Introduction to Anxiety Disorders

Reo Newring, PhD
Kaelee Steffensmeier, DNP, APRN-NP

Presented on 9/10/2020
Overview & Learning Objectives

• Overview of DSM-5 Anxiety Disorders
• Review criteria for most common anxiety disorders
• Discuss normal versus abnormal anxiety in children and adolescents
<table>
<thead>
<tr>
<th>Category</th>
<th>Disclosure Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultant/ Speakers bureaus</td>
<td>No disclosures</td>
</tr>
<tr>
<td>Research funding</td>
<td>No disclosures</td>
</tr>
<tr>
<td>Stock ownership/Corporate boards-employment</td>
<td>No disclosures</td>
</tr>
<tr>
<td>Off-label uses</td>
<td>No disclosures</td>
</tr>
</tbody>
</table>
# Outline of ECHO sessions

<table>
<thead>
<tr>
<th>Session #1</th>
<th>Intro to Anxiety Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 10</td>
<td>a. DSM-5 Disorders</td>
</tr>
<tr>
<td></td>
<td>b. Normal Anxiety at various stages of childhood development</td>
</tr>
<tr>
<td>Session #2</td>
<td>Evaluation and Screening of Anxiety Disorders</td>
</tr>
<tr>
<td>Sept 24</td>
<td></td>
</tr>
<tr>
<td>Session #3</td>
<td>Therapeutic Interventions I - overview. (Psychology)</td>
</tr>
<tr>
<td>Oct 8</td>
<td></td>
</tr>
<tr>
<td>Session #4</td>
<td>Therapeutic Interventions II - OCD (Psychology)</td>
</tr>
<tr>
<td>Oct 22</td>
<td></td>
</tr>
<tr>
<td>Session #5</td>
<td>Medication Interventions (Psychiatry)</td>
</tr>
<tr>
<td>Nov 5</td>
<td></td>
</tr>
<tr>
<td>Session #6</td>
<td>Psychiatric and Medical Co-Morbidities (Psychiatry)</td>
</tr>
<tr>
<td>Nov 19</td>
<td></td>
</tr>
<tr>
<td>Session #7</td>
<td>Special Topics: PTSD</td>
</tr>
<tr>
<td>Dec 3</td>
<td></td>
</tr>
<tr>
<td>Session #8</td>
<td>1. Anxiety and the Environment</td>
</tr>
<tr>
<td>December 17</td>
<td>a. Social Media</td>
</tr>
<tr>
<td></td>
<td>b. Mass Tragedies, Crises, and Traumas (school shootings, pandemics, social unrest)</td>
</tr>
</tbody>
</table>
DSM-V Anxiety Disorders

• Separation Anxiety Disorder (F93.0)
• Selective Mutism (F94.0)
• Specific Phobia, include specifier
• Social Anxiety Disorder (Social Phobia) (F40.10)
• Panic disorder (F41.0)
• Agoraphobia (F40.00)
• Generalized Anxiety Disorder (F41.1)
• Substance/Medication-Induced Anxiety Disorder
• Anxiety Disorder Due to Another Medical Condition (F06.4)
• Other Specified Anxiety Disorder (F41.8)
• Unspecified Anxiety Disorder (F41.9)
Separation Anxiety Disorder

• Developmentally inappropriate and excessive fear or anxiety concerning separation from those to whom the individual is attached
• Must display at least three criteria
• Lasts at least 4wks in children and adolescents (18yo and younger)
• Distress or impairment of functioning
• Disturbance isn’t better explained by another mental disorder
Separation Anxiety Disorder

- Children 4%; Adolescents 1.6%
- Most common anxiety disorder in children < 12yo
- Environmental stressors may trigger
- Genetic predisposition
- Significant comorbidity with GAD and specific phobias
Social Anxiety Disorder

- Marked fear or anxiety about one or more social situations where individual is exposed to possible scrutiny by others
  ***In children, the anxiety must occur in peer settings and not just during interactions with adults.***
  - Social interactions
  - Being observed
  - Performing in front of others
- Social situations almost always provoke anxiety
- Lasts for 6mos or >
- Distress or impairment of functioning
- Not attributable to substance or other medical condition
- Not better explained by another mental disorder
Social Anxiety Disorder

• Specify:
  – Performance only
• 7% prevalence
• F > M
• Median age of onset is 13yo
• Risk factors and genetic predisposition
• Comorbid with other anxiety disorders, MDD, and substance use disorders
Generalized Anxiety Disorder

• Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6mos, about a number of events or activities (such as work or school performance)

• Difficult to control the worry

• Associated with three or more criteria

• Distress or impairment of functioning

• Not attributable to other factors

• Not better explained by another mental disorder
Generalized Anxiety Disorder

• Physical symptoms
• Increased startle response
• Autonomic hyperarousal
• Prevalence
  – 0.9% among adolescents
  – Females twice as likely as males
• Comorbid with other anxiety and unipolar depressive disorder
Unspecified Anxiety Disorder

• Characteristics of an anxiety disorder that cause clinically significant impairment or distress predominate, but do not meet full criteria for any of the anxiety disorders.
Normal vs Abnormal Anxiety in Toddlerhood

**Normal**
- Stranger anxiety
  (*infancy/early toddler*)

**Abnormal**
- Terror that cannot be soothed or distracted
Normal vs Abnormal Anxiety in Preschool Child

**Normal**
- Fear of the dark
- Shy when meeting new people

**Abnormal**
- Terror that cannot be soothed or distracted
- Refusal to speak (selective mutism)
Normal vs Abnormal Anxiety in School-age Child

**Normal**
- Fear of the dark (lessening)
- Increasing awareness of death
- Fears for health and safety

**Abnormal**
- Unable to sleep in own bed
- Non-compliance or refusal
- Perseverant fears
Normal vs Abnormal Anxiety in Adolescence

<table>
<thead>
<tr>
<th>Normal</th>
<th>Abnormal</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Worries about social acceptance</td>
<td>• Intense somatic symptoms resulting in school/activity avoidance</td>
</tr>
<tr>
<td>• Increasing awareness of culture and context</td>
<td>• Perseverant fears</td>
</tr>
<tr>
<td>• Worries about judgment and performance</td>
<td>• “My worry thoughts are stronger than I am.”</td>
</tr>
</tbody>
</table>