

A Case Report- Impact on Mental Health using Social Media Smartphone App

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Abstract

Background : Social media refers to “the websites and online tools that facilitate interactions between users by providing them opportunities to share information, opinions and videos and ideas” WhatsApp being the advancing technology among youth for effortless communication, simultaneous circulation of inappropriate (threatening/violent) videos through WhatsApp creates an impact on mental health further affecting the psychosocial quality of life. The aim of the case report study is to explore about the clinical diagnosis and psychotherapy and behavioural counselling along with family therapy and associated intervention.

Case Report: A 28 years old female reported in department of applied psychology at Veer Bahadur Singh Purvanchal University (VBSPU), Jaunpur, and Uttar Pradesh, India with the complaints of insomnia, tremors, pulsation, sweating, chest discomfort, anxiousness, depressive mood and slurred speech and change in voice. Six months back, she had watched a violent scene in WhatsApp video viewing two part of human body in a bike accident on road. She was diagnosed with “Unspecified phobic anxiety disorder”. Psychological therapy and behavioural counselling along with family therapy given.

Conclusion: In this study we found that significant effect on improvement of anxiety, phobia, stress and voice after psychotherapy with simultaneous use of pharmacotherapy and voice therapy. There is a strong need to explore the effect of social media on mental health and quality of life and social well being of human beings in different society.

Keywords: Social media, WhatsApp, fear, anxiety, psychopathology, psychotherapy, voice therapy.

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I. Introduction

Social media refers to “the websites and online tools that facilitate interactions between users by providing them opportunities to share information, opinions and videos and ideas” (1). It comprises websites, such as WhatsApp, Twitter, Facebook, Instagram, Online gaming, telegram, LinkedIn virtual worlds like YouTube, blogs etc. The social media allows repetitive and continuous communication among younger population. It has Social media has advantages by having a larger support network, being able to socialize, di-addiction programs, and national program implementation, while depression, addiction, psychosis, insomnia, cyber bullying, and many more are the disadvantages of it (2-5). According to ICD-10, F40.9 phobic is a kind of anxiety disorder which is a strong, irrational fear of something which possesses small or no actual danger. The individual with phobia may experience panic and fear, quick heartbeat, shortness of breath, trembling, and a strong desire to get away. Anxiety disorder is characterized by intense, unrealistic persistent and irrational fear of an object, activity, or situation that the individual feels compelled to avoid that. This has been grouply defined as unspecified phobic anxiety disorder (6). Although, WhatsApp being the advancing technology among youth for effortless communication, simultaneous circulation of inappropriate (threatening/violent) videos through WhatsApp creates an impact on mental health further affecting the psychosocial quality of life. Various mental health impacts have reported in previous studies on WhatsApp usage among adolescents and youth (7, 8). In our applied psychology department, we were regularly being encountered with psychopathological

characters contributed by social media among Smartphone users among adolescents and youth such as anxiety disorder, obsessive compulsive disorder, depression, and mood disorder driven our attention towards its impact on mental health.

II. Case Report

A 28 years old female reported in department of applied psychology at Veer Bahadur Singh Purvanchal University (VBSPU), Jaunpur, and Uttar Pradesh, India with the complaints of insomnia, tremors, pulsation, sweating, chest discomfort, anxiousness, depressive mood and slurred speech and change in voice. Six months back, she had watched a violent scene in WhatsApp video viewing two part of human body in a bike accident on road. She got scareful even from small controversies with his husband and parents. Her qualification was graduation and home maker by profession. She belongs to a joint family, lower middle class. There was no previous medical history or any other addiction.

III. Details Evaluation

The patient was calm during the evaluation with the interviewer. Her complaints that her present mood was depressed, insomnia and fear for early death. She was thinking around the terrifying accident of car along with fear of death. She also thought that accident of her family members and she was isolated herself at home. When she tried to go out from her house, she felt tremors, pulsation, sweating, chest discomfort and depressive mood. When she tried to talk to anyone, her speech was slightly slurred and change in voice. She visited at private hospital for tremors, chest discomfort and change in voice. The details evaluation comprised of neurological examination, Speech assessment and mental health examination was conducted.

