

Dissociative Disorders Worksheet:

Dissociative Disorders	Answer	Matching Options
Dissociative Identity Disorder (DID)		A. This disorder involves significant memory loss that cannot be attributed to a medical condition. The memory loss is typically of autobiographical information and can range from specific events to extensive periods of time.
Dissociative Amnesia		B. Often occurring in prisoners facing significant stress, this rare disorder is characterized by the giving of approximate answers to simple questions (e.g., '2 plus 2 equals 5'), clouding of consciousness, and other dissociative, hysterical, or conversion symptoms.
Depersonalization-Derealization Disorder		C. This condition involves not only sudden, significant memory loss of autobiographical information but also an apparently purposeful and sudden travel away from one's home or customary place of daily activities, with confusion about personal identity or the assumption of a new identity.
Dissociative Amnesia with Dissociative Fugue		D. A disorder marked by persistent or recurrent episodes of feeling detached from one's own body or thoughts and/or a sense of unreality or detachment from one's surroundings, occurring in a conscious and alert state.
Dissociative Neurological Symptom Disorder		E. A disorder presenting with neurological symptoms such as non-epileptic seizures, paralysis, or sensory loss, in the absence of a neurological diagnosis, typically as a response to psychological stress or trauma.
Ganser Syndrome		F. A condition characterized by the presence of two or more distinct personality states or identities that recurrently take control of the individual's behavior, accompanied by an inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness.

Case Study Exercises

Case Study 1

Sarah, a 22-year-old college student, frequently feels detached from her body and surroundings. She describes it as watching herself in a movie, feeling disconnected and unreal. These episodes can last hours and are often triggered by stress or lack of sleep. Despite her awareness during these episodes, she struggles to connect emotionally with her experiences. Sarah is concerned about her ability to maintain relationships and perform academically.

This is an example of which disorder: _____

What is your treatment plan: _____

Case Study 2

During an interview in a high-security prison, 38-year-old Tom responds to simple questions with clearly incorrect answers, such as stating that cats are bigger than elephants. He also shows brief periods where he appears confused about the date or his location, despite being alert moments earlier. Staff have observed Tom mimicking the symptoms of fellow inmates, including limping or twitching, though medical tests show no physical cause. His behavior is inconsistent and seems to fluctuate with his stress levels.

This is an example of which disorder: _____

What is your treatment plan: _____

Case Study 3

Emma, a 30-year-old former dancer, now reports sudden episodes of blindness that medical examinations show have no organic basis. These episodes began shortly after a traumatic breakup. Psychological evaluations suggest that the blindness may serve as a protective escape from emotional pain. Despite the disability, Emma expresses a subconscious relief during these periods, as they excuse her from facing stressful situations.

This is an example of which disorder: _____

What is your treatment plan: _____

Case Study 4

Carlos, a 34-year-old teacher, suddenly cannot remember anything from the past five years, including his move to a new city. He recognizes his family and knows his own identity but is unable to recall his current job or recent personal events. His colleagues report he seemed normal the day before, and medical tests rule out brain injury or disease. Carlos feels distressed by the gaps in his memory and is eager to understand what triggered this loss.

This is an example of which disorder: _____

What is your treatment plan: _____

Case Study 5

Jamie, a 28-year-old graphic designer, has been experiencing blackouts since childhood, often finding unfamiliar items among their possessions or hearing stories of their actions that they don't recall. Their therapist notes drastic shifts in demeanor, voice, and preferences during sessions, suggesting distinct identities. Jamie reports feeling like an observer of their own life, unable to control actions or recall events. Friends and family are often puzzled by Jamie's seemingly unexplainable knowledge of skills or information previously unknown to them.

This is an example of which disorder: _____

What is your treatment plan: _____

Case Study 6

After being reported missing for three days, 45-year-old Michael was found in a town 200 miles from his home, with no memory of his identity or how he got there. He was using a different name and had started working in a local diner, appearing to have formed a temporary new life. Once recognized by a family friend, Michael expressed complete confusion and distress. His last memory before the episode was feeling overwhelmed at work and at home.

