Anxiety

Most people are familiar with feelings of anxiety. Anxiety is a normal part of life. Anxiety is our body’s way of responding to a physical, emotional or intellectual challenge. What student has not felt a bit anxious before a final exam or oral presentation? In fact, moderate anxiety during these situations can be mobilizing, resulting in better performance. However, if your anxiety is at the point where you are too anxious to go to the exam, or if your mind consistently goes blank you cannot recover, you are probably not experiencing ordinary, everyday anxiety.

Anxiety is a medical problem when it is persistent, overwhelming, and interferes with your day-to-day functioning. Symptoms of anxiety commonly include unrealistic fears and worries, physical complaints, such as upset stomach or rapid heart rate, and the avoidance of anxiety producing situations. Over 19 million American adults struggle with anxiety. While the exact cause of anxiety disorders is uncertain, the problems probably result from a combination of factors including genetics, brain chemistry, personality, and life events.

Anxiety can be successfully treated. The goal is not to eliminate anxiety, but to reduce it to a manageable level. With the right treatment, many people begin to feel better immediately or in just a few weeks.

What are the different types of anxiety?

Generalized Anxiety Disorder (GAD)

Generalized anxiety disorder (GAD) is much more than the normal anxiety people experience day to day. It’s chronic and fills a person’s day with exaggerated worry and tension, even though there is little or nothing to provoke it. Having this disorder can mean always anticipating disaster, often worrying excessively about health, money, family, school or work. Sometimes, though, the source of the worry is hard to pinpoint.

Worries are usually accompanied by physical symptoms, such as fatigue, headaches, muscle tension and aches, difficulty swallowing, trembling, twitching, irritability, sweating, and hot flashes. People with GAD may feel lightheaded, out of breath, nauseated, and easily startled. Concentration and sleep problems are also common.

Example: “I can’t stop worrying. I have trouble sleeping or concentrating and I feel keyed up and unable to relax. At times it comes and goes, and at times it seems constant. I worry about everything from making enough money to send home to my family to what to give my best friend for her birthday. Now that I’m about to have a family, there’s even more things to worry about.”
Social phobia

Social phobia is characterized by an intense fear of situations, usually social or performance situations, where the risk of embarrassment is present. It can disrupt normal life, interfering with school, work or social relationships. It’s not uncommon for people with social phobia to worry for days or weeks in advance of a social or performance situation. Physical symptoms often accompany the anxious feelings and include blushing, profuse sweating, trembling, nausea, shortness of breath, racing heart and difficulty talking.

Example: “In any social situation, I felt fear. I would be anxious before I even left the house, and it would escalate as I got closer to class, a party, or whatever. My heart would pound, my palms would get sweaty, and I would get this feeling of being removed from myself and from everybody else.”

Specific phobias

A specific phobia is an intense fear of something that poses little or no actual danger. Some of the more common specific phobias are centered around closed-in places, heights, escalators, tunnels, highway driving, water, flying, dogs, and injuries involving blood. Facing, or even thinking about facing, the feared object or situation can bring on a panic attack or considerable anxiety, even when the person recognizes how irrational the fear is.

Example: “I’m scared to death of flying, and I never do it anymore. It was an awful feeling when that airplane door closed and I felt trapped. My heart would pound and I would sweat bullets. These days I only go places where I can drive or take a train. My friends always point out that I couldn’t get off a train traveling at high speeds either, so why don’t trains bother me? I just tell them it isn’t a rational fear.”

Panic disorder

People with panic disorder experience sudden episodes of intense fear that occur without any warning or apparent reason. They can’t predict when an attack will occur, and many develop intense anxiety between episodes, worrying when and where the next one will occur.

A panic attack is marked by a group of symptoms that can include dizziness, racing heart, perspiring, shortness of breath, tingling hands, fear of dying or “going crazy.” Attacks usually last no more than about 10 minutes.

Example: “It started 2 years ago, when I was sitting in a seminar and this thing came out of the blue. I felt like I was dying. In between attacks there is this dread and anxiety that it’s going to happen again. I’m afraid to go back to places where I’ve had an attack.”
Post-Traumatic Stress Disorder

Post-traumatic stress disorder (PTSD) can develop following a terrifying event that a person experienced or witnessed. Whatever the source of the problem, some people with PTSD repeatedly relive the trauma in the form of nightmares and disturbing memories during the day. Other symptoms may include sleep problems, feelings of detachment or numbness, hypervigilance, irritability and aggressiveness. Some people avoid certain places or situations that are reminders of the trauma, and anniversaries of the event are often especially difficult.

Ordinary events can trigger flashbacks or intrusive images. A person having a flashback, which can come in the form of images, sounds, smells, or feelings, may lose touch with reality and believe that the traumatic event is happening all over again.

Example: “I was assaulted when I was 22 years old. For a long time, I spoke about the attack as though it was something that happened to someone else. Then I started having flashbacks. They kind of came over me like a splash of water. I would be terrified. Suddenly I was reliving it. Every instant was startling. I wasn’t aware of anything around me, I was in a bubble, just kind of floating. Having a flashback can wring you out.”

Obsessive-Compulsive Disorder (OCD)

Obsessive-compulsive disorder, or OCD, involves having distressing thoughts or rituals that are time consuming and excessive.

