

Anxiety disorders



FACT SHEET 21

An anxiety disorder involves more than just feeling stressed – it's a serious illness. People with anxiety disorders find it hard to function every day.

HOW COMMON ARE ANXIETY DISORDERS?

Anxiety disorders are the most common mental disorders in Australia. Nearly one in seven people will experience some type of anxiety disorder in any one year – around one in six women and one in 10 men. One in four people will experience an anxiety disorder at some stage of their lives.¹

WHAT CAUSES ANXIETY DISORDERS?

Combinations of factors are believed to trigger anxiety disorders. These include:

- a family history of mental health problems
- stressful life events
- ongoing physical illness
- personality factors.

TYPES OF ANXIETY DISORDERS, THEIR SIGNS AND SYMPTOMS

There are many types of anxiety disorders with a range of signs and symptoms.

Social Phobia

A person with Social Phobia has an intense fear of criticism, being embarrassed or humiliated, even in everyday situations. For example, public speaking, eating in public, being assertive at work or making small talk. A person may have Social Phobia if:

- he/she has a fear of one or more social or performance situations where they may be criticised ☐ YES ☐ NO
- the situation is avoided or endured with anxiety and distress ☐ YES ☐ NO
- the anxiety interferes with normal routine, working life, social functioning, or the person is distressed about the problem ☐ YES ☐ NO
- the fear is identified as unreasonable. ☐ YES ☐ NO

Generalised Anxiety Disorder (GAD)

GAD involves feeling anxious on most days over a long period of time. A person may have GAD if, for **SIX MONTHS or more**, on **more days than not**, they have:

- felt very worried ☐ YES ☐ NO
- found it hard to stop worrying ☐ YES ☐ NO
- found that their anxiety made it difficult for them to carry out everyday activities (e.g. work, study, seeing friends and family). ☐ YES ☐ NO

If the person answered 'YES' to **ALL** of these questions have they also experienced **THREE or more** of the following:

- felt restless or on edge ☐ YES ☐ NO
- felt tired easily ☐ YES ☐ NO
- had difficulty concentrating ☐ YES ☐ NO
- felt irritable ☐ YES ☐ NO
- had muscle pain (e.g. sore jaw or back) ☐ YES ☐ NO
- had trouble sleeping (e.g. difficulty falling or staying asleep or restless sleep). ☐ YES ☐ NO

Specific Phobia

Specific Phobias cause a person to feel very fearful about particular objects or situations. A person may have a Specific Phobia if they have:

- felt very nervous when faced with a specific object or situation e.g.:
 - flying on an aeroplane ☐ YES ☐ NO
 - going near an animal ☐ YES ☐ NO
 - receiving an injection ☐ YES ☐ NO
- avoided a situation that might cause the person to face the Specific Phobia e.g.:
 - needed to change work patterns ☐ YES ☐ NO
 - not getting health check-ups ☐ YES ☐ NO
- found it hard to go about daily life (e.g. working, studying or seeing friends and family) because the person is trying to avoid such situations. ☐ YES ☐ NO

Obsessive Compulsive Disorder (OCD)

OCD occurs when people have ongoing unwanted/intrusive thoughts and fears that cause anxiety – often called obsessions. These obsessions make people feel they need to carry out certain rituals in order to feel less anxious and these are known as compulsions. A person may have OCD if they have:

¹ Australian Bureau of Statistics (2008). *2007 National Survey of Mental Health and Wellbeing: Summary of Results* (4326.0). Canberra: ABS.

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- repetitive thoughts or concerns that are not about real life problems (e.g. thoughts that the person or people close to them will be harmed) ☐ YES ☐ NO
- performed the same activity repeatedly and in a very ordered, precise and similar way each time e.g.:
 - constantly washing hands or clothes, showering or brushing teeth ☐ YES ☐ NO
 - constantly cleaning, tidying or rearranging in a particular way things at home, at work or in the car ☐ YES ☐ NO
 - constantly checking that doors and windows are locked and/or appliances are turned off ☐ YES ☐ NO
- felt relieved in the short term by doing these things, but soon felt the need to repeat them ☐ YES ☐ NO
- recognised that these feelings, thoughts and behaviour patterns are unreasonable ☐ YES ☐ NO
- found that these thoughts or behaviour patterns take up **more than 1 hour a day** and/or interfered with the person's normal routine (e.g. working, studying or seeing friends and family). ☐ YES ☐ NO

Post-Traumatic Stress Disorder (PTSD)

PTSD involves experiencing bursts of anxiety that occur after a person has a major emotional shock following a stressful event i.e. a trauma.

