

Key

### Abnormal Psychology: Case Studies

Part I: You may use your "cheat sheet" to properly diagnose the following case studies. Beware-there may be a few case studies in which there is no diagnosis(no psychological disorder).

**Case 1:** A young man believed that he was destined to become Emperor of the United States. "I could do a lot for the world," he said, "The U.S. has presidents, will it ever have an emperor? I'll bet you think I'm nuts to ask about that. I must have the morning paper to keep track of world affairs. If the people of the United States want me to rule them, I'm willing to do so; but no one has been to see me and tell me. I'll be glad to lead them." Later he spoke of hearing public announcements that he was to be crowned emperor. "It's been heard all over the country... The world is in chaos. Thousands will be killed. I'm not a god or a devil, but I'm a supernatural being. All nations will be under his rule but Egypt." Along with these delusional convictions, the patient believed that attempts to kill him were repeatedly being made so that he lived, like Damocles, in constant danger.

Symptom(s): Delusions of grandeur. Delusions of persecution

Diagnosis: Schizophrenia (+) Symptoms

**Case 2:** A workman, while attempting to throw an electrical switch, was thrown to the ground by a "shock". Shortly thereafter he discovered that he could not use his right leg. He was bedridden for several months and later could move about only with the aid of crutches and a brace. A suit for a large sum was brought against the company for which he had been working at the time of the accident. In the course of the trial, evidence was presented indicating that the switch had been carrying a much lower voltage than the workman had supposed it carried. Furthermore, the switch was so constructed that it seemed almost impossible for anyone to receive a shock from it. A medical examination showed that there was no nerve injury as the man claimed and that no damage had been done to the muscles of the leg. Nevertheless, the man was unable to use his leg and so was unable to earn a living for his family. The court allowed the man some compensation, though not nearly as much as he had demanded. The case was closed. Within a short time thereafter all symptoms of paralysis disappeared. The man was able to perform his duties as well as ever.

Symptom(s): Physical ailment w/out cause.

Diagnosis: Conversion Disorder

**Case 3:** Donald (age 22) attended college at night while working to support his 45 year old mother. He was in love with a girl whom he hoped to marry. Donald's mother, however, did not like the girl and tried to break them up. The girl could see that Donald would never be able to support both her and his mother. She also knew that the three of them could never get along together under the same roof. She gave Donald a month to decide what to do about it. A week before the deadline, he suddenly disappeared. He was found two weeks later in another state, completely unable to say who he was, where he was, or what he was planning to do. He could not recall, or even recognize, the name of either his mother or his girl friend.

Symptom(s): Sudden travel - loss of identity. Amnesia  
Fugue

Diagnosis: Dissociative ~~Fugue~~  
Amnesia

**Case 4:** A man had fear of the number thirteen. At first he controlled his fear by staying in bed on the thirteenth of each month, thus avoiding contact with the calendar and newspaper dates. One day he realized that the word twenty seventh had thirteen letters, and he began spending two days a month in bed. Later he avoided passing a sign which had thirteen letters in it that hung on his normal route to work; he began to hop over the thirteenth step in each flight of stairs. Finally all his actions revolved around his fear.

Symptom(s): Specific phobia. Significant impairment of daily life.

Diagnosis: Phobic Disorder

**Case 5:** A man married against his family's wishes. He lost his job and was forced to appeal to his family for support. An uncle gave him some money, but warned him he would get no more unless he divorce his wife. On the way home the patient was held up and his money taken from him. He decided to jump into the river. But on the way to the river he forgot who he was and where he lived and that he was married; nor could he account for his being in the locality. He became perplexed and alarmed and asked a policeman for help. He was taken to a hospital and one day later, recovered his memory of these incidents and his identity under hypnosis.

Symptom(s): Loss of memory, identity.

Diagnosis: Dissociative Amnesia

**Case 6:** A brilliant student, Clarence, suffered a severe breakdown during his third year of college and was admitted to a mental hospital. While he was in the hospital Clarence heard voices and often talked of a machine to control human thoughts. Once the therapist approached him on the hospital grounds and called his name but was unable to get his attention. Clarence was staring into space, the tip of his index finger pressed against his lips. The therapist found it difficult to move the finger but finally succeeded in raising Clarence's arm above his head. There it remained in the awkward position in which the therapist had placed it. The therapist pinched Clarence and stuck him with a pin, but Clarence did not move an eyelid. For ten days he remained silent and motionless and had to be force fed. Then suddenly he emerged from this state, exclaiming, "I have been born again."

Symptom(s): Hallucinations. Catatonia. Delusions of grandeur

Diagnosis: Schizophrenia (+) + (-)

**Case 7:** Jim, a soldier, is in an Army Medical hospital. He complains of a loss of sensation in his fingers. He also complains that he cannot see, although a competent oculist examined his eyes and found nothing wrong. It seems strange that Jim is calm about his disorder even to the point of feeling indifferent about it. Except for this, his personality seems intact.

Symptom(s): Physical ailment w/out actual cause.

Diagnosis: Conversion Disorder.

