

# Anxiety disorders

## Understanding Treatment Options



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building the  
mental wellbeing  
of the next  
generation

## What is an anxiety disorder?

Fear and anxiety are related emotions. You feel fear as a response to an immediate threat, and you feel anxiety in response to a future threat. Everyone feels fear or anxiety from time to time.

When we feel fear and anxiety we have thoughts and worries about what might happen, and we also experience physical reactions. This is part of what is called the 'fight or flight response' to danger. Fear can be a helpful emotion when it alerts us to danger and feeling anxious can make us prepare for risky situations. The physical reactions we feel can prepare our bodies to cope with danger.

If you have an anxiety disorder, the amount of fear and anxiety becomes out of proportion to the situation and can start to be there most of the time. These feelings can then start to get in the way of your everyday life.

Anxiety disorders are common in people of all ages, including children and young people. There are different types of anxiety disorders, including:

- phobias
- generalised anxiety disorder
- separation anxiety disorder
- social anxiety disorder
- panic disorder
- agoraphobia

As well as feeling anxious you might often have other symptoms such as:

- feeling tired and irritable
- problems with sleeping
- finding it hard to concentrate

Anxiety may also show itself as physical symptoms such as:

- headaches
- muscle tension
- abdominal pain
- behaviour such as crying, having a tantrum, or 'freezing' with fear

## Phobias

It is common to have fears as you grow up, for example being scared of animals or of the dark. These types of fears are thought of as 'ordinary fears' that are a normal part of growing up. Usually, children and young people grow out of these fears without any help.

A phobia is different, it is an extreme fear which causes you a lot of distress and has a significant impact on your life. For example, a fear of dogs would be called a phobia if it meant that you avoid going to the park.

Phobias (unlike ordinary fears) tend not to go away on their own, but there are treatment options if you need them.

## Generalised anxiety disorder

You might feel anxious a lot of the time and become easily worried. For some people, this is a part of their personality and they have learned to cope well with these feelings. However, generalised anxiety disorder can cause you to worry more than usual and experience severe anxiety which gets in the way of your everyday life.

Symptoms and effects of generalised anxiety disorder can include:

- problems concentrating, which can make it harder to manage school or other day-to-day activities
- not wanting to go to school or be with other people
- finding it hard to relax
- difficulty sleeping
- physical symptoms, such as headaches or abdominal pain

## Separation anxiety disorder

Anxiety about being away from your parent or carer is a normal part of childhood. It usually lasts until your pre-school years and can sometimes make going to bed, your parents or carers leaving for work or settling in at nursery or school difficult. However, usually children and their parents or carers are able to manage these difficulties and the level of anxiety fades over time.

Separation anxiety disorder involves anxiety that is more extreme than normal separation anxiety, or when you still experience separation anxiety at an older age than usual. You might often worry or have nightmares that your parents, carers or yourself might get hurt when you aren't together. You could have separation anxiety disorder if this anxiety interferes with your everyday life.

Separation anxiety disorder is more common in young children (5 to 7 years) but can happen at any point in childhood, including in your teenage years.

## Social anxiety disorder

Social anxiety can look like an extreme type of shyness. You might not be anxious around people you know well, only with people you don't know as well or in larger groups of people.

This might mean that you avoid situations where you could come across people you don't know well. You might often also feel anxious around groups of people and try to avoid these situations too. Many young people describe having a fear of embarrassment or humiliation in these situations.

This might cause you problems with making new friends, being in groups, or at school (such as speaking in class).

Social anxiety disorder often develops in your later pre-teen or teenage years, particularly after you have gone through puberty.

## Panic disorder

A panic attack is a sudden sense that something terrible is about to happen even though there is no obvious threat, or where your sense of fear is out of proportion to the threat.

There are physical symptoms, such as:

- feeling your heart beating very fast
- feeling short of breath or finding it hard to breathe
- feeling like you're choking
- sweating
- dizziness
- feeling sick

These physical symptoms can make you feel faint or like you could be having a heart attack.

Panic disorder involves repeated episodes of panic. This can mean that you try to avoid situations where you have experienced a panic attack before, in case you experience panic attacks there again. Panic disorder is rare when you're a child and tends to develop in your later pre-teen or teenage years, or in young adulthood.

## Agoraphobia

Agoraphobia involves feeling anxious about being in places or situations where it might be difficult or embarrassing to escape. These types of fears can involve

situations such as being outside your home alone, being in a crowd or using public transport.

If you have agoraphobia you will often feel anxious about a group of similar situations, rather than just one specific situation. For example, if you're anxious about being in a crowd then you might feel anxious about situations such as school assemblies or going to the cinema.

People with agoraphobia can also often have panic attacks.

