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Cognitive behavioral therapy in an older patient with a specific phobia; dromophobia: Case report

This is a case report of a clinical case in which an older patient is presented motivation to modify dysfunctional avoidance behavior in order to be able to confront her phobia to cross the street. Older adult who has experienced a road accident developed fear to cross the street and is in the greater risk for physical and mental problems. Dromophobia is the fear of crossing streets; the term originated from Greek word dromo (race course) and phobia (fear). Phobias arise from the combination of external events such as traumatic events, roads accident and internal predispositions like heredity or genetics. Many specific phobias can be traced back to a specific triggering event, usually a traumatic experience at an early age. Symptoms of dromophobia vary by person depending on their level of fear. The symptoms typically include extreme anxiety, shortness of breath, rapid breathing, irregular heartbeat, sweating, nausea, dry mouth, inability to articulate words or sentences, dry mouth and shaking, muscular stiffness, avoidance to cross the street, refusal to go outside without a trusted companion (spouse) and social isolation. Cognitive Behavioral Therapy (CBT) was used to treat the patient. CBT method in dromophobia treatment was effective providing good results, improving the patient qualities of life.

Biography

Gabriela Zaharia Rusu is working as Chief Nurse in the Department for Rehabilitation Center, Israel. As a Health Coach, she uses a variety of health-promoting and evidence-based strategies to achieve growth, overall health and well-being of the patients, incorporating different aspects such as nutrition, stress and time management, chronic disease management and effective coping skills with each client, as well as providing comprehensive health assessments, conducting learning-style assessments to identify the best teaching methods for enhancing client understanding and empowerment.

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