

Anxiety Disorders

Phenomenology

Phenomenology

- Mental Status Exam
 - General appearance
 - Physical symptoms of anxiety
 - Emotional symptoms
 - Thoughts
 - Cognitive symptoms

Phenomenology

- Anxiety as Warning Signal
 - What really sets it off?

Focus: Panic Disorder

Epidemiology

- Overall Anxiety: Most prevalent of psychiatric disorders.
- Panic: 1.5 to 3.5%
- Onset: mid 20's
- Gender

Pathology/Physiology

- Focuses of research
 - Precipitators of panic
 - lactic acid, infusion, carbon dioxide inhalation
- Neurotransmitters
 - Catecholamines
 - GABA

Genetics

- Identical twins
 - 45%:15% mono:di
- Relatives
 - @20% (versus 2% control)

Psychological Theories

- Ex. Learning theory (conditioning)

DSM-IV Diagnosis

- Syndrome versus Diagnosis
 - Panic Attacks, Agoraphobia
 - Panic Disorder

DSM Syndromes

- Panic Attacks
 - multiple symptoms (4 or more):
 - starts abruptly, peaks in about 10 minutes

Panic

- Heart stuff
- Sweat
- Trembling
- SOB, smothering
- Choking sensation
- Chest pain
- nausea
- Dizziness
- Derealization or depersonalization
- Fear of losing control/crazy
- Fear of dying
- Paresthesias
- chills

Panic Attacks

- Sudden
 - +/- precipitant
- Peak: minutes
- Last 5-30 minutes
- Anticipatory/persistence

DSM Syndromes

- Agoraphobia
 - fear/avoidance of places/situations.
 - fear panic attack.

DSM Diagnosis

- Panic Disorder, with and without Agoraphobia
 - recurrent Panic Attacks
 - anticipatory anxiety
 - "Global Criteria".
 - Can be with or without Agoraphobia.

Differential Diagnosis

- Other medical disorders
 - endocrine
 - cardiopulmonary disorders
 - neurologic disorders

Differential

- Substance induced disorders
 - withdrawal syndromes
 - intoxication/therapeutic syndromes

Differential

- Other psychiatric syndromes
 - mood disorders
 - psychotic disorders
 - Personality
 - Adjustment disorders

Comorbid Disorders

- Mood disorder--depression
- Medical disorders
 - mitral valve prolapse and panic.
 - Ulcers
 - HTN
- Suicide

Course and Prognosis

- Onset: late teens-early adult
 - ? bimodal
- Course: chronic, waxing and waning
- Outcome
 - at 6-10 years follow-up:
 - 1/3 well
 - 1/2 « improved but symptomatic
 - 1/5-1/3: same or worse
- Relapse: high risk
- Agoraphobia

Other Diagnoses

Other Diagnoses

- All of The Disorders
 - Panic Disorder (w/ or w/o Agoraphobia)
 - Agoraphobia w/o Panic
 - Specific Phobia
 - Social Phobia
 - Obsessive-Compulsive Disorder
 - Posttraumatic Stress Disorder
 - Acute Stress Disorder
 - Generalized Anxiety Disorder
 - Anxiety Disorder Due to a General Medical Condition
 - Substance-Induced Anxiety Disorder

Agoraphobia without History of Panic Disorder

- Agoraphobia
- No panic disorder
- Not due to a medical/substance disorder

Specific Phobia

- XS fear of object/situation
- avoidance/anxious endurance of object/situation
- "Global Criteria"
- Specific Types
 - » Animal Type
 - » Natural Environment Type (heights, storms, water)
 - » Blood-Injection-Injury Type
 - » Situational Type
 - » Other.

Social Phobia

- XS fear of a social situation (humiliation)
- Global Criteria
- Typical: talking, eating, bathroom stuff
- can be generalized.
- Diff: agoraphobia

Obsessive-Compulsive Disorder (OCD)

- either or both:
 - obsessions
 - compulsions
- Good insight
- "Global Criteria".

Posttraumatic Stress Disorder (PTSD)

- After trauma: 3 types of symptoms
 - re-experiencing trauma
 - Avoidance/numbing
 - Arousal
- Global Criteria.
- Timing
 - Acute (< 3 months) versus chronic.
 - requires more than 1 month of symptoms

Acute Stress Disorder

- Like PTSD, but less than 1 month.

Generalized Anxiety Disorder (GAD)

- "Always anxious."
- Excessive worry \geq 6 months.
- Associated with (\geq 3)
 - restlessness
 - fatigueability
 - difficulty concentrating
 - irritability
 - muscle tension
 - insomnia

Anxiety Disorder Due to a
General Medical Condition, and
Substance-Induced Anxiety
Disorder

- can be
 - GAD-like
 - panic attacks
 - OCD symptoms.
 - phobic symptoms
