

Pediatric Mental Health Care Access Grant

# Generalized Anxiety Disorder:

Toward understanding Central Nervous System “Excitement,”  
“Fear of the Unknown,” and Treatment

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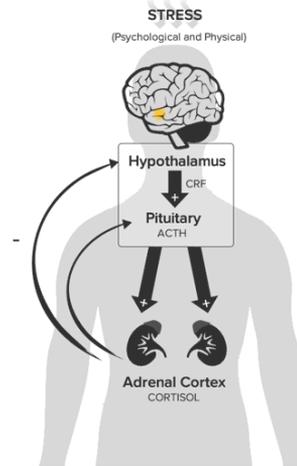
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## OBJECTIVES

1. Recognize physical, cognitive, and behavioral presentation of Generalized Anxiety Disorder.
2. Identify diagnostic criteria of Generalized Anxiety Disorder
3. Identify treatment approaches for Generalized Anxiety Disorder

## PHYSIOLOGICAL RESPONSE TO STRESS

- **Central Nervous System arousal:**
  - “Excitement”
  - Hypothalamic Pituitary Adrenal (HPA) axis



## BASIC THOUGHTS ABOUT ANXIETY

- Fear of the Unknown
- Worrying about worrying
- Worrying “out of the blue”
- Opposite of “Mindfulness”

## THE MANY SYMPTOMS OF ANXIETY

<b>Physical</b>		
<b>Increased heart rate</b>	<b>Dizziness</b>	<b>Blushing</b>
<b>Fatigue</b>	<b>Blurred vision</b>	<b>Vomiting</b>
<b>Increased respiration</b>	<b>Dry mouth</b>	<b>Numbness</b>
<b>Nausea</b>	<b>Muscle tension</b>	<b>Sweating</b>
<b>Stomach upset</b>	<b>Heart palpitation</b>	

## THE MANY SYMPTOMS OF ANXIETY

<b>Cognitive</b>		
<b>Thoughts of being scared or hurt</b>	<b>Thoughts of incompetence or inadequacy</b>	<b>Thoughts of bodily injury</b>
<b>Thoughts or images of monsters or wild animals</b>	<b>Difficulty concentrating</b>	<b>Images of harm to loved ones</b>

## THE MANY SYMPTOMS OF ANXIETY

Behavioral		
Avoidance	Trembling lip	Avoidance of eye contact
Crying or screaming	Labored swallowing	Physical proximity
Nail-biting	Fidgeting	Clenched jaw
Trembling voice	Twitching	Stuttering

## SEVEN CATEGORIES OF ANXIETY DISORDERS

- Separation anxiety disorder
- Selective mutism
- Specific Phobia
- Social Anxiety Disorder (Social Phobia)
- Panic Disorder
- Agoraphobia
- Generalized Anxiety Disorder



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **1. Restlessness or feeling keyed up or on edge.**



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **2. Being easily fatigued.**



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **3. Difficulty concentrating or mind going blank.**



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **4. Irritability**



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **5. Muscle Tension**



## DIAGNOSTIC CRITERIA

- (A) Excessive anxiety and worry (apprehensive expectation) occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- (B) The individual finds it difficult to control the worry.
- (C) The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months).

### **6. Sleep disturbance (difficulty falling or staying asleep, or restless unsatisfying sleep).**



## PREVALENCE & COMORBIDITY

- **Prevalence and comorbidity**
  - **12-month prevalence is 0.9% among adolescents**
  - **Anxiety is pervasive across cultures**
    - **12-month prevalence is 0.4% - 3.6%**
  - **Lifetime risk is 9.0%**
  - **Females are twice as likely as males to have GAD**
  - **Accompanied by high rates of other anxiety disorders and depression**



## ONSET & COURSE

- **Onset, course, and outcome**
  - **Rarely occurs before adolescence**
    - **However, there are signs/symptoms in childhood**
  - **Chronic across the lifespan**
  - **Rate of full remission is very low**



## TREATMENT

- **Cognitive-Behavioral Therapy (CBT)**
  - **Cognitive Therapy**
    - Focuses on becoming more aware of pessimistic and negative thoughts, beliefs and biases, and causal attributions of self-blame. Once these self-defeating thought patterns are recognized, the child is taught to change from a negative, pessimistic view to a more positive, optimistic one.
  - **Behavior Therapy**
    - Aims to increase behaviors that elicit positive reinforcement and to reduce punishment from the environment. May involve teaching social and other coping skills and using anxiety management and relaxation training.



## TREATMENT

- **Child-focused treatments should emphasize the need to generalize to the family**
- **Addressing children's anxiety in a family context may result in greater efficacy**
- **Family treatment for anxiety:**
  - **Provides education about the disorder**
  - **Helps families cope with the feelings**

## TREATMENT

- Medications can reduce symptoms
  - The most commonly used medications have historically been *Selective Serotonin Reuptake Inhibitors (SSRIs)*
  - Medications are most effective when combined with CBT
    - *CBT is the first line of treatment*

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