus brain cannot function properly and pave the way to the generation of anxiety.
3. *Emotion*: Mental trauma, stressful events, loss of love or job, death of loved ones; divorce etc. may lead to GAD.
4. *Substance and other narcotis*: The use of and withdrawal from addictive substances, including alcohol, caffeine and nicotine, etc. aggravate anxiety.

II. Obsessive-compulsive Disorder (OCD)

Obsessive-compulsive disorder (OCD) is an anxiety disorder characterized by an individual's obsessive, distressing, intrusive thoughts and related compulsions (tasks or "rituals") which endeavors to diffuse the obsessions. Let us bifurcate the word and go for the definition as fixed by *DSM-IV diagnostic criteria*.

Obsessions may be defined as:

1. recurrent and persistent thoughts, impulses, or images that are experienced by an individual at some time during the disturbance, which are invasive and inappropriate and they cause marked anxiety or distress,

2. whereas the corresponding thoughts, impulses, or images are not simply excessive worries about actual life problems,
3. moreover, the individual attempts to ignore or suppress such thoughts, impulses, or images, or to neutralize them with some other thoughts or actions,
4. and the individual recognizes that the obsessive thoughts, impulses, or images are a product of his or her own mind, and are not based on reality.

Examples of some OCD obsessions:

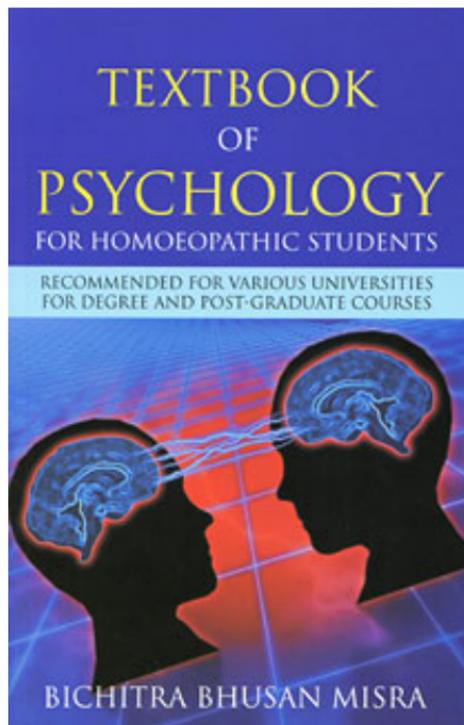
1. germs or dirt
2. illness or injury (involving the individual or somebody else)
3. across unlucky numbers and day (say 13 or 9 or day like Friday or Saturday)
4. things being perfect or just right in a certain way (i.e. fastidious approach)
5. committing a mistakes or not being sure of it.
6. doing or thinking something negative.

Compulsions may be defined as:

1. repetitive behaviors or mental acts that the individual feels driven to perform in response to an obsession,
2. whereas the behaviors or mental acts are clearly excessive in nature and directed to preventing or reducing distress (or some dreaded event or situation) but the behaviors or mental acts are not linked in a pragmatic way with what they are intended to prevent the said distress (or the dread event or situation).

Example of some OCD compulsions:

- A lady may wash hands every now and then
- A student may count 15 shops on the way before reaching the college
- An individual may touch every light pole between home and the railway station
- An adolescent may touch everybody's right (or left) shoulder in a clinic or school
- Everyday a student gives gentle stroke to every classmates who sit on benches in the classroom



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