## Anxiety symptoms and other mental health conditions

Anxiety symptoms can also happen as part of another mental health problem, such as psychosis or bipolar disorder. However, if you have another mental health condition but your anxiety symptoms are separate, then you might be diagnosed with an anxiety disorder as well as your other mental health condition.

Anxiety disorders often happen alongside other conditions. For example, if you have autism or ADHD then you could be more likely to develop an anxiety disorder. Also, if you have an anxiety disorder then you are more likely to experience depression, it is common to experience a mixture of anxiety and depression symptoms.

Some people with anxiety disorders try to cope by using drugs or alcohol, but this can become unhealthy and lead to alcohol misuse or substance misuse.

## How can I get help?

If you have problems with anxiety there are different ways of getting help:

- If you are at school then you could speak to a staff member there. Depending on where you live, there might be mental health professionals linked to your school.
- You could also talk to your GP about your anxiety symptoms.
- In some areas you can contact your local Child and Adolescent Mental Health Service (CAMHS) directly.

## Planning treatment

The first steps when you meet your mental health professional will be to figure out whether you have an anxiety disorder and whether you might have any other mental health conditions. Your assessment will involve talking to your professional about what makes you feel anxious, your symptoms and how your anxiety disorder is affecting you and your family.

If you have an anxiety disorder then you should be offered Cognitive Behavioural Therapy (CBT), which should be adapted for your age. This might involve sessions with your parents or carers.

There are different types of CBT, including:

- **Individual CBT** with a therapist, which might include some sessions with your parents or carers. This can be in-person or online.
- **Group CBT** where a group of young people with similar difficulties have CBT together.
- **Computerised CBT** is a CBT programme that you and your parents or carers can work through together.
- **CBT by parents or carers**, where your parents or carers are given a programme to work through with you.

The choice of how you have CBT should depend on your and your parents or carers preferences, the types of CBT you will find it easiest to take part in and the type of anxiety disorder you have.

Your professional might suggest that you have counselling, which involves one-to-one sessions with a counsellor. Counselling isn't a specific treatment for anxiety disorders, but can be helpful to work out what you're anxious about. Some counsellors might also be able to offer you CBT. If during counselling it becomes clear you have an anxiety disorder and the counsellor is not able to offer you CBT, they should refer you to someone else so you can start CBT (this is usually someone based in CAMHS).

You might be offered a type of medication called SSRI (selective serotonin reuptake inhibitor) medication if you have a severe anxiety disorder and CBT has not been helpful, or if you do not want CBT.

## What about my parents or carers?

Your parents or carers could play an important role in your treatment, for example, some types of CBT involve parents or carers directly in the therapy. As facing your fears and anxieties can be hard, having support from your parents or carers can be very helpful. This doesn't mean that your parents or carers will know everything that happens in your individual sessions.

The wellbeing of your parents or carers is important, and they may need support and advice themselves. Your professional should help them to access any support they need, which could include:

- emotional support

- practical support with your care
- planning in case of emergencies

## Cognitive behavioural therapy (CBT)

### Strong evidence

Cognitive behavioural therapy (CBT) is a type of therapy where your professional helps you to learn how your feelings, thoughts and behaviours affect each other, and how you can change the way you think, behave and feel.

‘Cognitive’ refers to the things that take place in your mind, such as thoughts, images, memories, or processes like worrying. ‘Behaviour’ is what you do, for example escaping or avoiding something.

A typical CBT intervention for anxiety includes:

- Psychoeducation, which means learning more about anxiety and understanding how it affects you.
- Learning practical strategies to manage the physical effects of anxiety.
- Spotting and challenging your anxious thoughts.
- Facing situations that you fear (which is also known as ‘exposure’) and learning to manage your anxiety. In the beginning you will tackle things that make you feel a little bit anxious and as you become better at managing your anxiety, you will work up to things that would have made you feel very anxious before you started treatment. This process is called ‘graded exposure’.
- Developing a plan to stay well.

## CBT programmes

CBT treatments for anxiety often have a set programme (called a manual) that the therapist follows. These are called ‘manualised CBT programmes’. The manuals set out the steps to follow in treating your anxiety and also often have tips on ways to solve common problems. This can be helpful as it helps both you and your professional to know what to expect during the therapy. Research on this type of CBT suggests that it is often helpful for children and young people with anxiety.

Some manualised CBT programmes are for specific types of anxiety disorder, while others can be helpful for a range of anxiety disorders. Here, the programme you follow is the same for each type of anxiety disorder, although the detail might be different from person to person.

Less intensive forms of CBT, such as computerised CBT or group CBT, might be more suitable if you have mild to moderate anxiety symptoms, and are well

supported and motivated. If you have more severe problems and/or are less well supported or motivated, you might need more intensive one-to-one CBT.

