Mental Health Nursing: Psychophysiologic (Somatoform) Disorders

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Somatoform Disorders

- Psychophysiological disruptions with no evidence of organic impairment
- Related to maladaptive response to stress

Alarm ⇒ Resistance ⇒ Exhaustion
Mind-Body Connection

- Psychoneuroimmunology explores the relationship between psychological states, the immune system, and health
  - Extends to cellular level
  - Can affect sleep, psychological, and sociocultural disturbance
- Resilience, optimism, perceived control, and self-efficacy can help buffer against adverse affects of stress
Illness as Coping Mechanism

- Unconscious coping with anxiety/overwhelming stress
- Pt’s need to avoid the basic conflict is very strong
- Premature attempts to remove coping mechanism can cause worsening of illness or suicide
Defense Mechanisms

- **Repression** - physical symptoms occur when approaching exhaustion from denial of feelings, conflicts, and unacceptable impulses.

- **Compensation** - trying to prove health by exerting more, even when needing more rest.

- **Regression** - increased dependency, and embracing the sick role to avoid responsibility or dealing with conflict.
Medical Diagnosis

- Somatization disorder - many physical complaints
- Conversion disorder - loss or alteration of physical functioning
- Hypochondriasis - fear of illness or belief that one has an illness
- Body dysmorphic disorder - normal appearance, but concerned about physical defect
- Pain disorder - psychological factors have role
- Sleep disorders - usually insomnia, hypersomnia or narcolepsy
Treatment of Somatoform disorders begins after thorough medical evaluation and treatment of physical illness.

May include multidisciplinary sleep studies.

Assess subjective and objective symptoms, and pt responses.
Examples: Nursing Diagnosis

- Impaired adjustment r/t inability to express hostile feelings evidenced by labile hypertension and gastric ulcer
- Chronic pain related to work pressures e/b reports of back pain and protected gait
- Sleep pattern disturbance r/t financial and familial concerns e/b difficulty falling asleep and frequent awakening
- Ineffective denial related to traumatic life events e/b symptoms affecting sight
Physiological Implementation

- Physiological Support:
  - Encourage physical activity
  - Diet counseling/balanced meals
  - Decrease caffeine, alcohol, or drugs
  - Utilize healthy sleep strategies
  - Assist with ADLs as needed
Psychiatric Implementation

- Develop trusting relationship
- Don’t try to convince the pt that the problem is entirely psychological
- Be supportive, and talk with pt while providing physical care
- Provide feedback for attempts to express emotions
Psychiatric Support:

- May include supportive therapy, insight therapy, group therapy, cognitive behavioral strategies, family therapy, stress reduction, and/or psychopharmacology
- Carefully identify/explore pt defenses
- Support new coping mechanisms and behaviors
- Build self-esteem and confidence
- Report signs of increased anxiety
Patient Education

- Health education is very important
- Instruct about medications, treatments, and lifestyle changes
- Give pt and family follow-up care and crisis management information
- Patient education to learn ways to cope with anxiety and stress
- Encourage group classes/support groups for stress management
Care of patients with somatoform disorders is complex.

Person with conversion disorder may substitute another symptom when original one is resolved (if the basic conflict remains).

Treatment plan may need to be modified several times.
What is Countertransference?

- An emotional response of the nurse generated by the pt’s qualities
- Inappropriate to the content and context of the therapeutic relationship
- Inappropriate emotional intensity
- Situation may worsen with avoidance, or if nurses become anxious or impatient
- Experienced psychiatric nurses are preferable with these demanding pts
Understand Your Patient

- Somatoform illness and symptoms
  - Prevents pt’s overwhelming anxiety
  - Provides a way to receive help without admitting the need
  - Protects from expressing frightening aggressive or sexual impulses
Patient Outcome/Goal
- Patient will express feelings verbally rather than through the development of physical symptoms

Nursing Evaluation
- Was nursing care adequate, effective, appropriate, efficient, and flexible?
References