**Case 8:** Morris has been referred to you for psychotherapy following a suicide attempt. When you interview him he is very teary. He speaks slowly and looks down at the ground as he speaks. He reports difficulty in falling asleep and

staying asleep for the past month. Morris states that he hasn't had much of an appetite and has lost 15 pounds. He reports that things he used to like just don't seem enjoyable anymore, and he thinks that life is not worth living. Morris doesn't expect things to improve in the future, which is why he tried to kill himself.

Symptom(s): Lack of appetite. Anhedonia. Suicide attempt. Insomnia  
Major disruption of mood.

Diagnosis: Major Depressive Disorder

**Case 9:** Amy, age 38, is a worrier. She is restless, irritable and has difficulty concentrating. She worries that she worries so much and isn't always sure what it is that she is worried about. She can't let her husband or children leave the house without making them call her regularly to reassure her that they are ok. Her husband is growing weary of her fretting. Her children can't understand what all the fuss is about. Their impatience with her only makes her worry more.

Symptom(s): Chronic, high level of anxiety. Impairment w/ daily life + others

Diagnosis: Generalized Anxiety Disorder

**Case 10:** A 28-year-old woman is a rising junior executive in her investment company. Her increasing duties require her to make periodic formal presentations to the senior management of the company. However, she becomes intensely anxious at the thought of speaking in public. When she is forced to give a presentation she begins to feel anxious days in advance of the talk and the anxiety increases as the time for the talk approaches. She is concerned that her anxiety will become noticeable during the talk or that she will do something to embarrass herself.

Symptom(s): Fear of a situation in which one could embarrass oneself in public.

Diagnosis: Social Phobia Anxiety Disorder

**Case 11:** A 28-year-old woman was walking through her local shopping mall when she began to feel intensely anxious. The anxiety was accompanied by sensations of choking, smothering, and a sudden sense that the people and stores around her were unreal. She began to fear that she was going crazy and the more she worried about this the more anxious she became. A guard, seeing that she was in distress, brought her to the mall office where she was able to lie down. A few minutes later the symptoms began to subside. She went home after leaving the mall but she did not tell her husband what happened. A week later she had a similar attack while she was walking down the street. She was able to reach her house where she lay down until the attack ended. In the following three weeks she had two or more attacks. Between attacks she was constantly worried about having another attack. The patient was finally forced to tell her husband about the problem because she was so fearful of not being able to get help if an attack occurred that she would not leave her house alone or travel on public transportation.

Symptom(s): Panic attack. Physical ailments. Major disturbance to everyday life

Diagnosis: Panic Disorder w/ Agoraphobia

**Case 12:** A 26 year old man is very concerned about cleanliness and hygiene. He spends a significant amount of time each day washing his hands or showering, especially after touching a toilet seat, doorknob, or any other item he

thinks may be dirty or contaminated. The patient explains that he is concerned about becoming infected or sick from touching these objects. He periodically acknowledges that the washing is excessive but explains that he becomes very anxious when he tries to avoid washing and eventually feels compelled to wash even more to make up for the omission.

Symptom(s): Obsessions - infected, sick  
Compulsions - washing / showering

Significant impairment  
in everyday life.  
Acknowledges it is  
excessive.

Diagnosis: Obsessive-Compulsive Disorder

**Case 13:** Lenore has been feeling very sad since her husband died 12 days ago. She has eaten very little, and has difficulty sleeping. She is weepy most of the time. Lenore is preoccupied with thoughts of her dead husband and does not want to do much other than thinking about him. She has declined all invitations by friends and spends most of her time alone.

Symptom(s):

Diagnosis: Nothing. Normal bereavement

**Case 14:** Jack has been hearing for several months the same voice, which makes derogatory accusations about his being a sexually immoral pervert. This same voice often commands him to do such things as throw furniture out of the window. His speech is monotonous except when he is talking about his troubles, at which time it becomes quite animated and vehement. His sentence structure is often shattered and his statements are usually incoherent, since they consist of a sequence of apparently unconnected words. An example of his speech is "The pipe tail on the bed, the TV said, a brown came out of the lawn, the flowers are board walk." He also coins new words such as "labicator" which he said was an important chemical that will be used to purify the world.

Symptom(s): Hallucinations. Flat Affect. Word Salad. Neologism

Diagnosis: Schizophrenia (+)

**Case 15:** Midge become depressed and asked to return to the hospital where she had been a patient. She then become overactive and exuberant in spirits and visited her friends, to whom she outlined her plans for reestablishing different forms of lucrative businesses. She purchased many clothes, bought furniture, pawned her rings, and wrote checks without funds. For a period thereafter she was depressed. In a little less than a year, she again become overactive, played her radio until late in the night, smoked excessively, took out insurance on a car that she had not yet bought. Contrary to her usual habits, she swore frequently and loudly, created a disturbance in a club to which she did not belong, and instituted divorce proceedings. On the day prior to her second admission to the hospital she purchased 57 hats.

Symptom(s): Mania. Depression. Impulsive behavior. Bad decision making.

Diagnosis: Bipolar Disorder