This is an example of which disorder: _____

What is your treatment plan: _____

Answers

Matching
F
A
D
C
E
B

Case Study 1: Depersonalization-Derealization Disorder

Sarah experiences chronic feelings of detachment from her body and surroundings, perceiving herself as if in a movie. This persistent sense of unreality in awareness of self and environment is indicative of Depersonalization-Derealization Disorder.

- **Pharmacological:** Antidepressants, particularly SSRIs, and sometimes anti-anxiety medications, are used to decrease the frequency and intensity of depersonalization episodes.
- **Nonpharmacological:** Cognitive-behavioral therapy (CBT) is effective, focusing on techniques to engage reality and improve grounding. Mindfulness and meditation can also help patients reconnect with their feelings and surroundings.

Case Study 2: Ganser Syndrome

Providing approximate answers to simple questions (such as incorrect size comparisons), displaying confusion about basic facts, and mimicking behaviors of others, particularly under stress and in a prison setting, align with Ganser Syndrome.

- **Pharmacological:** Treatment may include the use of antipsychotics or mood stabilizers if there are associated psychotic or mood disturbances.
- **Nonpharmacological:** Psychotherapy, particularly supportive therapy, can help address the underlying stress and trauma that may trigger the syndrome. Cognitive therapies can assist in managing the disorientation and dissociation.

Case Study 3: Dissociative Neurological Symptom Disorder

Emma exhibits neurological symptoms (blindness) that lack a medical basis and seem to arise in response to psychological stress, typical of Dissociative Neurological Symptom Disorder.

- **Pharmacological:** Medications are typically used to treat associated symptoms such as pain, depression, or anxiety rather than the dissociative symptoms themselves.

- **Nonpharmacological:** Cognitive-behavioral therapy aimed at symptom management and addressing underlying psychological issues. Physical therapy might be used to help manage or improve physical symptoms, like paralysis or gait problems, without organic cause.

Case Study 4: Dissociative Amnesia

The sudden loss of memory specific to recent personal events and his life changes over the past five years, with retention of older memories and knowledge of identity, align with Dissociative Amnesia.

- **Pharmacological:** There are no specific medications for treating dissociative amnesia. Treatment may include medications for accompanying symptoms such as depression or anxiety.
- **Nonpharmacological:** Psychotherapy, particularly cognitive behavioral techniques, can help in the recovery of lost memories and in coping with the stress related to the amnesia. Techniques to improve relaxation and reduce stress, such as mindfulness and relaxation exercises, are also helpful.

Case Study 5: Dissociative Identity Disorder

The presence of multiple distinct identities manifesting as drastic shifts in demeanor, voice, and preferences, coupled with memory blackouts and finding unfamiliar items, are characteristic symptoms of Dissociative Identity Disorder.

- **Pharmacological:** Medications are not used to treat DID itself but are often prescribed to manage symptoms associated with the disorder, such as depression, anxiety, or PTSD symptoms.
- **Nonpharmacological:** The primary treatment for DID is psychotherapy, including trauma-focused therapies like CBT and dialectical behavior therapy (DBT). Techniques such as grounding and stabilization are essential. Long-term therapy may involve integrating multiple personalities into one coherent identity and addressing the traumatic experiences that triggered the dissociation.

Case Study 6: Dissociative Amnesia with Dissociative Fugue

Michael's sudden travel far from home, assumption of a new identity, and lack of memory about his original identity and how he arrived at the new location are hallmarks of Dissociative Amnesia with Dissociative Fugue.

- **Pharmacological:** No specific medications are recommended for the fugue itself. Treatment may focus on symptoms of accompanying mood or anxiety disorders.

- **Nonpharmacological:** Like dissociative amnesia, treatments focus on psychotherapy to recover lost memories and address the emotional impact of the amnesia and fugue state. Family therapy may also be beneficial to help reintegrate the individual after a fugue episode.