APPLICATIONS
OF TECHNIQUES
& RESULTS
CHAPTER 4

APPLICATIONS OF TECHNIQUES AND RESULTS

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APPLICATIONS OF TECHNIQUES AND RESULTS

4.1 APPLICATIONS OF TECHNIQUES AND RESULTS

The therapeutic procedure describe in proceeding chapter were used for the treatment of patients of different disorders, anxiety, phobia and dissociative disorder. The number of patients treated by the techniques were as follows:

Table – 2 No. of patients treated by different treatment techniques

<table>
<thead>
<tr>
<th>Treatment Techniques</th>
<th>Anxiety</th>
<th>Phobia</th>
<th>Dissociative Disorders</th>
</tr>
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<tbody>
<tr>
<td>PMR</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>PMR + Systematic Desensitization</td>
<td>3</td>
<td>3</td>
<td>3</td>
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<tr>
<td>PMR + CBT</td>
<td>4</td>
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4.2. PRE-TREATMENT FEATURES OF ANXIETY, PHOBIA AND DISSOCIATIVE DISORDER

The pre-treatment features of Anxiety, Phobia and Dissociative Disorder are as follows:
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Pre-treatment features of Anxiety:
1. Whole body burn
2. Dry mouth
3. Frequent loose motions
4. Prickling sensation
5. Difficulty in inhaling
6. Feeling of discomfort over the heart
7. Awareness of missed beats
8. Poor concentration
9. Menstrual discomfort
10. Urine frequency

Pre-treatment features of Phobia:
1. Tension
2. Headache
3. Back pains
4. Stomach upsets
5. Dizzy spells
6. Fear of cracking
7. Feelings of unreality
8. Difficulty in making decisions
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Pre-treatment features of Dissociative Disorders:

1. Repetitive thought
2. Loss of vision, hearing or smell
3. Inability to recall
4. Unable to remember important aspects
5. Patient feel two or more distinct personalities
6. Repetition of speech
7. Partial or complete loss of any or all of the normal cutaneous sensations over part or all of the body (Specify touch, pinprick, vibration, heat and cold)
8. Amnesia (Forget fullness)
9. Loss of the usual sense of personal identity

4.3 TREATMENT PROCEDURE

A systematic procedure of treatment was followed by all the patients. Each patients was treated individually. The steps of treatment was as follows:

4.3.1 Rapport Development:

In the first step the patient and the clinician were involved in the developing rapport so that the patient can freely talk to clinician and can present a full account of his/her problem.
4.3.2 Clinical Interview:
An unstructured clinical interview of the patient was taken in which the patient were encouraged by the researcher to talk freely and give a detailed description of his/her inhibition, feelings, problems etc. The patients were also encouraged to tell about their family members spouse, children, relatives and other persons with whom he/she used to interact in their daily life.

4.3.3 Recording of Likes and Dislikes:
In the third step the patients were encouraged to list their likes and dislikes in different categories such as food, fruits, cloths, shoes, relatives, teachers, colleagues etc.

4.3.4 Preparation of Hierarchy:
In the forth step of the treatment the patients were help to prepare the hierarchy of their problems in ascending order.

4.3.5 Progressive Muscular Relaxation (PMR):
In the fifth stage all the patients were put to the Jacobson’s PMR continuously for a week with an hour sessions everywhere. Those who were identified to be treated by this technique were continued for 30 days or till their problem extinguished but not later than 30 days.
4.3.6 Systematic Desensitization:

The patients who were identified to be treated by PMR and systematic desensitization were given imaginary systematic desensitization after the PMR. The imaginary systematic desensitization were started from the lowest problem producing stimulus and moving systematically to the highest one. This procedure was also continue for a maximum of 30 sessions including the seven sessions of PMR.

4.3.7 Cognitive Behavior Therapy (CBT):

Cognitive Behavior Therapy was applied on the patients who were identified to be treated by this technique after the seven sessions of PMR. The patients were applied the CBT everyday in which PMR is followed by CBT. This procedure was applied for a maximum of 30 days.

4.4 EVALUATION OF TREATMENT

After 30 days of treatment or at a point where the patient reported that he/she has no problem and they have fully recovered and evaluative session was devoted to assess the effect of treatment in which the patients undergo clinical interview in order to know whether they have any problem or not.

4.5 FOLLOW-UP

Follow-up after six month for each patient was carried out in which they were interviewed to know if they had any problem in this period of six
months but it was found that there were no specific problem related to their disorder.

4.6 THE MAIN FINDINGS

The main findings of the research were as follows:

1. The phobic patients treated by PMR and systematic desensitization were recovered in 15 days.

2. The patients of dissociative disorders treated with PMR and CBT took 20 therapeutic days to recover completely.

3. It took 30 sessions for the recovery of anxiety and dissociative reaction patients treated with PMR.

4. Phobic patient has not recovered by the treatment of only PMR.

5. The phobic patients treated with PMR and CBT took 30 sessions to recover.

6. The patients of dissociative reactions treated by PMR and systematic desensitization were relieved in 30 sessions.

7. The anxiety patients treated with the combination of PMR and systematic desensitization or PMR and CBT took 15 sessions to recover of their disorders but took 25 sessions when treated with only PMR.
4.7 LIMITATIONS OF THE STUDY

This study was conducted on 30 patients of anxiety, phobia and dissociative disorders. The number of male and female patients were very less. Therefore, on the basis of these results generalization can not be made.

4.8 SUGGESTIONS FOR FURTHER RESEARCH

In the light of experiences during the present research the following points are suggested for further research:

1. Study should be conducted on a large sample.

2. The outcome of the treatment on male and female subjects be studies separately.

3. Outcome of the treatment should be assessed by some psychological test specially projective.

4. Study should be conducted taking the separate group of patients belong into different economic status, occupation, caste and religion.