



GENERAL ANXIETY DISORDER

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General Anxiety Disorder

Pathology or circumstance?



Disclosures

I have no actual or potential conflict of interest in relation to this program/presentation.

Learning Objectives

- Identify the DSM criteria for making a diagnosis of GAD
- Describe several simple scales used to investigate GAD
- Discuss GAD symptoms in pediatric populations and how they can differ from adults
- Employ common medications used to treat GAD in adult and pediatric populations



Who Is Here?

**PAs Graduated
In Past 2
Years?**

**PAs Graduated
In Past 10
Years?**

My Promises To You....

**I Will Do My
Best To NOT
Make This
Another Boring
Lecture On
ANXIETY!**



My intention is that you come away with some practical knowledge that you can apply to your patients presenting with anxiety on MONDAY.



GENERALIZED ANXIETY DISORDER

DSM -5 Diagnostic Criteria

- A. Excessive anxiety and worry, occurring more days than not for at least 6 months about a number of events.
- B. The Individual finds it difficult to control the worry.
- C. The anxiety is associated with **at least three** of the following anxiety symptoms:
 - A. Restlessness
 - B. Easily Fatigued
 - C. Difficulty concentrating or blanking out.
 - D. Irritability
 - E. Muscle tension
 - F. Restless sleep and/or onset or maintenance issues.
- D. The anxiety, worry, or physical symptoms cause SIGNIFICANT distress or impairment of social or occupational functioning.
- E. The symptoms are not caused by other DRUGS (Illicit or prescribed), MEDICAL conditions (e.g., hypoglycemia, encephalopathy, hypothyroidism), or OTHER mental health conditions.¹

GENERAL ANXIETY

- A. Excessive anxiety or worry about a number of everyday activities
- B. The Individual finds it difficult to control the anxiety
- C. The anxiety or worry is associated with:
 - A. Restlessness
 - B. Easily Fatigued
 - C. Difficulty concentrating
 - D. Irritability
 - E. Muscle tension
 - F. Restless sleep
- D. The anxiety, worry or fear is socially or occupationally impairing
- E. The symptoms are not due to a substance or other medical condition (e.g., hypothyroidism, heart disease, asthma, or other health conditions).



In KIDS who have difficulty controlling worry

Only **ONE** of these symptoms has to be present for 6 -months

- Restlessness
- Feeling tired
- Focus and concentration problems
- Irritability
- Muscle tension
- Sleep problems

5 Criteria

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Specific Concerns in Kids

In children and adolescences worries are often centered on school or sports performance.

Kids may worry about catastrophic events out of proportion (Coronavirus, active shooter, and weather events)¹

Often excessive worry or perfectionistic behavior outside of external pressure.

Watch out for other mental health conditions that look like GAD:

- Separation/Social Anxiety
- Obsessive Compulsive Disorder
- Post Traumatic Stress
- Alcohol and Drugs²



What Makes GAD Different?



Everybody Gets Anxious Right?



Stress - Anxiety - Panic - Worry - Burnout

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Anxiety Scales



GAD-7

Over the last 2 weeks, how often have you been bothered by the following problems?

(Use "✓" to indicate your answer)

	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen		1	2	3

(For office coding)



Kids only need one of these symptoms.

___ + ___ + ___

For Adults: 3 or more of these symptoms for at least 6-months

Restlessness

Easily Fatigued

Trouble

concentrating

Irritability

Muscle Tension

Sleep Problems

Beck Anxiety Inventory

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

	Not At All	Mildly but it didn't bother me much.	Moderately - it wasn't pleasant at times	Severely – it bothered me a lot
Numbness or tingling				
Feeling hot				
Wobbliness in legs				
Unable to relax	0	1	2	3
Fear of worst happening	0	1	2	3
Dizzy or lightheaded				
Heart pounding/racing				
Unsteady				
Terrified or afraid	0	1	2	3
Nervous	0	1	2	3
Feeling of choking	0			
Hands trembling				
Shaky / unsteady				
Fear of losing control	0			
Difficulty in breathing	0	1	2	3
Fear of dying	0	1	2	3
Scared		1	2	3
Indigestion				
Faint / lightheaded				
Face flushed				
Hot/cold sweats				
Column Sum				

Numbness

Hot

Wobbliness

Dizziness

Heart Pounding

Unsteady

Choking

Hands Trembling

Shakey

Ingestion

Lightheaded

Flush/Sweats

BECK
(Provider completed)

Benefits Include:

Addresses restlessness & worry directly **and** additionally lists several physical symptoms that are commonly associated with anxiety.

