

Not Just Road Rage: Understanding Intermittent Explosive Disorder, from the Harvard Mental Health Letter

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Boston, MA (Vocus/PRWEB) April 07, 2011 -- Horns blaring in heavy traffic. Aggressive drivers swerving from lane to lane. Anyone who drives a car has witnessed road rage at some point. Although any normally calm and collected person might become angry under severe enough stress, people with intermittent explosive disorder lose their tempers repeatedly—often in response to minor frustrations. The good news, according to the April 2011 issue of the Harvard Mental Health Letter, is that medication and cognitive behavioral therapy may help.

Intermittent explosive disorder is more common than experts initially believed—affecting 3% to 4% of people in any given year. And intermittent explosive disorder tends to appear early in life, with an average onset of age 13 in males and age 19 in females.

This condition remains controversial, especially when it is diagnosed in an individual charged with a violent crime. Several studies suggest that the disorder is associated with abnormal activity in parts of the brain that play a role in regulating aggressive behavior. The biggest challenge with intermittent explosive disorder, notes Dr. Michael Miller, editor in chief of the Harvard Mental Health Letter, is that people who have trouble resisting their violent impulses are not very likely to seek treatment.

Research on drug treatment has been limited, but antidepressants, mood stabilizers, and antipsychotic drugs may help. Cognitive behavioral therapy involving training in coping skills and relaxation techniques looks promising. Given the relatively early onset of intermittent explosive disorder, school-based violence prevention programs may help identify the condition and spur its treatment.

Read the full-length article: "Treating intermittent explosive disorder"

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