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# Anxiety – Treatment and Management

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# Objectives

- Define anxiety and anxiety disorder
- Understand the management and treatment of anxiety
- Discuss indications for starting medication

# What is Anxiety?

- Fears and worries - adaptive
- Normal if within the context of child's developmental stage
- Vs. extreme anxiety → significant distress or impairment in functioning (School, home, social settings)
- Out of proportion to a stressor or occurs when there is no threat
- Can cause physiologic mechanisms during stress response in the body; with chronic anxiety and stress → physical and mental health problems occur

# NF type 1 and Anxiety

- NF 1 often associated with psychiatric disorders
- High prevalence of anxiety, depressive mood, etc.
- Impaired quality of life assoc. with NF 1 play an important role in development of psychiatric disorders

# Anxiety in children

- Specific – situation or environment (phobias, place-specific)
- Or generalized – everyday things
- Appropriate and adaptive Vs. Disorder:
  - 1) long duration (months); 2) interferes significantly with functioning and 3) out of sync with the magnitude of the stressor and developmental stage of the child
- Examples: transition to new school/ school year – expected
- Stress – usually a short duration (2 weeks or less) and likely to resolve spontaneously, or significantly improved by social support or environment modification

# Anxiety Disorder

- Tends to run in families
- Genetic predisposition + environment factors +/- other --
- Temperament (anxious and avoidant in new or unfamiliar situations)
- Modeling of parents
- Exposure to psychosocial and environmental stressors (school issues, social difficulties, family disruptions, trauma, etc.)

# Screening and diagnosis

- Screen for symptoms
- Rate the severity and functional impairment
- Assess co-morbid psychiatric conditions and gen. medical conditions (that may mimic anxiety symptoms).
  
- Must be differentiated from developmentally appropriate worries, fears, responses to stress

# Co morbidities

- Important to also consider comorbid conditions:

ADHD

Temper tantrums

Disruptive behaviors

Learning disorder

Mood disorder (depression, bipolar)



# Treatment of Anxiety

1) psychotherapy (Cognitive behavioral therapy)

2) pharmacologic / medication

- For Mild to Moderate anxiety disorder – CBT

- For Moderate to Severe – Combination of medication and CBT

# Psychological Treatments

Key components of CBT:

- Psychoeducation of child and caregivers
- Techniques for managing stress – relaxation training, breathing
- Cognitive restructuring by identifying and challenging anxiety provoking thoughts
- Practicing problem solving for coping with anticipated challenges
- Systemic exposure to feared situations or stimuli (imaginal, simulated, other methods) – desensitization
- Relapse prevention plans

# Non-specific treatments

- Improve mood
- Support well being
  - sleep hygiene
  - healthy eating
  - regular exercise
  - predictable routine
  - social supports

# Pharmacologic Treatment

When should medications be considered?

When symptoms are significantly impacting:

- Health, safety
- Academics/ learning
- Therapies
- Participation in the family/ community
- Social development and interactions

# Pharmacology Treatment

Considerations:

- Benefits vs. risk
- Potential benefits – less anxious, improved mood, able to transition more easily, less self picking, nail biting, more comfortable in social situations, increased speech, less fixations/ compulsive behaviors, etc.

What is the goal of medication treatment? – Identify target behaviors and determine how to measure them – frequency, duration, intensity of symptoms.

Observation / Behavior logs  
Standardized – rating scales

# Starting Medication

- Start low, go up slow
- Start → 3-4 weeks, reassess → tweak medication if needed
- One change at a time
- Potential side effects

# Pharmacologic Treatment

- Selective serotonin reuptake inhibitor (SSRI) / SNRI
  - Treatment of pediatric anxiety
  - Examples: Fluoxetine, sertraline, Citalopram , Venlafaxine

# Potential side effects

Appetite changes / GI symptoms (nausea, abdominal pain)

Activation/ hyperactivity/ disinhibition – wild/"odd" behaviors (10%)

Insomnia – usually wears off

Decreased sexual drive – rarely an issue

Blackbox warning – suicidal ideation



# Thank You!

Questions?



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