The person could be experiencing PTSD if he/she has:

- experienced or seen something that involved death, injury, torture or abuse and felt very frightened or helpless ☐ YES ☐ NO
- had upsetting memories or dreams of the event for at least ONE month ☐ YES ☐ NO
- found it hard to go about daily life (e.g. difficulty working/studying or getting along with family and friends). ☐ YES ☐ NO

If the answer was 'YES' to **ALL** of these questions and the person has also experienced **at least THREE** of the following:

- avoided activities that are a reminder of the event ☐ YES ☐ NO
- had trouble remembering parts of the event ☐ YES ☐ NO
- felt less interested in doing things they used to enjoy ☐ YES ☐ NO
- had trouble feeling intensely positive emotions (e.g. love or excitement) ☐ YES ☐ NO
- thought less about the future (e.g. about career or family goals). ☐ YES ☐ NO

AND experienced **at least TWO** of the following:

- had difficulty sleeping (e.g. had bad dreams or found it hard to fall or stay asleep) ☐ YES ☐ NO
- become angry or irritated easily ☐ YES ☐ NO
- had trouble concentrating ☐ YES ☐ NO
- felt on guard ☐ YES ☐ NO
- been easily startled. ☐ YES ☐ NO

Panic Disorder

Panic Disorder involves having panic attacks frequently. Panic attacks are intense feelings of anxiety that seem like they cannot be brought under control. A person may have Panic Disorder if **within a 10 MINUTE PERIOD** he/she felt **FOUR OR MORE** of the following:

- sweaty ☐ YES ☐ NO
- shaky ☐ YES ☐ NO
- increased heart rate ☐ YES ☐ NO
- short of breath ☐ YES ☐ NO
- choked ☐ YES ☐ NO
- nauseous or pain in the stomach ☐ YES ☐ NO
- dizzy, lightheaded or faint ☐ YES ☐ NO
- numb or tingly ☐ YES ☐ NO
- detached from themselves or their surroundings ☐ YES ☐ NO
- hot or cold flushes ☐ YES ☐ NO
- afraid of going crazy ☐ YES ☐ NO
- afraid of dying ☐ YES ☐ NO

If the person answered 'YES' to **ALL** of these questions, has the person also:

- felt scared, for **ONE MONTH OR MORE**, of experiencing these feelings again ☐ YES ☐ NO
- displayed changes in behaviour that relate to Panic Attacks e.g. avoiding exercise ☐ YES ☐ NO
- become worried about consequences of having Panic Attacks, or their health (e.g. frequent medical checks). ☐ YES ☐ NO

It is important to note that many people with anxiety disorders experience symptoms of more than one type of anxiety disorder.

It is also important to note that these checklists provide only a rough guide as to whether someone has an anxiety disorder. For a full diagnosis, it is important to see a doctor.

HOW ARE ANXIETY DISORDERS TREATED?

There are several types of treatment available.

Psychological treatment

Psychological treatment may not only help a person to recover, but can also help to prevent a recurrence of anxiety. Generally, it has been found to be the most effective way of treating anxiety disorders. Psychological treatment can help a person to change their thought patterns and the way they react to certain situations. This can help their recovery and prevent the illness returning. Psychological therapy is usually administered by a psychologist, a psychiatrist or other mental health worker.

Medication

While psychological treatment is generally the first choice for treating anxiety disorders, medical treatment can also be very helpful. Some types of **antidepressants** can be helpful for the management of anxiety disorders. For more details on which medications are effective for symptoms of anxiety disorders visit www.beyondblue.org.au or call the *beyondblue* Support Service **1300 22 4636** (local call).

Benzodiazepines: These anti-anxiety and sedative drugs are commonly used to relieve anxiety and slow down racing thoughts. They are, however, addictive and so are only useful for a short period of time (two or three weeks) or if used intermittently. See www.reconnexion.org.au for more information about Benzodiazepines or talk to your doctor.

HOW TO HELP YOURSELF IF YOU HAVE AN ANXIETY DISORDER

- Postpone major life changes.
- Resolve personal conflicts as they arise.
- Take part in enjoyable activities.
- Seek help from a doctor or other health professional.
- Practise breathing and muscle relaxation techniques.
- Find out more about anxiety disorders.
- Establish good sleeping patterns.
- Exercise regularly.
- Reduce alcohol and other drugs, as well as avoid stimulants such as sugar and caffeine.