Neurological Examination

Neurological status and mini –mental score was normal. The patient herself visited to a private hospital in Varanasi for her chest discomfort, tremors symptoms. The patient underwent for routine blood and electrocardiogram investigations. All the investigations were normal. On speech evaluation, speech pathologist was carried out the speech evaluation in private hospital. On articulation assessment, all the oral and peripheral mechanism structurally and functionally was normal. On Frenchey dysarthria assessment (FDA), there was no dysarthric components. On Perceptual Voice assessment, Maximum Phonation Duration (MPD) was 16-18 seconds. High pitch and loudness were reduced while quality was hoarse. She was diagnosed as hoarseness of voice? She was counselled and referred for psychological and psychiatry consultation. Due to financial constraints, her family could not afford further treatment.

Mental Health Examination

On examination, she reported that she had sleep disturbance for about 2 months and she was fearful even from a small arguments with his parents however they did not have thought of slain by them. There were no manic episodes noticed during the examination. She reported that nobody had control over her. She had fear of accidents, does not want to report any accident after that in realty or in video. She reported that it was the first time; she watched such terrifying videos on WhatsApp. After this event, she denied to watch videos on WhatsApp using Smartphone. She had a strong fear that her parents may suffer with similar kind of incidents in upcoming days. She reached to VBSPU in applied psychology department after getting information from student who was studying in applied psychology department at VBSPU, Jaunpur.

The department of applied psychology at VBSPU is known for clinical, psychological, counselling and comprehensive care of each patient in department. After details history and examination, she was diagnosed with “Unspecified phobic anxiety disorder” and psychological and behavioural counselling started. The pharmacotherapy and voice therapy was continuing from the private hospital. Psychological counselling comprised cognitive behavioural therapy, humanistic therapy and interpersonal therapy along with family therapy. Cognitive behavioural therapy centered on thoughts, feelings, and behaviour of the person and desensitization, cognitive reframing, and restructuring. Humanistic approach focused on creating a foundation of respect for the patient and mutual acceptance of significance of their experiences. His cultural values and freedom to exercise has been appreciated. Interpersonal therapy has established to improve their relationships with others by better expressing their emotions and solving problems in healthier ways. It helps patients resolve or adapt to troubling life events, build social skills and organize their relationships to increase support for coping with depressive symptoms and life stressors. Pharmacotherapy was tablet paroxetine 20 mg once daily along with tablet alprazolam 0.25 mg and propranolol 20 mg once daily. Voice therapy comprised of vocal hygiene, phonatory exercise and abdominal breathing exercise for better voice followed by counselling.

The patient was kept under Regular psychological counselling and family therapy, and family members were also counselled for emotional and social support. She showed dramatic improvement following this synergistic treatment of psychotherapy and counselling following pharmacotherapy. There was significant

improvement in her voice after voice therapy. The patient's anxiety symptoms and fear for Smartphone and terrifying events have been improved. However, she still got strong worry for the well-being of her children if she would die early for which she is being counselled to visit regularly in department.

IV. Discussion

Excessive Smartphone app uses and its impact make the limited to the app by losing interest in the true world and their emotions to other things. This patient finds an association between watching traumatic incidents or events on social media platform and unspecified phobic anxiety disorder. There is a relationship between watching videos or news associated to traumatic events such as terrifying accidents and terrorist attacks and stress, anxiety symptoms, and its consequence on people's mental health, voice and quality of life and well-being. Cognitive behavioural therapy and Humanistic therapy have an outcome in improving symptoms of anxiety and phobia. (9-12).

V. Conclusion

In our study we found that humanistic and cognitive behavioural therapy, interpersonal therapy and family therapy have significant effect on improvement of anxiety, phobia and stress with simultaneous use of pharmacotherapy and voice therapy. In a digital technology era and advancement of media, there is a need of education and awareness in society about the consequences of technology and social media. Also, there is a strong need to explore the effect of social media on mental health and quality of life and social well being of human beings.

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