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Anxiety Disorders in Adults

Practice Based Small Group Learning

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INTRODUCTION

Anxiety disorders can significantly impair functioning and quality of life. Patients often present with medically unexplained symptoms or other mental health conditions (including dementia in older patients). Therefore, asking about key symptoms associated with anxiety disorders is important. Patients diagnosed with an anxiety disorder can benefit from both behavioural and pharmacological treatments.

OBJECTIVES

This module will enable practitioners to:

- Address the complexity of anxiety presentations and comorbidities.
- Offer treatment options to patients, including the use of medications.
- Increase their confidence in managing anxious patients.
- Diagnose and treat anxiety in the elderly.

Notes:

This module will cover ONLY generalized anxiety disorder, social anxiety disorder and panic disorder

CASES

Case 1: Bruce, male, age 45

This is the first time you have met Bruce. His fraternal twin brother died suddenly of a heart attack six months ago and he reports palpitations almost daily, with vague chest pain. He is worried about his heart. He has had these symptoms for 3 to 4 months. They are not getting more severe but lately he has been unable to go outside for a walk because leaving the house seems to bring on the symptoms.

He does not have difficulty walking up a flight of stairs, but sometimes his symptoms come on at rest and he wakes at night feeling chest discomfort, palpitations, sweating and a sense of "doom". He also describes recurrent nightmares and non-restorative sleep for the past six months. He was laid off from his job as a builder over a year ago and has been on job seekers allowance and working casually from time to time.

There is no other family history of cardiac disease. Bruce smokes 25/day.

Physical examination is unremarkable: BP 140/90, pulse 88 regular, BMI 29.

What else would you like to know about Bruce?

What might you do today?

Part Two

Bruce returns three weeks later to review his test results (including an exercise tolerance test) which are all unremarkable.

Bruce describes a fear of having his symptoms while out in public. On several occasions, he has suddenly left a shop without his purchases. He admits to a fear of people staring at him, judging him and thinking he is stupid. He cannot walk all the way down his street for fear of encountering another person and having these thoughts overwhelms him.