

Anxiety, Obsessive-Compulsive and Related Disorders

Prof. Faris Alsaraireh

Done by : Raghad Mrayat



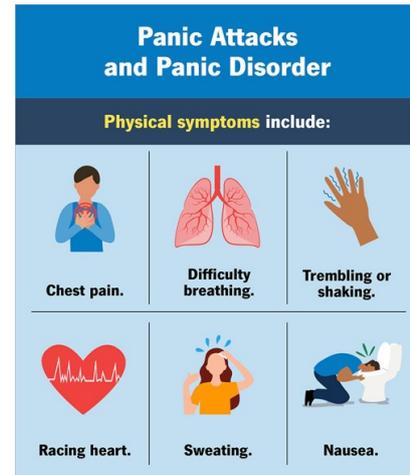
◆ Anxiety Disorders

- **Anxiety**: emotional response to anticipation of danger (different from fear which is cognitive).
- **Stress** = external pressure. **Anxiety** = subjective response to stressor.
- More common in women, risk ↑ with family history, childhood trauma, negative life events.

☞ Too much anxiety: when out of proportion or interferes with functioning. ⚠

◆ Panic

- Panic = sudden, overwhelming terror/doom.
- Panic attack symptoms: sweating, trembling, chest pain, SOB, nausea, dizziness, chills/hot flashes, numbness/tingling, derealization, fear of losing control or dying.
- Panic disorder: recurrent unpredictable attacks + intense fear + physical discomfort.



◆ Generalized Anxiety Disorder (GAD)

- Chronic, excessive, unrealistic anxiety and worry.



◆ Phobias

- **Phobia** = persistent, irrational fear → avoidance.
- **Agoraphobia**: fear of situations where escape/help difficult (transportation, crowds, open spaces, being alone outside).
- **Social Anxiety Disorder**: fear of embarrassment/negative evaluation.
- **Specific Phobia**: fear of objects/situations, disproportionate response → panic-like symptoms.

◆ Other Anxiety Disorders

- **Medical causes**: cardiac, endocrine, respiratory, neurological.
- **Substance-induced**: alcohol, sedatives, stimulants (cocaine/amphetamines), hallucinogens, caffeine, cannabis.

◆ Obsessive-Compulsive Disorder (OCD)

- Obsessions = intrusive, recurrent thoughts/images/impulses.
- Compulsions = ritualistic behaviors to reduce distress/prevent event.
- Causes distress, time-consuming, impairment in social/occupational life



◆ Related Disorders

- **Body Dysmorphic Disorder:** excessive, unrealistic belief of body defect → depression, OCD traits.
- **Hair-Pulling Disorder (Trichotillomania):** recurrent hair pulling, tension before, relief after. More common in women.



- **Hoarding Disorder:** persistent difficulty discarding possessions, may excessively acquire. More common in men.



◆ Nursing Concerns

- Panic anxiety, powerlessness (panic/GAD).
- Fear, social isolation (phobias).
- Ineffective coping, role performance (OCD).
- Disturbed body image (body dysmorphic disorder).
- Ineffective impulse control (trichotillomania).

◆ Outcome Criteria

- **Panic anxiety** (panic disorder and GAD)
- **Powerlessness** (panic disorder and GAD)
- **Fear** (phobias)
- **Social isolation** (agoraphobia)
- **Ineffective coping** (OCD)
- **Ineffective role performance** (OCD)
- **Disturbed body image** (body dysmorphic disorder)
- **Ineffective impulse control** (hair-pulling disorder)

◆ Treatment Modalities

- **Psychotherapy:** individual, CBT, behavior therapy (systematic desensitization).
- **Other:** deep breathing, imagery, mindfulness, exercise.
- **Drugs (anxiolytics):**
 - **Hydroxyzine** (Vistaril)
 - **Benzodiazepines:** Alprazolam (Xanax), Diazepam (Valium), Lorazepam (Ativan), Clonazepam (Klonopin), Chlordiazepoxide (Librium), Clorazepate (Tranxene), Oxazepam
 - Meprobamate
 - Buspirone (BuSpar)