## Coping CAT and Cool CAT

Coping CAT is a programme that can be helpful for generalised anxiety disorder, separation anxiety disorder and social anxiety disorder. Your professional could suggest trying it if you have one of these anxiety disorders and are 7-13 years old. If you are 14-18 years old there is a version for your age group called Cool Cat.

These interventions involve either one-to-one meetings with your therapist or meetings with a group of 6-8 other children or young people. The groups include children or young people of a similar age and are led by one or two therapists. There is also a computerised version called Camp-Cope-A-Lot: The Coping Cat.

Coping Cat will usually involve your parents or carers. Your professional might meet with them a couple of times to discuss your treatment plan and how they can support you. There is also a family-focused Coping Cat programme which involves parents or carers in all the sessions.

The programme will help you to identify and understand your anxious feelings and separate them from your other feelings. You will practise keeping track of your anxious feelings and recognising your own anxious self-talk. You'll learn skills such as coping self-talk and relaxation techniques, and you'll be gradually exposed to anxiety-producing situations to help you practise these coping skills. Your professional will also encourage you to reward yourself for making progress.

There is strong evidence that the Coping Cat programme can be helpful for anxiety.

## CBT approaches for specific anxiety disorders

There are other CBT approaches where the programme is for a specific type of anxiety disorder (e.g. social anxiety disorder). You could have these on a one-to-one basis, in a group, or via a computer.

Research on the different types of CBT suggests that they are all effective. There is less research comparing them with each other, but if you have social anxiety disorder, CBT which specifically targets social anxiety tends to be more helpful than a general CBT programme.

## CBT delivered by your parents or carers

There are also CBT approaches where your therapist works with your parents or carers, teaching them how to help you cope with situations that make you anxious.



Other CBT programmes involve your parents or carers through self-help books that they can use to deliver your CBT programme. This might be with or without support from a therapist.

## Medication



Strong evidence

### Selective Serotonin Reuptake Inhibitors (SSRIs)

Your professional might recommend that you take Selective Serotonin Reuptake Inhibitors (SSRIs) if you have severe anxiety symptoms, you've tried Cognitive Behavioural Therapy (CBT) and it didn't help, or you did not want to have CBT.

SSRIs are called 'antidepressant medications' because they were originally developed as a treatment for depression. However, there is strong research evidence that they can also help with anxiety disorders. There are several different types of SSRI medication. Sertraline is often prescribed for anxiety disorders, but your professional might recommend another SSRI if they feel it would be more helpful.

It's important to know that SSRIs don't work straight away. It can take 2-4 weeks before you notice an effect, and it can take 8 weeks or more to feel the full effect.

### Buspirone

Buspirone is a different type of medication that can also help with anxiety symptoms. It is used on a short-term basis to reduce anxiety symptoms, so you might be offered buspirone at the start of your CBT treatment if you are very anxious and need help to get started. It takes 1 to 2 weeks to work, and 4 to 6 weeks to get to its full effect.

There is less research on buspirone as a treatment for anxiety disorders than there is for SSRIs.

### Sedative medications

Diazepam and lorazepam are part of a group of medications called benzodiazepines. These are sedative medications that are sometimes used to reduce anxiety in specific stressful situations, such as going to the dentist. They are not used to treat anxiety disorders because the anxiety returns when the

medication wears off and because they can cause dependence, which means that it can be difficult to stop taking the medication.

## Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)

Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs) are another group of antidepressant medications. Research suggests that this type of medication can be helpful to treat adult anxiety disorders. However, SNRIs have a higher rate of side-effects in children and young people than SSRIs and are also less effective, so these are not usually prescribed for children and young people with anxiety disorders.

## Counselling and psychodynamic psychotherapy

### Some evidence

Counselling involves talking to a trained counsellor, either one-to-one, in a group, or with your family. It allows you to talk about your feelings and worries and think about ways of dealing with them.

Psychodynamic psychotherapy is similar to counselling and usually involves individual sessions with a therapist. You will be encouraged to explore your feelings about yourself and other people, things that have happened in the past and how these might be linked to your current difficulties.

Although counselling and psychodynamic psychotherapy can help in working out what you are anxious about and why, these are not specific treatments for anxiety disorder. You might need cognitive behavioural therapy or medication in addition to either of these types of support.

## Exercise

### Emerging evidence

Exercise to improve mental health can be done in a number of ways. For example, aerobic exercises increase your breathing and heart rate, while weight training improves your overall body strength.

Exercise treatments usually involve intense exercise at least three times each week for 6-20 weeks. There is some research evidence that exercise can help with anxiety and mood, but exercise is also important for good general health.