Anxiety Disorders: A Primer

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Anxiety Syndromes

- There are specific types of anxiety
- These need definition as treatment and prognosis are different depending on the type of anxiety you have.
- This handout is based on DSM-IV system and there are some newer criteria posted in the DSM-5 system not covered.
Fear Vs. Anxiety

- Real stimulus → Real Response
- Vs.
- Inappropriate stimulus → Real Response or even an inappropriate response
Panic Disorder

- 1-3% lifetime prevalence
- Women x3 > Men
- Associated with Agoraphobia
Panic Disorder

- Recurrent, unexpected panic attacks
- A discrete and acute period of fear/discomfort with >3 of below
  - palpitations, sweating, trembling, short breath, choking, chest pain, nausea, dizziness, derealization, fear of loss of control or dying, pareshthesias, chills/hot flashes
Panic Disorder

- Attacks are followed by > 1 month of:
  - concern about upcoming attacks
  - concern about implication of attacks
  - change in behavior due to attacks
  - +/- Agoraphobia
Panic Disorder Treatment

- Antidepressants are first line, most work over few weeks time (serotonin levels increase, and receptors decrease)
- Sedatives first/second line, most work over few days (GABA increase)
- Cognitive Education and Talking Through
- Progressive Relaxation and Respiratory Training
- Systematic Desensitization/Exposure
Cognitive-Behavioral Therapy

- Considered to be effective in every anxiety disorder and is best researched in regards to outcomes
- Treatment of a simple phobia as an example (fear of snakes)
Social Anxiety Disorder

- 6% Yearly Prevalence
- Female > Male
- Fear of scrutiny, humiliation or embarrassment in public settings
- Public speaking, urinating, conversing
Social Anxiety Disorder

- Treat with antidepressants (inc serotonin and/or norepinephrine, decrease receptors)
- Standing or PRN sedatives work (GABA inc)
- Cognitive-Behavioral Therapy (CBT)
- Beta Blockers and CBT for Performance Anxiety
Obsessive-Compulsive Disorder

- 3% Lifetime Prevalence
- Male = Female
- High association with Depression and Social Phobia
Obsessions

- Recurrent/persistent thoughts, impulses, images that are intrusive and distressful
- These are not everyday worries
- Patients attempt to suppress these
- Good insight retained
Compulsions

- Repetitive behaviors or mental acts that one is driven to perform in response to obsession or rigid rules
- These aim to reduce stress or prevent a dreaded event
OCD

- Must have obsessions, compulsions or both as outlined previously.
- They are excessive, cause distress and are time consuming
OCD

- Extended Clomipramine (a TCA) and High Dose SSRIs are treatment of choice
- Behavior therapy is often helpful (response prevention and flooding)
- Supportive and Dynamic therapies do not work?
- Benzodiazepine sedatives do not work well and is not an accepted treatment
Post Traumatic Stress Disorder

- 3% Lifetime Prevalence
- #1 traumatic event experienced is sudden loss of loved one
- #1 traumatic event to cause PTSD is assault
- Poor support is risk factor
Post Traumatic Stress Disorder

- Exposed to traumatic event with threatened death or serious injury combined with intense fear, horror, helplessness

- The event is relived, avoided, and hyperarousal is present for at least 1 month causing distress
Post Traumatic Stress Disorder

- Psychoeducation is first treatment (for all anxiety)
- Antidepressants (serotonin inc, receptors decrease),
- Anticonvulsants, sedatives, antipsychotics, beta blockers all reasonable treatment strategies
Generalized Anxiety Disorder

- 8% 1 year prevalence
- Most common comorbid disorder?
- Women > men, 2 > 1
Generalized Anxiety Disorder

- Excessive anxiety and worry
- > 6 months of distress
- Multifocal worries that are difficult to control
- >2 of: restlessness, fatigued, poor concentration, irritability, muscle tension, insomnia
- Not chemically or physically induced
Generalized Anxiety Disorder

- Treat with support, CBT, Dynamic therapy
- Use SSRIs, Buspirone (Inc Serotonin)
- VenlafaxineXR (inc serotonin/norepi)
- Sedatives in Gaba
- Pregabalin (? Calcium channel blocker)
Thank You

- We have covered the main anxiety disorders
  - Panic
  - Social
  - OCD
  - PTSD
  - Generalized

- You are responsible for remembering which symptoms go with which disorder in regards to this lecture