**PSY-470 Topic 5 Case Study**

You are a clinician working at a residential treatment center, treating people with substance use and addictive disorders. The receptionist hands you the intake paperwork prior to your interview with your new client, Jorge, and mentions that his son, Guillermo, has brought him in. Guillermo is very concerned about his father.

Intake Paperwork

**Client Name:** *Jorge*

**Age:** *59 years old*

**Gender:** *Male*

**Ethnicity:** *Latino*

**Occupation:** *Commercial pilot on medical leave*

**Current living situation:**  *Lives alone*

**Why are you seeking services at our clinic?***My son wants me to see you because he’s worried about my health. I don’t think I have a problem but to get him to stop bugging me I came.*

You will now ask Jorge and his son, Guillermo, typical intake interview questions. As you do so, think about Jorge’s symptoms, what his diagnosis might be, and what type of treatment would be most helpful for him.

Clinician: “Hi, Jorge. It’s good to meet you. Guillermo, thank you for coming in with Jorge today. Today, I’m going to do what’s called an intake interview. I’m going to ask you why you’re here and some questions that I ask everyone who comes in. This will tell me how I can best help you. This may involve treatment at this facility or referring you to another mental health professional or facility. Let’s start. Tell me about why you came to the center today.”

*Jorge: [defensively] My son, Guillermo, made me come. Don’t ask me why. I don’t have a problem with drugs or alcohol. Guillermo and his brother Mario just need to understand that I’m just a social drinker. I’m not an alcoholic.*

*Guillermo: I’ve been trying to convince my dad to seek treatment for his drinking problem for years. When he passed out and hit his head on the coffee table, he finally agreed. After he regained consciousness, he had a neighbor take him to the emergency room [incredulously]. He didn’t even call me! I had to find out from Mom, and they’ve been divorced for years. She said he didn’t even remember how he fell. He lives all by himself. That’s really scary.*

Clinician: “Jorge, is what Guillermo said true? Do you drink alcohol or use any substances? If so, how much and how often?”

*Jorge: [indignantly] I certainly don’t use any street drugs if that’s what you mean! I don’t even smoke. I used to, but after I had a heart attack a couple of years ago… my doctors told me to quit, so I did cold turkey – no problem! I don’t have a drinking problem. I limit myself to a couple of drinks a day – and I don’t drink every night.  
  
Guillermo: [sadly] Dad, you know that’s not true. [explaining to clinician] About two weeks ago, I spent a week with Dad when I was on leave from the Army. My dad used to be in the Air Force. He was my hero growing up. [sadly] Dad, you would start to drink in the middle of the afternoon, and by supper time, you would have finished off a six-pack of beer and started on another. [to clinician] I drink occasionally, but I could never hold my liquor like Dad. He can drink a six-pack and still seem sober! Then, after supper, he would pour himself a large glass of Jack Daniels on the rocks. Every night, he would have at least three glasses before he fell asleep on the couch. If I drank half that much, I’d be sick with a hangover the next day, but Dad never seemed to get a hangover.*

Clinician: “Jorge, what do you make of what Guillermo is saying? What do you really think about your drinking habits?”

*Jorge: [irritated] So I drank a little more when he was staying with me; I tend to do that when I have company. But he’s right; I never have a hangover! To me, that means I don’t have a drinking problem.  
  
Guillermo: [clearly upset] Don’t have a drinking problem! Dad! You don’t even remember what we did last night. [to clinician] he said he couldn’t remember what we ate for dinner or what movie we watched. Then he got all upset, wondering if he had Alzheimer’s or something. I think that something is his drinking problem.*

Clinician: “Jorge, do you feel like your drinking is affecting your life in any way?”

*Jorge: [exasperated, speaking slowly as if to explain to a child] I have been trying to explain to you that it is not. The only reason I’m here is because Guillermo is worried because I fell. He’s afraid I’ll die … [more quickly] Not gonna happen.  
  
Guillermo: Dad, this is about more than your fall. Alcohol has been messing up your life for a while now. When I was visiting, I was doing work on your desk after you passed out and found your FAA medical files … [hastily, defensively] Now don’t get upset; I wasn’t snooping … you left the file on your desk… I read the notes from your last physical; the doctor said you* ***lied*** *to him about how much you drink. The FAA doctor wrote “Alcohol related” with a question mark next to your complaints about your memory loss. [louder] Alcohol is preventing you from flying again and it’s destroying your health. In spite of all the great things you’ve done since your heart attack: taking cholesterol medication, exercising, eating more vegetables and fish, you’re gaining weight. That’s because you’re drinking about 1,500 calories a day in alcohol! Mario and I are worried about you. We don’t want to lose you, Dad.*

Clinician: “Jorge, what do you think about what Guillermo is saying? What happened that made you come here to the clinic?”

