

World Congress on

Eating Disorders, Nutrition & Mental Health

September 12-13, 2016 Philadelphia, USA

Can death adjust interfere with our eating behavior? : An abstract analysis

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Death is the inevitable end of the life – that is what we perceive most often during our lifetime. Psychological analyses converge to demonstrate that human beings struggle to integrate it as a personal reality. In this work we attempted to focus on the linkage between our conceptions of death, our difficulty in adjusting to it as a species and how it might affect us in our eating habit. First we surveyed historical and philosophic perspectives on the meaning of death sampling some of the broad field of psychological research on death attitudes in a variety of cultures and subcultures. Then, we analyzed the traditional concept of death as a potential factor producing adjustment problems. Finally, we dragged our argument towards the probability that a pessimistic understanding of death as a phenomenon could be a hidden factor behind our contemporary unhealthy eating behaviors, just like it can be behind many other psychopathologies.

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Mental health professionals' preferences towards treatment modalities for ADHD children and adolescence in Pakistan

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Aim: This study aims to explore, identify, patterns of use for each modalities and examine patient and parent treatment preferences and their subjective experience.

Method: A qualitative research method was applied along with further literature review for a diverse and comprehensive comparison. About 15-20 Mental Health Practitioners were approached and interviewed using structured and unstructured interviews from different regions of Pakistan i.e., KPK, Punjab, Sindh, Federal region in order to get a representative sample and the results can be generalized for further research. The sample of the study was 15-18 mental health professionals from different setups all over Pakistan.

Results: The findings identified that 85% of mental health professionals preferred medication modality (short and long term medicines), about 5% of psychiatrists adhered to neuro-feedback and 10% of mental health professionals/physicians made statements that short acting medication should be combined with other interventions such as counseling, “behavior modification programs”, classroom accommodations or education that would teach students coping skills. Majority of patients exhibited lack of insight about their disorder, the negative consequences of medication and lack of knowledge about behavioral or combined treatment modalities.

Conclusions: It is concluded from the current research to address gaps in knowledge base of parent and patient after simultaneously eliciting ADHD treatment perceptions. Less than ½ accesses for the treatment of ADHD due to diverse factors such as child's dislike of taking pills, stigma experiences and lowered self-esteem. It is further concluded that parents' and patients' willingness to use ADHD interventions and views of acceptability, effectiveness and potential side effects associated with treatment should be considered by the mental health professional for therapeutic alliance. This research based on qualitative has yielded one more significant fact that Pakistani Psychiatrists are biased and prejudiced on towards Psychologists and this fact is highly sensitive issue while opting for behavioral or combined treatment modalities.

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