

## Abnormal Psychology

### Chapter 10 Case Study - Terrence

*Terrance, a married, 45-year-old African-American physician comes to your office for treatment for some embarrassing feelings that he really has a hard time talking about. His present condition is that he can't stop himself from fantasizing that one of his female patients will verbal assault him, De him up and cut his genitals with a series of sharp medical instruments. He had difficulty making eye contact when he described this fantasy in some detail. It seems that this is a highly arousing experience that tends to become intrusive when he has an attractive female patient in his office. At times he has to briefly leave the examination room with a false excuse to "get control" of himself so that he can continue the consultation. When asked how long he has experienced these fantasies, he stated that he has had similar fantasies of abuse by women since he was about twelve years old. It seems that when he was about that age, he was sexually abused by a babysitter who tied him to a bed and spanked him while she forced him to perform oral sex on her.*

*When asked about whether the fantasies had ever been acted upon, Terrance denies any sexual contact with patients at any point in his career. He did, however, state that he has engaged prostitutes willing to verbally assault and De him up about once per month since he was about 25. He has never found one who would cut him. As he talked about this, he began to cry and wanted some reassurance that your conversation was confidential. After you explained the limits of confidentiality again, he told you that he masturbates ten to twenty times per day to these fantasies and has used a small razor blade to lightly cut his own penis a couple of times in the past year. According to Terrance, his wife has no idea that he visits "the ladies" or has these fantasies. As a deacon in his church, this behavior has been the cause of a large amount of guilt and shame that has coped with by giving large sums of money to his church and donating to "moral" candidates who are running for elected office.*

*When asked about his current sex life, Terrance reports that, for the past several years, he has had difficulty maintaining an erection while engaging in intercourse with his wife. At times, he cannot achieve one at all. He attributes this to a low level of arousal resulting from this "boring" form of sex. As a result, he attempts to avoid most sexual contact with his wife. This has been the genesis of several arguments regarding whether he finds her attractive (apparently, she has gained 75 pounds since they were married and is convinced that his lack of interest in sex is due to the weight gain.) At the time of the interview, he reported that there had been no sexual contact of any kind (other than mild kissing) for the past six to seven months. He cried more*

*intensely as he conveyed that he feels like a terrible husband and father (they have four children under the age of twenty).*

Please answer the following questions:

1. Based on what you have learned in this class so far, which diagnosis might you explore when working with Terrence?
2. For each diagnosis list the symptoms and circumstances from the case study that you would use as evidence for these diagnoses.
3. Based on the treatments you have learned about so far, what would you recommend and possible intervention to treat Terrence?