

**HEALTHY MINDS**  
**A WEEKLY COLUMN ALL ABOUT MENTAL WELLNESS**  
**Elliott B. Sewell, MAE, LPCC, NCC**

**Impulse Control Disorders**



There is a category of mental disorders that is listed in the universally used diagnostic and evaluation handbook used by all practitioners: psychiatrists, psychologists, marriage and family counselors, licensed clinical social workers, psychiatric nurse practitioners, and of course professional mental health counselors. The book is called the Diagnostic and Statistical Manual of Mental Health Disorders, Fourth Edition (DSM-IV) published by the American Psychiatric Association. It lists all currently “accepted” disorders and I will refer to it from time to time.

One category of interest is Impulse-control Disorders, which covers impulses, urges, or temptations to do something that harms themselves and/or others; it may be planned or may be done on a whim; the patient may try to resist the impulse or may not. It is characterized by “tension and release”, where the urge builds to the point where it can no longer be contained and finally the act occurs and a sense of relief, and sometimes pleasure results. Sometimes there is also remorse, but not necessarily. All of these episodes involve something that is harmful, illegal, or violent.

Before I describe the various types, let me add that there are other causes of impulsive behavior that are not covered in this section of the DSM-IV, such as paraphillias (recurrent sexual urges, mostly by males, that are offensive to others), substance-related impulsive behaviors (from substance abuse or intoxication), bipolar disorder (used to be called mania and sometimes characterized by compulsive shopping), schizophrenia (in response to hallucinations), or antisocial personality disorder (which is NOT characterized by “tension/release”). There is also the eating disorder known as binge eating. I will discuss some of these other compulsions at another time.

The impulse-control disorders are: intermittent explosive disorder, kleptomania, pyromania, pathological gambling, and trichotillomania. I shall discuss these briefly below:

**INTERMITTENT EXPLOSIVE DISORDER** is characterized by a “hair-trigger” temper, which often ends as quickly as it began. Many individuals are young men and it often involves serious assault and property damage, traffic accidents, moving violations, and sexual impulsivity. The aggression is out of proportion to the stressor or trigger that started the reaction. Often the offending party is regretful. Some of these individuals are extremely sensitive to alcohol and a single drink can set them off. (This used to be called pathological intoxication).

**KLEPTOMANIA** is an irresistible impulse to steal and is not a result of need or desire. Often they steal things they don’t need, and if not caught often discard or give away what

they stole. These patients know that they are doing is wrong but cannot resist the urge. It often starts in childhood and remains with them throughout life. By the way, only about one in twenty shoplifters suffer from kleptomania, so it is a bad excuse. (Best bet is to purchase what you can afford and leave the rest alone).

**PYROMANIA** is similar to kleptomania, except that it is an irresistible impulse to start fires; it affects mostly males. The condition often starts in childhood, and very often the perpetrators leave clues so as to get caught. They make advanced preparations, and also like to be spectators at fires, turn in false alarms, are fascinated by fire-fighting equipment, and may serve as volunteer firefighters. (Of course the overwhelming majority of this noble group is made up of concerned and brave citizens interested in protecting their community.)

**PATHOLOGICAL GAMBLING** is relatively common, affecting about 2% of the population, affecting twice as many men as women, and is, interestingly, similar to substance dependence because the compulsive gambler feels a high when he or she gambles. It often starts in youth, spurred on by a big win, and is usually followed by a huge loss which goads the gambler to get back his or her money, even at the expense of social, familial, and financial ruin.

**TRICHOTILLOMANIA** (pronounced try-co-till-oh-mania) comes from the Greek and means “a passion for pulling hair”; it is an under-reported disorder that may be more common than pathological gambling (possibly 3% of the population). Like pyromania and kleptomania, the patients feels a growing tension and then gains release by pulling out their hair, from their head, beard, eyebrows, eyelashes, or even other body hair. The patient usually feels not pain but a rather pleasant tingling sensation. It more common in females than males, and is sometimes associated with mental retardation. When it starts in adulthood it is often a sign of impending or current psychosis.

**TREATMENT OPTIONS:** There are various psychotherapy options available for treating individuals with impulse-control disorders, such as Adlerian Therapy, Behavior Therapy, Existential Therapy, Person-centered Therapy, Psychoanalysis, Rational-emotive and Cognitive-behavioral Therapy, Reality Therapy, and Transactional Analysis. There is no one way to help individuals overcome or cope with their behavior, and it varies on a case-to-case basis, and on the theoretical orientation(s) of the practitioner and his or her skill.

**TIP OF THE WEEK:** Fluorides are dangerous and allegedly ineffective in preventing tooth decay in adults. Go to your bathroom and pick up a tube of your own brand of fluoridated toothpaste and read the warning label. There is only a tiny amount of fluoride in your toothpaste; nevertheless it comes with a danger warning. It says, in tiny letters, “Warnings: Keep out of the reach of children under 6 years of age. If more than used for brushing is accidentally swallowed, get medical help or contact a Poison Control Center right away.” Wow! Do you think fluorides stop being poisonous after age 6? Think again. The same fluoride, by the way, is in your drinking water, your soft drinks, water you use for cooking, and so on. Fluoride does affect your brain function, and if you are

interested in how, you can find lots of information on the internet. There are many credible sites written by physicians and other scientists, historians, and other intellectuals, with plenty of research and documentation to back up what they say. Do the research and make up your own minds.