

# The Client With an Anxiety Disorder

# ANXIETY

- Anxiety: a sense of psychological distress
- Different from “stress”
- Physiological Responses, including fight or flight response
- Can become debilitating and chronic, with physiological, psychological, and cognitive effects becoming chronic, too

# THE CONTINUUM OF ANXIETY

- Effects on Sensation

- Mild: Heightened sensory awareness
- Moderate: dulls perception
- Severe: increasingly distorted perception, sensory input diminishes, processing becomes scattered and unorganized
- Panic: Perception grossly distorted

- Effects on Cognition

- Mild/Moderate: conducive to concentration, learning and problem-solving
- Severe: hinders cognitive function
- Panic: cognition virtually impossible during panic episodes

- Effects on Verbal Ability

- Mild: speech is logical, speech rate and volume appropriate; alertness, confidence, and relative security
- Severe: verbalization of anxiety, demands for help and relief
- Panic: greater emotional pain and behavioral disorganization

# NORMAL VS. ABNORMAL ANXIETY

- Anxiety may become pathological when:
  - No real threat exists, or threat has passed
  - It is of greater-than-expected intensity
  - It prevents fulfillment of roles
  - It is accompanied by flashbacks, obsessions, or compulsions
  - It causes curtailment of daily/social activities
  - It lasts longer than expected

# ANXIETY DISORDERS

**Anxiety Disorders:** a group of conditions in which the affected person experiences persistent anxiety that he/she cannot dismiss and that interferes with daily activities. Persons with anxiety disorders feel that the core of their personality is being threatened, even when no actual danger exists.

# ETIOLOGY OF ANXIETY DISORDERS

- Neurobiological theories
  - Heredity
  - Abnormal neurotransmitter regulation
    - Serotonin
    - Gamma-aminobutyric acid (GABA)
  - Brain structures
    - Amygdala
    - Hippocampus
    - Locus ceruleus
    - Striatum

# ETIOLOGY OF ANXIETY DISORDERS (continued)

- Psychological Theories
  - Client's Individual Features
    - Low self-esteem, shy or timid nature, parents who were perceived as critical/angry, discomfort with aggression
  - Conditioning
    - Anxiety occurs when link exists between dangerous or fear-inducing event and a neutral event
  - Cognitive Distortion
    - Client's perception or attitude overestimates the danger

# SIGNS AND SYMPTOMS/DIAGNOSTIC CRITERIA

- Generalized Anxiety Disorder (GAD)
- Phobic Disorders
  - Agoraphobia
  - Social Phobia
  - Specific Phobia
- Panic Attacks
- Panic Disorder



# SIGNS AND SYMPTOMS/ DIAGNOSTIC CRITERIA (continued)

- Obsessive-Compulsive Disorder (OCD)
  - Obsessions
  - Compulsions
- Post-Traumatic Stress Disorder (PTSD)
  - Hyperarousal
  - Recurrent nightmares
  - Flashbacks
- Acute Stress Disorder

# COMORBIDITIES AND DUAL DIAGNOSES

- Anxiety disorders often co-exist with depression, substance abuse, eating disorders, personality disorders, and schizophrenia
- **Clues to look for:** high ETOH/drug intake; history of barbiturate or benzodiazepine dependence, history of frequent use of healthcare for somatic complaints; negative outlook; distorted thinking; obsessions or compulsions, history of an eating disorder.

# IMPLICATIONS AND PROGNOSIS

- Complications can include developing other Axis I diagnoses
- Chronic stress leads to immunosuppression, hypertension, and increased corticosteroid release
- Effects of anxiety disorder can be debilitating

# INTERDISCIPLINARY GOALS AND TREATMENT

- Psychodynamic Therapies
  - Basic cognitive therapy techniques
  - Systematic desensitization and exposure treatment
  - Relaxation techniques and breathing retraining

# INTERDISCIPLINARY GOALS AND TREATMENT (continued)

- Pharmacologic Treatments
  - Selective Serotonin Reuptake Inhibitors
  - Benzodiazepines
  - Buspirone
  - Beta Blockers
  - Tricyclic Antidepressants

# THE NURSING PROCESS IN CLIENTS WITH ANXIETY DISORDERS

- Assessment
- Nursing Diagnosis
- Planning
- Implementation
  - Alleviating Anxiety
    - Initiating a therapeutic dialogue
    - Countering faulty thinking
    - Managing hyperventilation
    - Suggesting lifestyle changes
  - Teaching Adaptive Coping Strategies
    - Teaching relaxation
    - Teaching problem-solving skills
- Evaluation

# Yoga & Anxiety disorders

- Sudarshan Kriya yoga (SKY), a sequence of specific breathing techniques (ujjayi, bhastrika, and Sudarshan Kriya) – **alleviate** -
- anxiety, depression, everyday stress, post-traumatic stress, and stress-related medical illnesses.

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