

Managing Anxiety

Chapter 18

Learning Objectives

Lesson 18.1: Managing Anxiety

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1. Describe the continuum of responses to anxiety.
2. Identify three types of coping mechanisms used to decrease anxiety.
3. Explain how anxiety is experienced through each stage of the life cycle.
4. Compare the difference between normal anxiety and an anxiety disorder.

Learning Objectives

Lesson 18.1: Managing Anxiety

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- 5. Discuss the difference between phobic and obsessive-compulsive behaviors.
- 6. Examine three features of posttraumatic stress disorder.
- 7. List two therapeutic interventions for the client with rape-trauma syndrome.
- 8. Explain the importance of monitoring medication use for clients with high levels of anxiety.
- 9. Examine three methods for recognizing and preventing anxiety.

Anxiety

- A feeling of uneasiness, uncertainty, and helplessness
- A normal emotional response to a real or imagined threat or stressor
- Serves several purposes
 - A warning of impending danger
 - Mild anxiety can increase learning by enhancing concentration and focus
 - Uncontrolled anxiety often leads to ineffective and maladaptive behavior
 - A normal part of survival and growth

Continuum of Anxiety Responses

(Slide 1 of 5)

- Reactions to anxiety occur along a continuum of behavioral responses
 - Positively focused anxiety helps us to adapt, learn, and grow from our experiences
 - Maladaptive responses to anxiety are ineffective attempts to cope
 - Responses to anxiety occur on four levels, ranging from mild to panic

Continuum of Anxiety Responses

(Slide 2 of 5)

- Anxiety occurs as the result of a perceived threat to oneself
- Types of anxiety
 - Signal anxiety
 - Learned response to an anticipated event
 - Anxiety state
 - Individual's coping abilities become overwhelmed and emotional control is lost
 - Anxiety trait
 - Learned component of the personality

Continuum of Anxiety Responses

(Slide 3 of 5)

- Physical symptoms of anxiety

- Muscle tension
- Fidgeting
- Headache
- Problems with sleep
- Fight-or-flight reaction

- Coping methods

- Coping mechanisms in the physical realm include efforts to directly face and handle the problem
- Intellectual coping mechanisms are aimed at making the threat less meaningful by changing one's perception

Continuum of Anxiety Responses

(Slide 4 of 5)

- Defense mechanisms

- Psychological strategies that help to lessen feelings of anxiety
- Goal is to reduce uncomfortable negative emotions

- Crisis

- One's ability to cope with anxiety is overwhelmed
- New coping behaviors must be developed to successfully resolve the source problem

Continuum of Anxiety Responses

(Slide 5 of 5)

- Self-awareness and anxiety

- Anxiety is contagious
- It is important for caregivers to recognize and cope effectively with their own anxieties
- We may not choose our anxieties, but we do choose how we deal with them

Theories Related to Anxiety

- Biological models
- Psychodynamic models
- Interpersonal models
- Behavioral models
- Other models
 - Existential theory
 - Environmental models
 - Holistic theory

Anxiety Throughout the Life Cycle

(Slide 1 of 4)

- Anxiety in childhood
 - Related to a child's developmental level
- Problems associated with anxiety in childhood
 - compulsions
 - Phobia
 - Separation anxiety disorder
 - Overanxious disorder
 - Avoidant behaviors

Anxiety Throughout the Life Cycle

(Slide 2 of 4)

- Anxiety in adolescence

- Adolescents who ineffectively cope with anxiety often express themselves inappropriately
- Many initial symptoms of schizophrenia and other psychoses begin in adolescence
- Health care providers who work with adolescents must assess adolescents' anxiety levels and offer early intervention and education

Anxiety Throughout the Life Cycle

(Slide 3 of 4)

- Anxiety in adulthood

- Similar to their younger counterparts, adults handle anxiety by using earlier established coping mechanisms
- Developmental tasks, such as establishing a career and family, present numerous stressors
- When adult anxieties are not successfully managed, a number of mental health problems may result

Anxiety Throughout the Life Cycle

(Slide 4 of 4)

- Anxiety in older adulthood
 - Elders often deny their anxiety
 - Socially, many were taught that it is inappropriate to share their fears and anxieties
 - One of the most effective methods for assessing anxiety in older adults is to simply ask the client to explain his or her anxious feelings
 - Older adults usually appreciate the interest of concerned caregivers

Anxiety Disorders

(Slide 1 of 4)

- Diagnosis of an anxiety disorder is based on a description of the behaviors that express distress
- Separation anxiety disorder
- Generalized anxiety disorder
 - Individual's anxiety is broad, long-lasting, and excessive: Worried and anxious more often than not
- Panic disorders
 - More common than once thought
 - Two types of panic disorders
 - Associated with agoraphobia
 - Not associated with agoraphobia

Anxiety Disorders

(Slide 2 of 4)

- Phobic disorders

- A phobia is an internal fear reaction
- Phobias differ from common fears
- Phobias are obsessive in nature
- People with phobias handle their anxieties ineffectively
- Characteristics of phobias vary with the culture

- Obsessive-compulsive disorder

- Specific behaviors must be performed to reduce anxiety
- Most common obsessions are related to cleanliness, dirt, and germs; aggressive and sexual impulses; health concerns; safety concerns; and order and symmetry

Anxiety Disorders

(Slide 3 of 4)

- Body dysmorphic disorder
- Hoarding disorder
- Hair-pulling (trichotillomania)
- Excoriation disorder (skin picking)
- Behavioral addictions
 - Addictive behaviors such as gambling, working, shopping, or excessive sexual activity

Anxiety Disorders

(Slide 4 of 4)

- Stressor and trauma disorders

- Traumatic stress reaction

- Series of behavioral and emotional responses that follow an overwhelmingly stressful event

- Posttraumatic stress disorder

- Reliving of traumatic events or situations
- Anxiety, depression, and nightmares can complicate the picture

- Acute stress disorder

- Adjustment disorder

Posttraumatic Stress Disorder (PTSD)

- Pathologic anxiety
- Usually occurs after an individual experiences or witnesses severe trauma that is terrifying or life-threatening
- Symptoms: Intense fear, horror, or helplessness
- Individuals can become emotionally numb, extremely alert and guarded, and easily startled

Rape-Trauma Syndrome

- Reactions to trauma, especially rape-trauma syndrome, follow a predictable clinical course
 - Fear and anguish
 - Recovery and repair
 - Adaptation
- Providing psychological stability, emotional support, and advocacy are the most important therapeutic interventions

Therapeutic Interventions

(Slide 1 of 2)

- Prevention: Most effective way to cope with anxiety
- Mental health therapies and medications frequently are used as treatment
- History and physical examination are performed
- Cognitive behavioral therapy (CBT) helps clients intellectually understand ineffective behaviors used to cope with anxiety, and replace them with more successful behaviors
- Systematic desensitization: Clients learn to cope with one anxiety-provoking stimulus at a time
- Meditation
- Therapy animals

Therapeutic Interventions

(Slide 2 of 2)

- Anxiety may be treated with various medications
 - Benzodiazepines
 - Antidepressants
 - Antihistamines
 - Propranolol
 - Anxiolytics
- Each type of drug is associated with possibly severe side effects

Recognizing and Preventing Anxiety

- Complete nursing history and thorough physical examination
- Information is brought to health care team, client goals are established, and therapeutic interventions are chosen
- Protect the client from injury to self and others
- Establish a trusting therapeutic relationship
- Problem-solving techniques
- Relaxation techniques

Questions?