Anxiety disorder

*BIODATA:*

NAME: JENNIFER NYAMBURA.

AGE: 58 years.

SEX: female.

MARITAL STATUS: married.

RESIDENCE: MURANG’A.

RELIGION: Christian.

MODE OF ADMISSION: voluntary.

*PRESENTING COMPLAINS:*

The patient is scared while sleeping and fears people.

*HISTORY OF PRESENTING COMPLAINS:*

The above complains started 1 week ago after a quarrel with her husband over his excessive drinking *.*From then she started experiencing palpitations, sweating, abdominal distress whenever she sees a crowd or goes to sleep.

*PSYCHIATRIC HISTORY:*

The illness started in 2008 when she experienced similar symptoms. It came about after a quarrel with the husband over his excessive drinking. She attended clinic 24 and was put on medication. However, the symptoms have recurred twice since then when she stopped her medication.

*PAST MEDICAL HISTORY:*

In 2006, the patient had severe typhoid and was admitted and discharged after 1 wk. she has not had any surgery.

*OBSTETRICS AND GYNAECOLOGY:*

She had menarche at 14 years and her attitude towards it was normal. Her menses were regular. She delivered all her 6 children normally. She experienced menopause at age 51 years.

*FAMILY HISTORY:*

The patient’s parents are both dead. She has 7 living siblings and one passed away from cerebra-vascular accident (stroke). She’s the sixth born.

Father: died in 1973 of appendiceal rupture complications.

Mother: died in 1995, she was diabetic and died of diabetic complications.

* 1st born: Wanjiru, a businesslady.
* 2nd born: John, a businessman.
* 3rd born: Kamau, a businessman.
* 4th born: Mercy, a teacher.
* 5th born: Wachira, a businessman.
* 7th born: Njoroge, a businessman.
* 8th born: Moses, a businessman.

She had a good relationship with both her parents and also relates well with all her siblings. The family has no history of psychiatric condition.

*PERSONAL HISTORY:*

**Prenatal, perinatal and childhood:**

Patient can’t remember much of her childhood.

**Education:**

She went to Kibara primary school. Was disciplined, average performance and related well with fellow classmates. she never proceeded to high school due to lack of fees. she stayed at home and helped with household chores.

**Occupation:**

She has been a farmer before and after marriage.

**Marital history:**

Was married to Joseph Mwangi in 1979. She complains that her husband drinks a lot since 2006 hence frequency in their quarrel. She has a good relationship with all her children.

**Psychosexual:**

For the last 15 years her husband has failed to satisfy her sexually. Previously she has had sex with 2 other men before marriage. She’s aware of HIV/AIDS.

**Forensic history:**

She has never been arrested.

**Substance use and abuse:**

She has no history of drug abuse. She doesn’t smoke or drink.

**Pre-morbid personality:**

She was social before but now finds herself worrying a lot and is sad of her future’s uncertainity**.**

**Biological systems:**

Has sleeping disturbances, decreased appetite but has no problems with bowel movements.

*MENTAL STATE EXAMINATION*:

**General appearance:**

Patient was clean and well kempt.

Maintained good eye contact and had appropriate facial expression. Her psychomotor activity was normal.

**Speech**:

* Rate: normal.
* Tone: normal.
* Volume: low.
* Flow: good.

The patient was coherent and articulate.

**Thought:**

* **Process:** normal.
* **Content:** agoraphobia**,** no suicidal or obsession thoughts**.**
* **Control**: no thought insertion, block or broadcasting.

**Perceptual disturbances:**

No visual or auditory hallucinations and no illusions reported.

**Mood and affect:**

Mood was depressed and affect was congruent with her mood.

**Cognition:**

* Sensorium**:** the patient was conscious and alert with no mental clouding.
* Orientation: the patient was oriented with time, place and person.
* Attention: she was attentive during the interview.
* Concentration: she performed the serial 7.
* Memory: recall, recent and remote memory was not impaired.
* Judgement: she interpreted a proverb.
* Abstract thinking: not impaired.

**Insight**: the patient had insight.

*FORMULATION:*

Jenifer Nyambura, a58 year old farmer from Murang’a fears people and is scared when she goes to sleep. She has had these complaints since 2008.these symptoms are triggered by stress due her husband excessive alcohol intake and hence quarrel with him.

*MULTI-AXIAL DIAGNOSIS:*

AXIS 1: psychiatric disorder: anxiety disorder. Differential diagnosis: depressive disorder.

AXIS 2: developmental disorder/personality disorder: none.

AXIS 3: general medical condition: had typhoid in 2006 but was diagnosed.

AXIS 4: psychosocial and environmental stressors: her husband stresses her due to his excessive drinking.

Axis 5: GAF: 80

*MANAGEMENT:*

**Investigation:**

* **Physical:** lab evaluation.
* **Social:** corroborative history, social workers.
* **Psychological:** psychotherapy.

**Treatment:**

* **Physical:** pharmacotherapy.
* **Social:** manipulation of environment.
* **Psychological:** psychotherapy; counseling, and stress management.

*PROGNOSIS:*

With proper management, prognosis is good.