

Disruptive Behavioral Disorders

Psychological disorder

- **Vegetative Disorders**
 - Pica, rumination disorder, enuresis, encopresis etc
- **Habit and Tic Disorders**
 - Teeth grinding, thumb sucking, tics etc
- **Anxiety Disorders (AD)**
 - Separation AD, generalized AD, Obsessive compulsive disorder etc
- **Mood Disorders**
 - Depressions
- **Eating Disorders**
 - Anorexia nervosa (AN) and bulimia nervosa (BN)
- **Disruptive Behavioral Disorders**
 - Temper tantrums and Breath holding spells

- **Attention-deficit/Hyperactivity Disorder**
- **Pervasive Developmental Disorders and Childhood Psychosis**
 - Autism
- **Specific Language and Learning Disabilities**
 - Dyslexia

What are temper tantrums?

- A temper tantrum is a sudden, unplanned display of anger.
- It is not just an act to get attention.
- During a temper tantrum, children often cry, yell, and swing their arms and legs.
- Temper tantrums usually last 30 seconds to 2 minutes and are most intense at the start.

- Sometimes temper tantrums last longer and are more severe (violent tantrums).
 - hit, bite, and pinch
 - children may harm themselves or others
- Common ages : 1 to 4 years

Why do children have temper tantrums?

- A tantrum is a normal response when something blocks a young child from gaining independence or learning a skill.
- The child may not yet have the skills to express anger and frustration in other ways.

- **Things that might make a tantrum more likely are:**
 - How tired a child is.
 - The child's age.
 - The child's level of stress.
 - Whether the child has other physical, mental, or emotional problems.

How to deal with temper tantrums?

- Ignoring the tantrums and helping a young child learn how to deal with anger and frustration are often good ways to deal with tantrums.
- Pay attention to what starts the tantrums.
- Knowing what triggers the tantrums can help you act before your child's emotions get past the point where he or she can control them.
- Persistent of temper tantrums after the age of 3 years - time-out technique
- Temper tantrums after 4 years / violent tantrums – anger management

What is breath holding spell?

- A breath holding spell is an involuntary pause in breathing.
- Sometimes accompanied by loss of consciousness.
- It usually occurs in response to an upsetting or surprising situation.
- It appear to be a response to fear, a traumatic event
- Breath holding spells can run in families. If a child's parents had similar spells in childhood, the child may be more likely to have spells.

- Although they often occur with tantrums, breath holding spells are not thought to be a willful act of defiance.
- Age : 2 months ~ 2 years
- Usually spells stop by the age of 6~8 years
- Children with iron deficiency anemia may also have increased episodes of breath holding.

Classification

- **Simple breath holding spell**
 - its manifestation is the holding of breath in end expiration.
 - The usual precipitating event is a frustration or injury leading to the temporary cessation of breathing in end expiration.
 - There is no major alteration of circulation or oxygenation and the recovery is spontaneous.
- **Cyanotic breath-holding spell**
 - The child cries and has forced expiration sometimes leading to cyanosis (blue in color), loss of muscle tone, and loss of consciousness.
 - They are usually precipitated by anger or frustration although they may occur after a painful experience.
 - The majority of children will regain consciousness. The child usually recovers within a minute or two, but some fall asleep for an hour or so

- **Pallid breath-holding spells**, the most common stimulus is a painful event. The child turns pale (as opposed to blue) and loses consciousness with little if any crying. The EEG is also normal, and again there is no post ictal phase, nor incontinence. The child is usually alert within a minute or so. There may be some relationship with adulthood syncope in children with this type of spell.
- 4. A fourth type, known as Complicated breath-holding spells, may simply be a more severe form of the two most common types. This type generally begins as either a cyanotic or pallid spell that then is associated with seizure like activity. An EEG taken while the child is not having a spell is still generally normal.

Symptoms

- Bluish discoloration of the skin caused by lack of oxygen (cyanosis) or loss of skin color (pallor)
- Crying and then stopping breathing (apnea)
- Momentary unconsciousness or fainting
- Short seizure-like movement (one to two jerks)

Treatment

- No treatment is usually necessary. Children who have breath holding spells do not have epilepsy or brain damage.
- Avoiding situations that provoke temper tantrums can help reduce the number of spells your child has. Placing a cold cloth on your child's forehead during the spell may shorten the episode.