A.M.B.E.R. clinic
Albuquerque Multidisciplinary Behavioral Evaluation for Recovery and Resliency

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"Dyscontrol & Dysregulation"

- PTSD
- TBI
- I/DD
- Identification of symptoms
- Management strategies

"Dis is A Problem in Clinic"

- Disruption in waiting room
- Appointments longer than scheduled
- Repeated requests
  - Same information
  - Replace Rxs
  - Repeat instructions
- Seem to be asking for world to be fixed
  - "Can't work with _____ (person)"

Why these diagnoses?...
(not an exhaustive listing)

- PTSD: traumatized person with hyper-responses to "ordinary stimuli"
  - [Will review diagnosis in future session]
  - Generalized; high amplitude responses
- TBI: over-reactive to mild stimuli
  - Cumulative effect of inputs
  - Delayed discharge
- I/DD: inability to modulated responses
  - Stereotyped responses (over-learned)

Effect of high arousal

○ **Increased autonomic arousal**

    ○ **Pulse increased**

    ○ **Shallower breathing**

    ○ **Broader visual field -- scanning**

○ **Increased speed of thinking or slowed thinking**

○ **Sense of urgency**

Frontal lobe functions

○ **Executive Functions**

- Initiation; Motor planning
- Problem solving; Judgment
- Inhibition of behavior; Planning/anticipation; Self-monitoring
- Personality/emotions; Awareness of abilities/limitations
- Organization
- Attention/concentration
- Mental flexibility
- Speaking -   expressive language

○ **Integrative function**

Darkcontrol

- **Impulse Control Disorder**
  - **Difficulty modulating impulses**
  - **Eating; Touching…**
  - **Disregard for safety**
- **Intermittent Explosive Disorder**
  - **Sudden, violent affective change**
  - **+/- dangerous behavior**

Coping with anxiety

○ **Recognized**

  ○ **Purpose: defense, performance**

  ○ **Maximal focus of attention and analysis → effective action**

○ **Unrecognized**

  ○ **Ambush: perceived as attack**

  ○ **Increases unfocused arousal, increases speed of thought; react defensively**

  ○ **may stall analysis → paralysis**

Dysregulation

○ **Poor modulation of affect and actions; inconsistency**

○ **Speech: production & content**

○ **Common with TBI; action with thought, followed by analysis**

○ **Look for parallel processes across homeostatic systems (appetite, sleep…)**

Medications for impulsivity

○ **All people slow down with general anesthesia – not the goal.**

○ **Decrease arousal:**

   ○ **beta-blockers, anticonvulsants**

   ○ **benzodiazepines may disinhibit further**

   ○ **SSRI – for agitation/anxiety**

○ **Increase focus & accessible logic:**

   ○ **antipsychotics, stimulants, antidepressants, anxiolytics**

Medications for dysregulation

- Mood stabilizers
  - Lithium; AEDs
- Antipsychotics
  - high v low potency (rationales)
- Regularize sleep; R/O medical factors
- Substance abuse – prescribed/street

Anxiety

- Identify patterns; antecedents; results of repeated anxiety attacks

- Benzos for short- term use (acute) or as adjunctive therapy

- Tricyclic antidepressants

- Buspirone; SSRI; SNRI; beta/alpha blocker; antipsychotics as adjunctive therapy

Environment

- Safety: immediate & on-going
- Security: shelter, food, relationships, money, stress-reduction
- Noise; reliable structure of time/place; respect & being welcomed
- Routines; having value
- Flexibility v Reliability

Adjunctive therapy

○ **Psychotherapy**

   ○ **increase insight into habitual patterns**

○ **CBT – realistic reappraisal of apparent stressors & choosing type of response**

○ **Work opportunities**

Other "x" factors

- Pain

- Endocrine imbalance

- CNS occult lesions; residual from trauma (TBI)

- Personality disorder (Narcissistic; Antisocial)

Influence of cognitive impairment

- Intellectual functioning doesn't preclude comprehending consequences of actions – over time; at level of cognitive abilities

- Insight does not equal Intent or Control

- Stepwise instructions; small changes in dose (when there is time)

Next presentation:

- **8-28-2012**
- **"Clinical Assessment"**

  Techniques, Strategies, Adaptations

resources and back issues can be found at Continuum of Care website:
http://som.unm.edu/coc/Training/powerpointnew.html

CME/CEU

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