*Jorge: I don’t know why Guillermo is so worried. I’m fine [pauses] … except for what happened the other week. I woke up on the floor and didn’t know how I got there. I couldn’t get up… I thought I’d had another heart attack. Fortunately, my phone was on the floor, so I called Bobby next door. Booby said I probably passed out from drinking. He had no idea, didn’t know what he was talking about. Still, I didn’t drink for two days after Guillermo left to go back to the Air Force. [triumphant] See…I can stop if I want to! [hesitates, slightly embarrassed] But then … there was nothing on TV and I was feeling a little down, so I drank some beer. [defensive] I only had one six-pack! Well … maybe part of another one, too. [sounding annoyed again] The ER doc asked me about my drinking, implying that I had a problem. And my regular doctor won’t stop bugging me about my drinking, either. So, I came here to appease them … well … mostly to appease my sons. One of my buddies came here and said this place is a cake walk if I tell you what you want to hear – [pleasantly] no offense, doctor. But I really don’t think I need to be here. And if the FAA found out, well – let’s just say I’m doing this on my own dime because I love my boys.  
  
Guillermo: [to his father] I’m worried because I care. I’m glad you’re here. I just wish you would have signed up for the standard 14 days instead of only agreeing to a week, Dad!*

Clinician: “Well, before we talk about the length of your stay, Jorge, let’s explore the issue a little more first. When did you first start drinking?”

*Jorge: [trying to remember] Hmm… Well, I didn’t drink at all when I was young. My mom and step-dad were Mormons, so they never drank. I started drinking the summer before I started college when I tracked down my biological dad, who had left before I was born. He’d remarried and was working as a janitor. [ashamed and sad] My dad never amounted to much, but he and his wife were happy. I spent three weeks with them, and we had beer and long talks every night after dinner. I realized I liked the taste of beer, and I also got a taste for the “hard stuff” with my dad. It relaxed me and made me feel less self-conscious. [reminiscing] I had a great time that summer. That’s when I began to enjoy drinking.*

Clinician: “What happened after that, Jorge?”

*Jorge: I started college, and I kept in touch with my dad by writing letters for a while …[laughs] This was before email and texting stuff. But I guess we both got busy, and I didn’t get to see him again before… he – he passed away of a heart attack about a year later... [slight pause] I went to a state university and joined a fraternity. You know how it is in a fraternity– we drank a lot. I could drink anyone under the table and still be standing. And that made me popular. [with pride]*

Clinician: “Guillermo mentioned earlier that you were in the Air Force at some point. Thank you for your service to our country. When did you serve, Jorge? Was it after college?”

*Jorge: I always wanted to be a fighter pilot. After I graduated from college, I applied for the Air Force and was accepted to pilot training. I made some really good friends – those were the days! We worked hard all week, then we partied at the local watering hole on the weekend nights. We would all start drinking around happy hour, have some sandwiches at the bar, flirt with some girls who came looking for guys in uniform, and finish the night with cognac and black coffee. I could still drink anyone under the table and be fine Saturday or Sunday morning. I served 8 years with an honorable discharge, and then got a job as a commercial pilot, the same job I hope to get back to soon if I can get my health back in shape!  
  
Guillermo: [under his breath] If you can’t get your drinking under control, you won’t*  *be able to fly again.*

Clinician: “What’s your relationship like with your family, Jorge?”

*Jorge: Eh. Don’t really need them hovering around all the time when I have the best friend a man can have – Jack. [laughs]… [adds]…as in Daniels… Just kidding. But my sons are good kids; they look out for me. I met their mom when I was in pilot training. We didn’t see much of each other after we got married because I was deployed so often in the Air Force, and she wanted to stay near her parents. When I became a commercial pilot, I only flew 10 or 12 days a month, so I had plenty of time to relax at home. [a little angrily] But she didn’t like that. She complained I drank too much and nagged me all the time. We got divorced after a few years of that… Found myself a nice condo. Hung out with pilot buddies, had some fun – if you know what I mean – with some flight attendants. Never did get married again. Never saw the need. I just enjoyed myself, until my sons got all worried about it. My doctor thinks my drinking caused my heart attack – ridiculous!  
  
Guillermo: [sadly] I remember listening to you and mom fight every night when I was growing up. It was really hard. It was almost a relief when you got divorced and moved out, Dad. But then I missed you… [choking up a little] I love you, Dad. I want you to get better. I want you to be able to get off medical leave and get cleared for flying so that we can fly cross-country together. But I don’t see that happening if you don’t commit yourself to getting help for your drinking.*

After reading this vignette, write a paper in 1,200-1,500 words addressing the following:

1. Based on this vignette and in alignment with the current *DSM* diagnostic codes, what is the best diagnosis for Jorge?
2. Based on Jorge’s case history and presentation, what symptoms is he experiencing, and why are these symptoms considered dysfunctional (pathological)? Consider cultural factors using the sociocultural psychological model (school of thought) and explain how factors within this model play a role.
3. Identify the treatment options for this disorder and develop a possible treatment plan for Jorge.