

Introduction

New Treatments for Anxiety Disorders: Clinical Approaches for Successful Outcomes

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Anxiety disorders are among the most prevalent psychiatric disorders in the general population. Findings from the National Comorbidity Survey demonstrate that 25% of Americans suffer from an anxiety disorder at some point during their life and that 17% experience an anxiety disorder during a given year.¹ In addition, anxiety disorders often are more prevalent in women.¹⁻³ Panic disorder, social anxiety disorder, obsessive-compulsive disorder (OCD), and posttraumatic stress disorder (PTSD) represent a significant portion of the anxiety disorders treated by psychiatrists. Patients with anxiety disorders are at increased risk for developing psychiatric comorbidity, and the presence of comorbid conditions often predicts a difficult clinical course and less favorable treatment outcome.

Anxiety disorders are also associated with a high level of health care utilization and treatment resistance.¹ The economic impact of anxiety disorders is costly in terms of both increased health care resource utilization and decreased productivity. Many patients with anxiety disorders are unable to maintain their jobs or complete their education, and the rate of financial dependency is high for these patients.⁴

Both pharmacologic and nonpharmacologic options may be considered in the treatment of anxiety disorders. A number of clinical studies have demonstrated the efficacy and safety of selective serotonin reuptake inhibitors in the treatment of panic disorder, social anxiety disorder, OCD, and PTSD. Monoamine oxidase inhibitors and benzodiazepines also may be considered for the treatment of anxiety disorders. In some cases, concomitant treatment with cognitive-behavioral therapy and pharmacotherapy may produce synergistic effects and may prevent the occurrence of relapse when medications are discontinued.

Because anxiety disorders are prevalent, it is hoped that improvement in their recognition and treatment will minimize associated morbidity and functional impairment. The articles presented in this supplement describe the comorbid and complicated presentations of panic disorder, social anxiety disorder, OCD, and PTSD; discuss gender differences in the epidemiology, treatment, and outcome of anxiety disorders; and suggest therapeutic strategies for management of anxiety disorders. For the benefit of the reader, several rating scales used prominently in the diagnosis and evaluation of anxiety disorders are reprinted in Appendices 1 through 7 of this supplement.

REFERENCES

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