Distressing thoughts or images, such as worries about germs or dirt are called obsessions, and the rituals that are performed to try to prevent or get rid of these anxious thoughts, such as the washing of hands over and over are called compulsions. The more common compulsions involve washing and cleaning, counting, repeating or checking actions. A lot of healthy people can identify with some of the symptoms of OCD, such as checking to see if the stove is turned off before leaving the house. But for people with OCD, such activities consume at least an hour a day, are very upsetting, and interfere with daily life.

Example: “I couldn’t do anything without rituals. Counting really bogged me down. I would wash my hair three times as opposed to once because three was a good luck number and one wasn’t. It took me longer to read because I’d count the lines in a paragraph. I knew the rituals didn’t make sense, but I couldn’t seem to overcome them until I had therapy.”
Treatment of anxiety disorders

Getting help: treatment works
Some individuals are able to manage their anxiety on their own through self-help techniques. Others benefit greatly from professional attention. If you think you have an anxiety problem, please don't hesitate to discuss this with a health care professional who can evaluate your concerns. You can contact ASAP for more information or to schedule an appointment at 916-734-2727.

A number of effective treatments for anxiety are available and can provide relief from symptoms immediately or in just weeks. The most common treatments are psychotherapy, medication, or a combination of the two. A specific type of psychotherapy, cognitive behavioral therapy, is particularly effective in managing symptoms of anxiety.

Individuals respond differently to treatment, and you may need to try more than one type before you find the right one. However, before considering other options, give the treatment plan a fair chance. It’s important not to get discouraged and stop attending psychotherapy sessions and/or taking the medications before they have had a chance to be effective.

Cognitive Behavioral Therapy
Research has shown that a form of psychotherapy that is effective for several anxiety disorders is cognitive-behavioral therapy (CBT). A major aim of CBT is to reduce anxiety by eliminating beliefs or behaviors that help to maintain the anxiety disorder.

The cognitive component helps people change thinking patterns that keep them from overcoming their fears. Specifically, this therapy identifies unrealistic beliefs and helps individuals develop more objective ways of thinking that make stress and anxiety more manageable. For example, a person with panic disorder can learn that the panic attacks are not really heart attacks as previously feared. The behavioral component seeks to change people’s reactions to anxiety-provoking situations. A key element of this component is exposure, in which people confront the things they fear. A person with social phobia, for example, may be encouraged to spend gradually increasing time in feared social situations without giving in to the temptation to flee. In some cases the individual will be asked to deliberately make what appear to be slight social blunders and observe other people’s reactions. Generally through the use of exposure techniques, real-life outcomes are not nearly as harsh as feared, and the person’s social anxiety diminishes.

Antidepressants for anxiety
A number of medications that were originally approved for treating depression have been found to be effective for anxiety disorders as well. If your health care professional prescribes an anti-depressant, you will need to take if for at least a few weeks before symptoms begin to fade.
Working together
When you undergo treatment for an anxiety disorder, you and your health care professionals will be working as a team. Together, we will find the approach that is best for you. If one treatment doesn’t work, the odds are good that another one will.

Help yourself: manage your stress
You can increase your ability to cope with stresses that contribute to anxiety. If you are prone to anxiety, it’s important to keep your baseline stress level as low as possible. Here are some self-care tips:

| Make wise lifestyle choices: There’s no substitute for eating well, exercising regularly, and getting enough sleep. They help boost your energy level and increase your overall sense of well-being. Keep in mind that caffeine, tobacco, alcohol, marijuana, cocaine, and other “recreational” drugs can contribute to sensations of anxiety. |
| Be good to yourself: Schedule in fun with friends, family, classmates. The benefits of spending time with other people-and helping others—are immeasurable. Also, set aside regular time to enjoy some quiet relaxation. Relaxation techniques such as deep breathing exercises (taking slow, deep abdominal breaths) or progressive relaxation (tensing and relaxing muscles) can relieve the physical symptoms of stress, and can help when anxiety “hits.” |
| Engage in constructive thinking: When you notice you are thinking in a negative way, pause a moment and tell these thoughts to STOP! Then, refocus your thoughts on something positive and constructive. For example, if you find yourself thinking, “I got a lousy “B,” everyone is smarter than I am,” say to yourself, “STOP!” followed by “I’m doing my best; I’m learning and I’ll do fine in this class.” |
| Seek meaning from different sources: Having a positive outlook, accepting what you can’t control, and trusting that things will work out go a long way in helping to keep stress levels low. In addition, many people find meaning, comfort and support in spiritual beliefs and in being a part of a spiritual community. Spiritual practices such as prayer (using words, chanting, meditation, silence, etc.) can add to some people’s sense of inner strength and satisfaction. |

Site: [http://www.uhs.berkeley.edu/home/healthtopics/Anxiety.shtml](http://www.uhs.berkeley.edu/home/healthtopics/Anxiety.shtml)

ASAP offers confidential, cost-free assessment, counseling, consultation and referral services to all UCDHS faculty, staff, and their family members. Whether the problem is work-related, personal, career or relationship focused, ASAP can assist you in evaluating and resolving the problem.

You can call ASAP at 916-734-2727 for an appointment.