

When Is Anxiety a Problem?

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Agenda

- What is anxiety?
- What causes anxiety?
- When is anxiety a problem?
- What is the size of the problem?
- What are the different types of anxiety?
- How can you feel better if you have anxiety?



What is anxiety?



- Normal physical and emotional response to perceived or actual threat
- Helps:
 - to **remove us** from harm
 - **get ready** for important events
 - a **warning** to be **alert**

What **causes** anxiety?

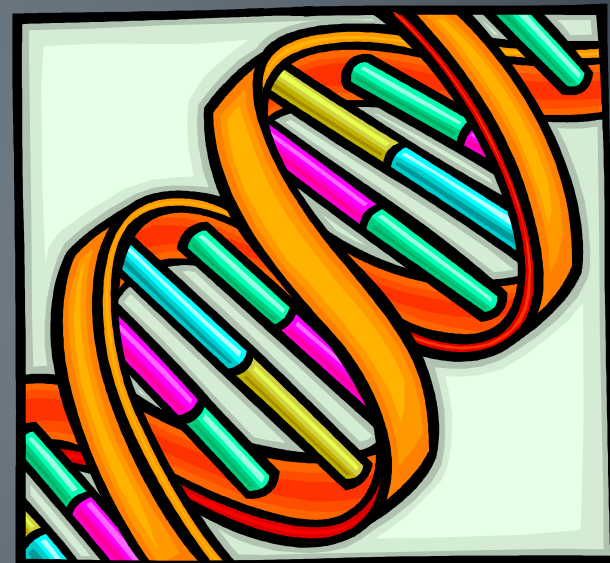
- **Stress** of ANY kind
 - Work
 - Relationships
 - Health problems
 - Financial
 - Trauma
 - Life threatening trauma
- Genetic-run in families, **biological**
- Develop from a **complex set of risk factors**, including genetics, brain chemistry, personality, and life events.

What causes anxiety?

- Genetic
- Cognitive-Behavioral
 - Physiological
 - Ecological

Genetic Heritability

- Anxiety disorders are **36 to 65% inheritable...** Including but not limited to obsessive-compulsive disorder (OCD), panic disorder (PD), and generalized anxiety disorder (GAD).
- Anxiety disorders **aggregate in families** but also have strong environmental influences
- Predisposition to **over arousal and hyper-reactivity to stimuli**



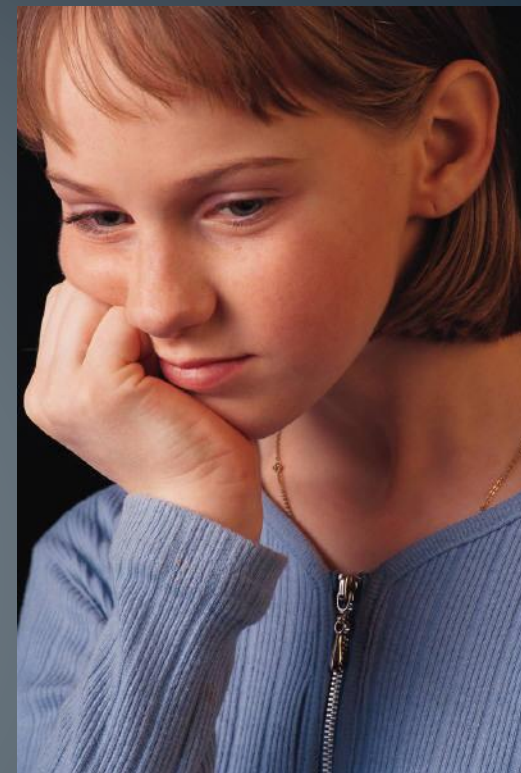
Cognitive-Behavioral

- Learned dysfunctional thoughts, feelings, and behaviors through their experiences before and during adolescence.
- Negative responses reinforced thru avoidance and escape
- Cognitive biases are developed such as paying attention to threat related stimuli and overestimating degree of personal risk in various situations.

Risk Factors

- Poverty
- Community Violence
- Lower educational attainment
- Exposure trauma in childhood, including neglect and abuse-
more severe trauma more likely it will result in mental health
disorder

- Anxiety **disorders** are the most frequent mental health problems seen in primary care and psychiatry.
- Cause **social and academic issues for children** and can increase risk of **range of mental health problems** throughout development and into adulthood



When is anxiety a problem?

