

# Dissociative disorder

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## Dissociative disorders

It is disturbance in the functioning of conscious, memory ,identity , or perception ..  
The onset may be sudden or gradual ,  
transient or chronic .



## 1. Dissociative Amnesia

Sudden onset of memory impairment & usually of personal information .it's either :

- A . Circumscribed type : in which the patient fail to recall all event during circumscribed period.
- B . Generalize type : in which the patient fail forget all event during his past life .

There is a preservation of cognitive skill ,as reading a writing , how to use telephone No. ,this is usually a diagnostic of amnesia.

Usually began & end suddenly .

Usually precede by stressful life event

D.D Alcoholic amnesia, epilepsy ,post concussion syndrome, organic cause.



## 2. Dissociative fugues

It is a travelling away from home ,or work during amnestic period.

The work is usually purposeful which differ from work in (Dissociative amnesia )which is vague , usually last from few hours few doge

- Patient is usually has a new identity .
- Patient is usually precede by stressful condition
- D.D : alcoholism , TLE , Depression .



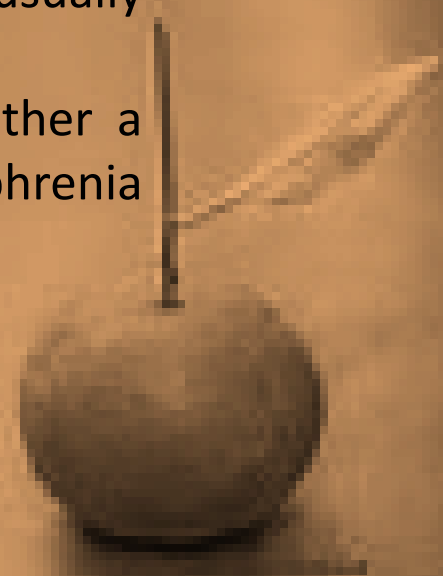
### 3. Dissociative identity disorder

(**multiple personality disorder**) it is rare , in which patient has one or more new and different personalities , each personality is separate from other personality and not know each other's. it's may run in a prolong course .

### 4. Depersonalization disorder

Depersonalization : is feeling of unreality of self & usually described “ as if

Derealization : is feeling of unreality of environment , either a symptoms of other psychiatric disorder as schizophrenia ,Alcoholism . panic disorder , acute stress disorder .



## Or its as a disorder

In which the patient feel of detachment from one's self . There is may a sensation of being outside of one's mental process , one's body or parts of one body –like sensory anesthesia ,lack of affecting response,



## Factitious Disorder

1. The essential feature is intentionally production of physical or psychological sign & symptoms The presentation may include .
    - a. Fabrication of subjective complain an complain of abdominal pain in absence of such complain.
    - b. Self inflicted condition as production of abscess by injecting of saliva into skin .
    - c. Exacerbate or exaggeration of previous condition as grand male epilepsy in patient has previous epilepsy.
- The motivation in assume the sick role ,  
the external incentive as ( financial , avoid responsibilities )is absent



2. psychological lying about their aspect of his illness( pseudo logia fantastic)
3. Travelling along distance for seeking hospitalization.
4. Patient has great Knowledge about technology or invasive investigation
5. Patient may undergo many surgical operating or invasive investigation
6. After confrontation about his illness (that his condition is factious ) the patient deny it , or may discharge himself for seeking admission to another hospital .

The syndrome called previously (Munchausen syndrome ) or (Hospital addiction )

In which disorder described by Asher 1951 characterize by seeking admission – travelling –lying



## Factious disorder by proxy

In which parent usually mother give false information about child symptom or undergo unnecessary investigation or the mother may injure her child .



## Malingering

The individual produce symptoms and signs intentionally either psychological or physical symptoms .

But the goal is clear when environmental condition are known as ( avoid exam's , standing trial ).

There's external incentive . It is occur consciously.