HOW TO HELP SOMEONE WITH AN ANXIETY DISORDER

- Let the person know if you've noticed a change in their behaviour.
- Spend time talking about the person's experiences and let them know that you're there to listen without being judgmental.
- Suggest the person sees a doctor or health professional and/or assist the person to make an appointment with a doctor or health professional.
- Go with the person to the doctor or health professional.
- Help the person to find information about anxiety.
- Encourage the person to try to get enough sleep, exercise, eat well and use self-help strategies.
- Invite the person out and keep in touch. Also encourage friends and family members to do the same, but don't pressure the person to participate.
- Encourage the person to face their fears with support from their doctor/psychologist.
- Contact a doctor or hospital, if the person becomes a threat to themselves or others.

WHERE TO GET HELP

A **General Practitioner (GP)** is a good person with whom to discuss your concerns in the first instance. Your GP will be able to conduct or arrange any necessary medical tests, provide treatment or refer you to a mental health professional. It is recommended that you go to your regular GP or another GP in the same clinic as they will have access to your medical file. If you don't have a regular GP or clinic, a list of GPs with expertise in treating common mental health problems is available at www.beyondblue.org.au or call the *beyondblue* Support Service on **1300 22 4636** (local call cost from a landline).

Psychologists can assist people who are having difficulty controlling their emotions, thinking and behaviour. Clinical psychologists are specialists in the assessment, diagnosis and treatment of mental illness such as depression, anxiety and related disorders.

Psychiatrists are doctors who have undergone specialist training to treat all mental disorders. They can make medical and psychological assessments, conduct medical tests and prescribe medication. Depending on their expertise and type of practice, they can also provide psychological treatments such as Cognitive Behaviour Therapy (CBT) and Interpersonal Therapy (IPT). Some have particular areas of speciality. If you would like a consultation with a psychiatrist, you will need a referral from your GP.

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Mental health nurses are specially trained to care for people with mental health problems such as depression, anxiety and related disorders. They work with psychiatrists and General Practitioners to review a person's mental health, monitor medication and provide information about mental health problems and treatment. Some have training in psychological therapies. If you would like a referral to a mental health nurse who works in a general practice, ask your GP.

Social workers in mental health are specially trained to work with people who are experiencing difficulties in life. Social workers can support people with depression, anxiety and related disorders by helping them find ways to manage more effectively some of the situations that trigger these disorders such as family issues, financial problems, work stress and living arrangements. Mental health social workers can also provide focused psychological self-help strategies.

Occupational therapists in mental health help people who have difficulties functioning because of a mental health problems (such as anxiety or depression) to participate in normal, everyday activities. Mental health occupational therapists can also provide focused psychological self-help strategies.

MORE INFORMATION

beyondblue: the national depression initiative

www.beyondblue.org.au

beyondblue Support Service 1300 22 4636

Information on depression, anxiety and related disorders, available treatments and where to get help

www.youthbeyondblue.com

beyondblue's website for young people – information on depression, anxiety and how to help a friend

Lifeline

13 11 14

Counselling, information and referral (local call)

Anxiety Recovery Centre Victoria

www.arcvic.com.au

Information about anxiety disorders, their management and links to other services

beyondblue: the national depression initiative

Support Service 1300 22 4636

www.beyondblue.org.au

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ADAVIC (The Anxiety Disorders Association of Victoria)

www.adavic.org.au

Information about Panic Disorder, Social Phobia, Agoraphobia, Generalised Anxiety and Depression, and support services

CRUFAD

www.crufad.org

Information and internet-based education and treatment programs for people with depression or anxiety

RECONNEXION

www.reconnexion.org.au

Psychology services for people experiencing anxiety or depression and tranquilliser dependency

E-couch

www.ecouch.anu.edu.au

Evidence-based information and strategies for dealing with anxiety disorders

FearDrop

www.feardrop.com

Online exposure therapy for people with Specific Phobias

Moodgym

www.moodgym.anu.edu.au

Online psychological therapy

Virtual Clinic

www.virtualclinic.org.au

Internet-based education and treatment programs for people with anxiety and depression

Anxiety Online

www.anxietyonline.org.au

Information and virtual treatment clinic for people with anxiety disorders

Other beyondblue anxiety fact sheets available:

beyondblue Fact sheet 31 – Post-Traumatic Stress Disorder

beyondblue Fact sheet 35 – Generalised Anxiety Disorder

beyondblue Fact sheet 36 – Panic Disorder

beyondblue Fact sheet 37 – Obsessive Compulsive Disorder

beyondblue Fact sheet 38 – Specific Phobias

beyondblue Fact sheet 39 – Social Phobia

beyondblue Booklet – A Guide to What Works for Anxiety Disorders