Everyday Anxiety

- Worry about paying bills, landing a job, a romantic breakup, or other important life events
- Embarrassment of self-consciousness in an uncomfortable or awkward social situation
- A case of nerves or sweating before a big test, business presentation stage performance or other significant event
- Realistic fear of a dangerous object, place or situation
- Making sure you are health and living in a safe hazard-free environment
- Anxiety, sadness , or difficulty sleeping immediately after a traumatic event

Anxiety Disorder

- Constant and unsubstantiated worry that carries significant distress and interferes with daily life
- Avoiding social situations for fear of being judged, embarrassed, or humiliated
- Seemingly out-of-the-blue panic attacks and the preoccupation with the fear of having another one
- Irrational fear or avoidance of an object, place, or situation that poses little or no treat of danger
- Performing uncontrollable repetitive actions such as excessive cleaning or checking or touching and arranging
- Recurring nightmares, flashbacks, or emotional numbing related to a traumatic event that occurred several months or years before

Physical Symptoms of Anxiety

-can be vague and numerous

- Fatigue, general muscle tension, memory loss and difficulty in concentrating, malaise, insomnia, dry mouth, or a poorly defined sense of “not being well.”
- Palpitations, tachycardia, syncope or pre-syncope, shortness of breath, and chest tightness or pain
- Diarrhea, nausea, and abdominal pain.
- Frequent urination and urinary urgency may be reported. Neurological symptoms may include trembling, dizziness, paresthesias, or numbness.

Sleep Related Problems

- Common feature of anxiety disorders and adults with ID
- Obtain **detailed information** related to both sleep & anxiety in adolescents presenting with difficulties in either domain
- **Sleep problems** are early markers for emerging psychopathology, **including anxiety disorders**
- SRPs associated with impaired family functioning
- **Sleep dysregulation, irritability, social withdrawal, poor concentration, negative attitude about self and future, decreased appetite** a subgroup of 28% to 69% have anxiety or depression have both at the same time

What is the **size** of the problem? **Children?**

- Many children suffer from anxiety~
 - Occurs in 5% to 19% of all children and adolescents
 - Under 12 prevalence between 2.6% and 5.2% with separation anxiety the most common disorder
- Children with anxiety **more likely to have difficulty** with
 - friendships
 - family life
 - school
-



What is the size of the problem? **Children?**



- Treatments for children can help to prevent mental health problems or drug and alcohol misuse in later life.
- **Equal prevalence** among young boys and girls *until* adolescence; **then 2:1 to 3:1 females** to males
- Adults **seen for anxiety** had the **origins in childhood adolescence**

What is the size of the problem? **Adults?**

- 40 million adults- **the most common mental illness** in the U.S.
- Only **1/3** suffering **get treatment**
- 3 to 5 times more likely to visit doctor **seeking relief for anxiety symptoms** that mimic physical illness
-
- Women are **2 to 3 x more likely to have anxiety disorders** than men
- **Not uncommon** to have an **anxiety disorder** and depression



ANXIETY

What is the **SIZE** of the problem in DDMI?

- **No** clear numbers **for** DDMI **population...**
- However **one of the MOST common forms** of **psychological distress** for people with an **intellectual disability 14 to 26.8%**