21 Questions & 63 Total Points
Anything over 36 indicates potential seriously impairing anxiety.

Other Scales to Consider

**Patient Health Questionnaire
(PHQ-9)**

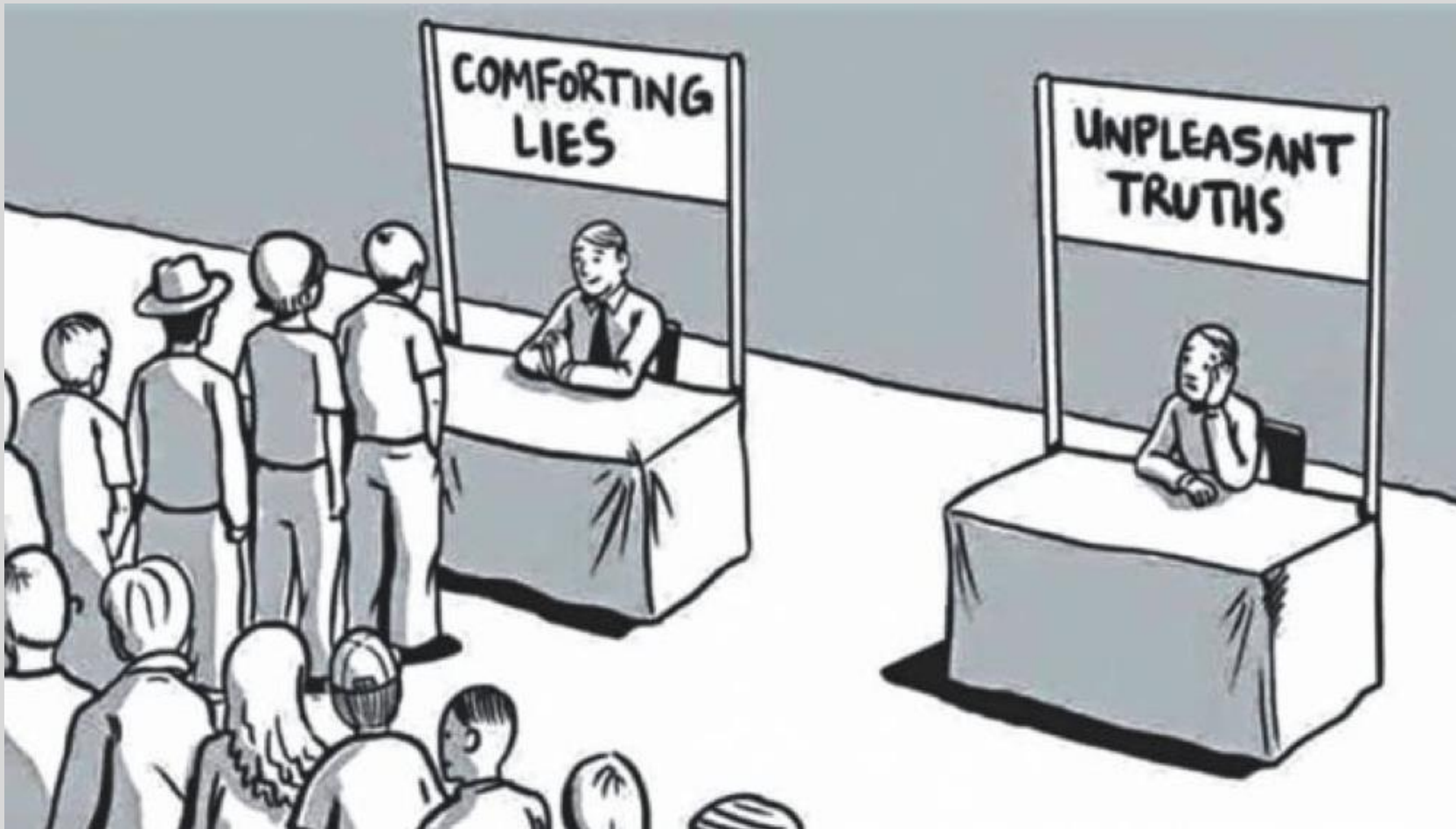
**Mood Disorder Questionnaire
(MDQ)**

**Adult ADHD Self Report Scale
(ASRS-v 1.1)**

Included in your
Handouts for this
lecture



Treatment for GAD



The Realities in Many Practices:

