

Information Handout

Professional Version | US English

What Keeps Depersonalization and Derealization Going?



Description

It's normal to have brief experiences of depersonalization and derealization, but if they become regular, more severe, and interfere with your ability to live your life, you may be suffering from *depersonalization-derealization disorder*. Symptoms of depersonalization and derealization include:

- You feel remote and detached.
- Your emotions feel numbed or superficial.
- The world feels unfamiliar or artificial.
- Images and sounds are distorted.
- You know these experiences aren't felt by other people, and aren't caused by real changes in the world.
- Your body feels numb, weightless, or hollow.
- You struggle to concentrate.
- You keep thinking about what is real and what isn't.

The psychological treatment for depersonalization and derealization that has the strongest research support is cognitive behavioral therapy (CBT). CBT therapists work a bit like firefighters: while the fire is burning they're not so interested in what caused it, but are more focused on what is keeping it going, and what they can do to put it out. This is because if they can work out what keeps a problem going, they can treat the problem by 'removing the fuel' and interrupting this maintaining cycle.

In 2003, Elaine Hunter and her colleagues at the Institute of Psychiatry in London published a model of depersonalization and derealization, which explains the 'parts' that make its symptoms more distressing for some people. The *What Keeps Depersonalization and Derealization Going?* information handout describes some of the key factors which act to maintain depersonalization and derealization. It illustrates them in a vicious flower format in which each 'petal' represents a separate maintenance cycle. Helping clients to understand more about these processes is an essential part of cognitive therapy for depersonalization and derealization. Therapists can use this handout as a focus for discussion, or as a template from which to formulate an idiosyncratic model of a client's experiences.

Instructions

Suggested Question



One interesting way of thinking about depersonalization and derealization is to look at why, for some people, they do not get better by themselves. This handout shows some of the most common reasons why some people keep experiencing symptoms of depersonalization and derealization. I wonder if we could look at it together and think about whether it describes some of what is happening for you?

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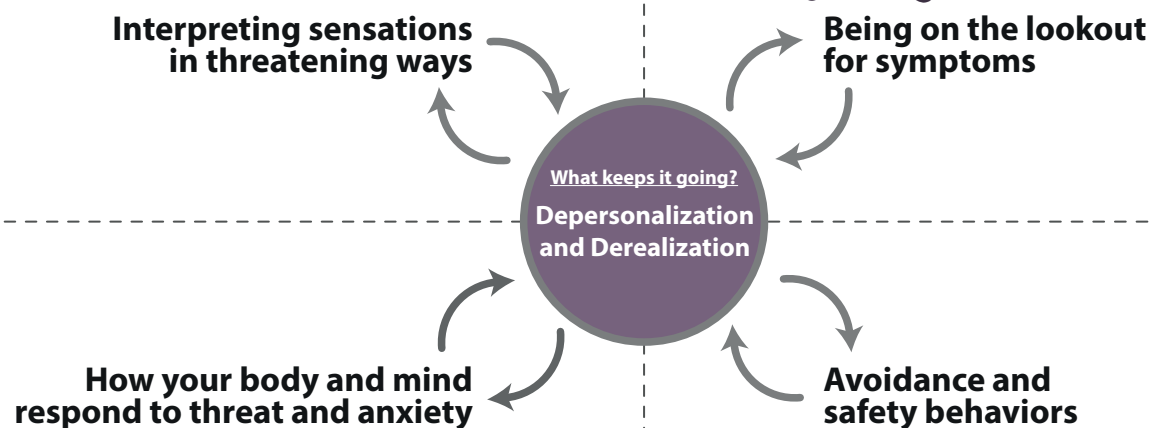
The way you interpret any new symptom has powerful effects on how you feel:

- Thoughts about your symptoms may be catastrophic or biased.
- Worrying about your mental health means that your concerns are always in your mind.
- Your beliefs about yourself, your mind and your brain all affect how you perceive your symptoms.

If you keep seeing certain feelings and body sensations as a threat, you may become blind to the more likely and less threatening possibilities. Treatment for depersonalization and derealization involves testing your beliefs about these experiences.

If someone told you there was an escaped tiger in your neighborhood, you would probably keep a lookout when you were out and about. It's the same for body sensations that you think are dangerous, especially those that you think are signs of the depersonalization and derealization getting worse.

The problem with always being on the lookout is that you're more likely to notice things. Even harmless perceptions can set off a 'false alarm' and trigger worry and anxiety. The same is true of checking for symptoms.



Psychologists think that when some people react to stressful events, they're more likely to experience symptoms of depersonalization and derealization. For these people, the brain system that 'watches' thinking becomes highly active, but at the same time emotional responses are suppressed. This might give rise to the unpleasant sensation that you're watching yourself, or not being 'in' your body.

It's not your fault if your mind and body are sensitive, or respond in these ways. However, it may mean that you need to learn strategies to cope with triggering situations.

Some people find their experiences of depersonalization and derealization distressing. It's normal to want to avoid things that make you upset.

Safety-seeking behaviors are things you do to prevent feared outcomes from happening – especially if you can't escape a situation. You might 'act normal' or check yourself often to see if the symptoms are getting worse. The problem is that avoidance and safety behaviors can prevent you from learning how dangerous situations truly are, how well you can cope, or how to live with uncertainty.

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