

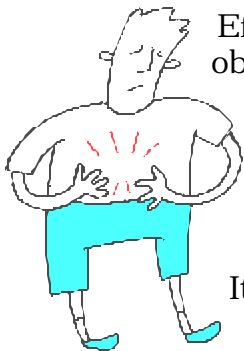
HOW MEDICAL CONDITIONS CAN PRESENT AS BEHAVIOR PROBLEMS

There are “The Big Five” of medical conditions causing behavioral problems:

1. Pain
2. Mental Health Disorders
3. Sleep Disorders
4. Various Life Experiences & Conditions
5. Drug Interactions



PAIN



Effective pain management relies upon clear and accurate observation of the individual.

These symptoms are best presented in real terms including how the person expresses symptoms of pain verbally, by gestures, and behaviorally.

It is always important to express how the pain is affecting their day to day life.

Ten Commandments of Pain Relief

1. Believe the person's report of pain
2. Teach the person about pain and relief
3. Know and use analgesics drugs for safety and efficacy
4. Think of non pharmacological means
5. Include what person thinks will be effective
6. Do not develop an adversarial relationship
7. Do not quit the first or second time a relief measure is ineffective

8. Do not wait for the person to ask for pain relief
9. Do not avoid discussing fears or others feelings
10. Do not abandon the person – keep trying

Emotional Pain and Physical Consequences

Emotions are linked to the following systems:

immune (auto immune diseases – rheumatoid arthritis, multiple sclerosis, thyroid disease, lupus all can co-occur with depression), endocrine, central nervous system, respiratory and gastrointestinal

- ✍ Bodies are ever changing fields of energy
- ✍ Life force is within ourselves and the world
- ✍ Our brain is in our head but, our mind is throughout our body
- ✍ Thoughts become beliefs that become biology
- ✍ Name your experiences, feel the pain, begin to heal – free stuffed, stuck, denied feelings. Bodies are built to heal themselves.

MENTAL HEALTH DISORDERS

Yes, mental health disorders are medical conditions!!!!

There are a wide variety of mental health disorders.

Affective Disorder	Bi polar, Depression, etc.
Psychotic Disorders	Schizophrenia, etc.
Anxiety Disorders	Panic, etc.

There are lots of fancy names out there for these categories. The symptoms can be confusing and soft at times. We pay attention when they get serious. Let's catch them quicker...

1,2,3..... Let's go!

1. Agitation
2. Anxiety
3. Appetite UP or DOWN
4. Biphasic course – cycles of symptoms
5. Change in volume, clarity, quality, and/or rate of speech
6. Compulsions
7. Decreased enjoyment/interest in pleasurable activities
8. Delusions
9. Confusion
10. Fatigue
11. Hallucination
12. Increased crying/sadness
13. Intense interest in pleasurable activities



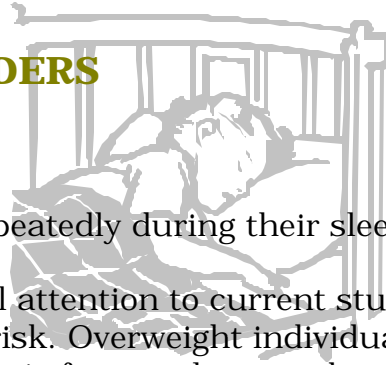
14. Increased laughing and /or smiling (not associated with funny experiences)
15. Increased self-esteem or grandiosity
16. Insomnia
17. Obsessions
18. Psychomotor agitation/retardation
19. Sleep increased/decreased
20. Thought Disorders
21. Vomiting

SLEEP DISORDERS

Sleep Apnea

Marked by Individuals who stop breathing repeatedly during their sleep.

Will show up as decreased energy. Pay special attention to current studies that show individuals with a receding chin are at risk. Overweight individuals are at risk. Who snores in your house? Hypertension is frequently an end product of sleep apnea. Consider then symptoms of hypertension headache, dizziness etc and how these could cause behavior.



Narcolepsy



Marked by sudden and uncontrollable drowsiness & attacks of sleep at unexpected and irregular intervals.

Will show up as decreased energy or “laziness” “non compliance.....”

Paroxysmal Nocturnal Myoclonus (twitching of legs)

Impairs sleep.....

If you consider in general a sleep disorder, how do you feel when you are tired?
 If you could not communicate.....or if you aren't heard or keenly observed.....How might you act?

VARIOUS LIFE EXPERIENCES & CONDITIONS

We are who we are
 Each of our lives has had different experiences and flavors
 Our societal and medical exposures vary
 We may be predetermined to have a “condition”

Consider some of these symptoms in this category:

1. Aggression
2. Anger
3. Antisocial Behavior
4. Attention Intense/decrease (need for)
5. Destructive Behavior
6. Discomfort in acute social settings
7. Distractible
8. Fearfulness
9. Hygiene Poor
10. Impulsivity
11. Irritability
12. Judgment Errors
13. Non - compliance
14. Pica
15. Ritualized or repetitive behavior
16. Self Talk
17. Self - injurious behavior
18. Spitting
19. Serious difficulty adjusting to change
20. Withdrawal



We must be careful to look at all aspects of a person & listen & objectively look at these psychological and medical conditions.

How many of you have been angry, distracted or had serious difficulty with change for an extended amount of time? Do you talk to yourself?

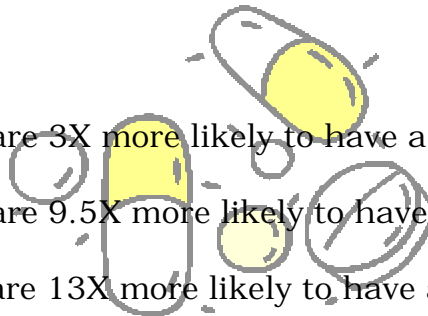
DRUG INTERACTIONS

If you are on:

2-3 drugs you are 3X more likely to have a drug interaction

4-5 drugs you are 9.5X more likely to have a drug interaction

6 drugs you are 13X more likely to have a drug interaction



ANY MORE THAN THIS WE DON'T REALLY KNOW THE CONSEQUENCES

Points to Remember:

1. Most medications are processed through the liver. There is only so much work a liver can do. Age and years of medications can take its

- toll. Lot's of time we really don't know how much med is there when poly pharmacy is present. "Free Drug"
2. Women absorb all medications slower due to body fat. (even your skinny minnys)
 3. Poly Pharmacy and Poly Physicians are a deadly combination. Always have someone watching medications.
 4. All meds have side effects even herbal medications.
 5. No one anywhere is studying the effects of combination drug interactions and how could they? It would need to be individual specific. This is something we need to think about and prevent. Say no to poly physicians and poly pharmacy.

A FEW CLOSING THOUGHTS TO SHARE

There are 5 diagnostic categories to assessing Challenging Behavior:

1. Central Nervous System Dysfunction
Alzheimer's, strokes, etc.
2. Pervasive Developmental Disorders, PDD
Autism, Aspergers, Rhett's, Childhood Degenerative Disorder, PDD NOS
3. Psychiatric Class
Affective, Anxiety, Psychosis
4. Learned Maladaptive Behaviors
Those cause and effect ones
5. Medical or Drug Induced.....

.....or maybe a combination or all the above



THE FDA HAS NOT APPROVED ANY MEDICATION FOR THE SOLE PURPOSE OF ELIMIATING BEHAVIOR