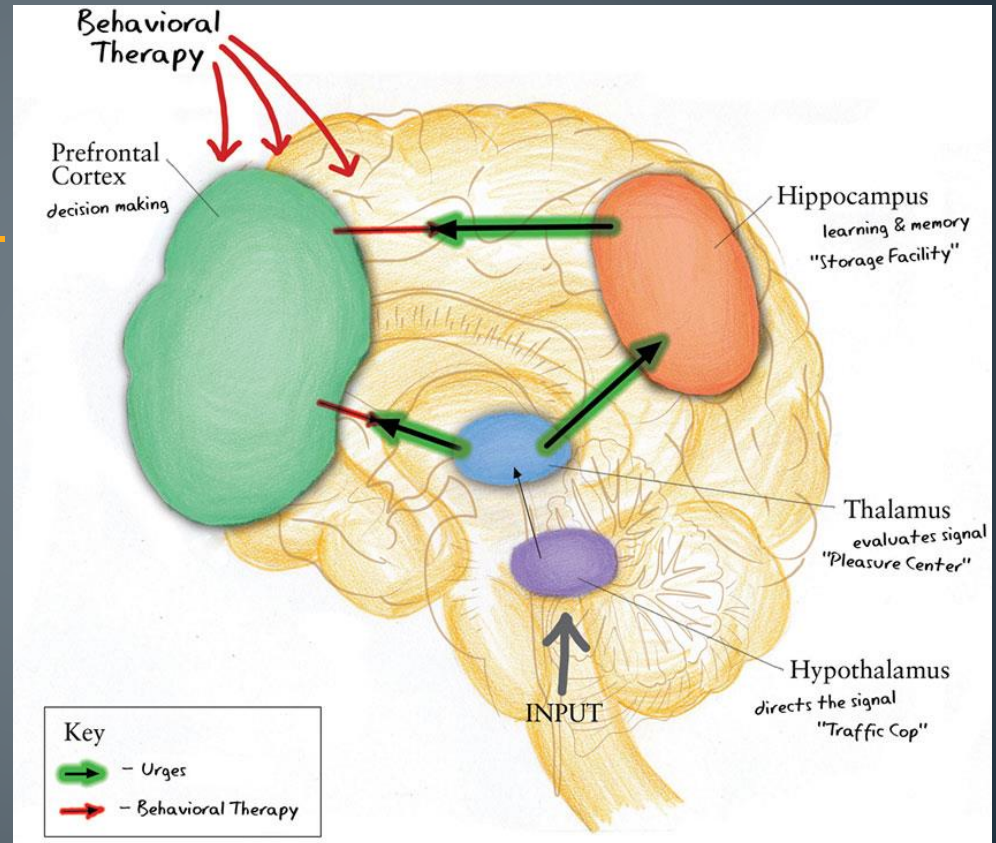
5 Nonverbal Signs of Anxiety in Children and Adults with ID

1. Sleep disturbances that are more than several days; actual dreams of the trauma may or may not appear
2. Clinging behavior, anxiety from separating, reluctance on going back to workshop or school
3. Phobias about distressing stimuli people, places, events which remind the child or adult of the precipitating event
4. Conduct disturbances at home, school or work place which are responses to anxiety & frustrations.
5. Doubts about self worth & desire to withdraw

ANXIETY DDMI

Neurobiological Basis

- Related to **abnormal stress** and **autonomic system reactivity** and brain function-
“fight or flight”
- Dysregulation of autonomic nervous system activity
 - Abnormal **cardiovascular** and **electrodermal** responses



Practical Clinical Guidelines for People with Intellectual Disabilities

1. Anxiety disorders are common in patients with developmental disorders, but frequently go undiagnosed.
2. Use well-standardized, validated, reliable assessments. Consider use of assessments specifically developed for patients with developmental disorders.
3. Use multiple, collateral sources of information.
4. Consider the evidence for effectiveness of treatment in reducing anxiety symptoms along with risk of side effects when prescribing medications.
5. Consider psychosocial treatment, but especially that few studies exist for applying these treatments in patients with anxiety and developmental disorders. Adaptations and modifications to standard or well-studied approaches may be necessary.
6. Make use of multidisciplinary treatment and intervention teams.

What is the size of the problem? **Elderly?**



60+ yrs 17% have anxiety

Often see depression with anxiety

Occurs with **medical illnesses**

Generalized anxiety disorder is most common anxiety disorder in older adults

Can be **associated with traumatic events, falls, acute illnesses**

Types of Anxiety Disorders

- Separation Anxiety Disorder
- Panic Disorder with and without agoraphobia
- Social phobia
- Obsessive-compulsive Disorder
- Acute Stress Disorder
- PTSD
- Generalized anxiety disorders
- Anxiety Disorder NOS

How can those who have problem anxiety feel better?

Recognition

Deep breathing

Relaxation exercises

Exercise

Good nutrition

Cognitive Behavioral Therapy

Medications



Resources – Local and Web-based

Websites:

1. Anxiety Disorders Association of America, www.adaa.org
2. Child Anxiety Network,
www.childanxiety.net/Anxiety_Disorders.htm
3. Prevalence and associations of anxiety disorders in adults with intellectual disabilities. K. A. Reid, E. Smiley and S.-A. Cooper (2011). [*Journal of Intellectual Disability Research*, 55\(2\). pp. 172-181.](#)
4. Cognitive-Behavioral Intervention for People with Intellectual Disability and Anxiety Disorders. Dagnan & Jahoda (2006). [*Journal of Applied Research in Intellectual Disabilities*, 10, 91-97.](#)