**Get Em IN
Get Em OUT
And Move On**



Medical Screen for Anxiety

- ▶ Endocrine (Thyroid and Fasting Glucose)
- ▶ Vitamins (Vitamin D, B-12, Folate, B6)
- ▶ Urine Toxicology
- ▶ Respiratory Problems
- ▶ Sleep Abnormalities
- ▶ Cardiac Conduction Defects
- ▶ Seizure activity



*"I don't have time to listen to all that.
I only do what we call in the biz, **Medication Management**"*

FDA Approved Medication for Adult GAD



**Paroxetine
(Paxil)**



**Escitalopram
(Lexapro)**



**Venlafaxine
(Effexor)**



**Xanax
(Alprazolam)**

In Kids

ONLY 1 Medication has been approved by the FDA to date to treat GAD in kids.

In 2014 Duloxetine (Cymbalta) was approved for 7–17 year-olds.

However, SSRIs are very commonly used in adolescent populations.

Sertraline (Zoloft), Fluoxetine (Prozac), and Fluvoxamine (Luvox) have been approved in Pediatric populations (>/= 7 years old) to treat OCD.



Citalopram (Celexa), Fluoxetine (Prozac), and Escitalopram (Lexapro) are FDA approved for Depression in 12 and above.

Primary Concerns with SSRI/SNRI

Nausea
Sexual Dysfunction
Agitation
Weight gain
Insomnia

May of these symptoms can be confused with worsening anxiety and may lead to non-compliance.





In Pediatric Populations

After the FDA and UK regulatory agencies released warnings in the 1980's about increased suicidal thoughts and suicidal behaviors in kids taking antidepressants use of these medication fell worldwide

The current literature calculates the risk of suicidality in children as low and reports 1-2 % of kids taking SSRI experience the emergence of suicidal thoughts and behaviors but not completed suicides.³

Greatest risk in the first 9-days and usually with higher-than-normal starting doses.

Informed consent should include the discussion of the relative risk of increased suicidal thinking with antidepressant medications versus the risk of suicide without psychopharmacologic treatment.

Non-Pharmacological Treatments

Cognitive Behavioral Therapy (CBT) - Targeting thoughts and behaviors related to mood.

Interpersonal Psychotherapy (ITP) – Focuses on improving relationships with friends and family, increasing social support and improving problem solving skills.

Family Based treatments – This intervention promotes family alliances and connections and promotes success outside of the home.

Dialectal Behavioral Therapy (DBT) – Decreases moderate to severe anxiety mixed with depression along with self harm and suicidal behaviors.

Miscellaneous - Exercise programs, structured sleep, motivational interviewing

References

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- 2) Kodish, I., Rockhill, C., & Varley, C. (2011). Pharmacotherapy for anxiety disorders in children and adolescents. *Dialogues in clinical neuroscience*, 13(4), 439–452. <https://doi.org/10.31887/DCNS.2011.13.4/ikodish>
- 3) Southammakosane, C., & Schmitz, K. (2015). Pediatric psychopharmacology for treatment of ADHD, depression, and anxiety. *Pediatrics*, 136(2), 351–359. <https://doi.org/10.1542/peds.2014-1581>
- 4) American Academy of Child and Adolescent Psychiatry (2018). Depression: Parents medication guide. American Psychiatric Association.
https://www.aacap.org/App_Themes/AACAP/docs/resource_centers/resources/med_guides/DepressionGuide-web.pdf

Mental Health - Handouts

- **General Anxiety Disorder -7 (GAD-7)**
- **Beck Anxiety Inventory (BAI)**
- **Hamilton Anxiety Rating Scale (HAM-A)**
- **Patient Health Questionnaire-9 (PHQ-9)**
- **Mood Disorder Questionnaire (MDQ)**
- **Adult ADHD Self Report Scale (ASRS-v 1.1)**

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