

# Jamal, 9 years old, Grade 3

## Intermittent Explosive Disorder

- Explodes uncontrollably 1-3 times weekly then collapses often in tears.
- Teachers can often predict he is spiraling up and will explode in a few minutes, describing it as “the calm before the storm”
- Father and grandmother raising Jamal and 3 older siblings. Mother died when Jamal was 2. Dad very concerned but refuses evaluation, moved to area 12 months ago for a good school district
- Barely working academically, moments of insight about behavior, wants friends, students afraid of Jamal;
- He can recognize tension in body before exploding
- Open CPS case from previous location

# Intermittent Explosive Disorder 312.34 (F63.81)

- Disruptive, Impulse-Control, and Conduct Disorders – DSM 5
- Recurrent behavioral outbursts, failure to control aggressive impulses
  - Verbal aggression: temper tantrums, tirades, arguments, fights
  - Physical aggression: no property damage or injury
  - On average 2X weekly over 3 months, no destruction of property or physical injury (high frequency, low intensity)
  - 3 behavioral outbursts, injury or destruction in 1 year (high intensity, low frequency)
- Not premeditated, grossly out of proportion to stressors or provocations
- 6 years or older

# IED

- May experience tension or mood changes before outburst
- Brief episode, < 30 minutes
- Not part of Adjustment Disorder
- May be followed by sense of relief, pleasure, or remorse
- Impulsive
- Causes marked distress, impairment, negative consequences'
- Blinding rage, out of control

# I&RS Plan

- Time out, positive behavior support
- Remove from class when spiraling up
- Isolate him during outbursts or remove students from class for safety
- Meet with counselor as needed
- Involved in what he likes: color, draw, squeeze balls, games, sports
- Suspend for behavior
- CST evaluation
- Supportive day program

# Treatment

- CBT
- Recognize impulses to achieve awareness and control
- Treat/process emotional stress of episode
- Medication
- Cognitive Relaxation and Coping Therapy: Relaxation, cognitive restructuring, exposure therapy, resisting aggressive urges, prevention
- Consultation with previous school (open CPS case)
- Drawing