



Generalized Anxiety Disorder (GAD)

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Generalized anxiety disorder (GAD) is basically characterized by excessive anxiety and worry (apprehensive expectation) that occurs more days than not over a period of at least six months. These worries generally concern several daily events or activities. People with GAD also have trouble controlling their worries.

GAD Diagnostic Criteria

According to the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), GAD is characterized by excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least six months, about a number of events or activities. The person finds it difficult to control the worry.

The anxiety and worry are associated with at least three of the following symptoms (four in children):

- (1) restlessness or feeling keyed up or on edge
- (2) being easily fatigued
- (3) difficulty concentrating or mind going blank
- (4) irritability
- (5) muscle tension
- (6) sleep disturbance

In addition, the focus of the anxiety and worry is not confined to features of an Axis I disorder (panic attack, social phobia, obsessive-compulsive disorder, separation anxiety, anorexia nervosa, somatization disorder, hypochondriasis, post-traumatic stress).

For example, a diagnosis of GAD may not be established if the person is only worried about having a panic attack (as in panic disorder) or about being embarrassed in public (as in social phobia).



What thoughts, behaviours and/or emotions can be associated with and/or observed in a person with GAD?

Although people with generalized anxiety are not always able to identify their anxieties and worries as being “excessive,” they experience subjective distress due to constant preoccupation, they have trouble controlling their preoccupations, or they experience functional impairments in their social, academic or work lives.

The intensity, duration and frequency of their anxiety and worries are out of proportion to the impact of the event they fear. These people have difficulty preventing worrisome thoughts from interfering with the attention they need to perform their current tasks or activities, and they have trouble keeping themselves from worrying.

Many people with GAD also have physical symptoms such as cold hands, dry mouth, sweating, nausea or diarrhea, frequent need to urinate, trembling, sore muscles, difficulty swallowing, excessive jumpiness. They are also unable to tolerate uncertainty, they believe it is necessary to worry, and they generally have considerable difficulty resolving various problems in their daily lives.

People with GAD worry excessively and uncontrollably. They have enormous difficulty trying to prevent their worries from interfering with their attention to the tasks they are currently doing.

While they are not always able to identify their worries as being “excessive,” they generally report suffering from distress due to their constant preoccupation, difficulty controlling their worries and functional impairments in their social and work lives or in other important areas of their lives.

Do people who display some of the above symptoms necessarily have GAD?

No. For a diagnosis of GAD per se to be established, the anxiety and excessive worrying must occur most of the time for at least six months about a number of events or activities (work, academic performance, etc.).

In addition, they must have difficulty controlling their worries and must have at least three (four in children) of the above-mentioned symptoms. Lastly, the distress must be clinically significant and the symptoms must not be associated with another disorder so that health professionals can diagnose GAD.



Signs and Symptoms of Generalized Anxiety

"I can't control my mind. I'm going to go crazy!"

"It's late. He was supposed to be here 20 minutes ago. Oh God, he's had an accident!"

"I can't sleep, I'm afraid, and I don't know why."

The symptoms and behaviours characterizing generalized anxiety disorder (GAD) are the following:

Symptoms and Behaviours Associated with GAD		
Psychological	Physical	Behavioural
<ul style="list-style-type: none">• Constant worry about past or feared events• Inability to stop anxious thoughts• Feelings of apprehension• Agitation and inability to relax• Difficulty falling asleep or staying asleep	<ul style="list-style-type: none">• Lack of energy• Trembling or muscle spasms• Muscle tension, pain• Nausea or diarrhea• Headaches• Chest pain• Teeth grinding• Dry mouth• Sweating or hot flushes• Dizziness	<ul style="list-style-type: none">• Concentration problems• Irritability• Easily startled• Procrastination

Can GAD be observed in children and teens?

Symptoms associated with GAD may be observed in children and teens. However, the nature of worries or anxieties generally differ from that seen in adults. Worries about academic performance and ability, punctuality and the idea of catastrophic events occurring are often observed. Children and teens with GAD are seen as being generally more conformist, perfectionist and less sure of themselves than those without GAD.

How does GAD manifest itself in children and teens?

In children, worries centre mostly on issues such as future events, past actions, social acceptance, family issues, personal aptitudes and school results. Unlike adults, children and teens with GAD do not always realize that their worries are out of proportion to the situation, which makes it necessary for adults to be able to recognize their preoccupations. Many symptoms are common to those seen in adults. However, children and teens exhibit specific symptoms that should alert their parents:

- *"What if"* questions or fears about future situations
- Perfectionism, excessive self-criticism and the fear of making mistakes
- Feeling to blame for things that happen
- Worry about an imminent catastrophe (e.g., a parent having an accident)
- Belief that things can never go well and that a problem will always inevitably arise
- Frequent need for reassurance



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When does GAD usually appear?

It is quite difficult to identify precisely when or how GAD appears because affected people generally report having felt nervous or anxious all their lives. Although more than half of those seeking treatment indicate that their symptoms began in childhood or adolescence, it is not unusual for this disorder to appear after the age of 20 years.

How can we help children with GAD?

Parents and other adults around children with GAD can help by knowing what GAD is, by understanding how GAD affects the child's functioning, by carefully listening to the child's complaints, by helping them identify their emotions and thoughts related to GAD, by leading them to question these emotions and thoughts in order to help them aim toward achieving other more realistic ones, which will help them better control their GAD.

Do GAD symptoms have the same duration or intensity in all people?

No. The duration and intensity of GAD symptoms may differ from one person to the next. In addition, while this disorder is generally chronic, it regularly fluctuates and often increases during stressful periods.

How do mental health professionals diagnose GAD?

Health professionals such as physicians, psychiatrists and psychologists are the only ones capable of establishing such a diagnosis. These professionals use clinical interviews and various assessment tools (questionnaires, checklists, etc.) to reach a diagnosis of GAD. However, it should be noted that GAD can easily go unnoticed in routine medical examinations.

How many people have GAD in the general population?

Various research studies on GAD have concluded that it is one of the most widespread anxiety disorders. Epidemiological studies show that its prevalence over one year is approximately 3%, while its lifetime prevalence in the general population is 5%.

Does GAD differ between men and women?

Yes. According to various epidemiological studies, women account for approximately two-thirds of those affected by this disorder.



Which factors contribute to the onset and persistence of GAD?

Recent studies on twins suggest that genetics contributes to the onset of GAD. Moreover, some factors predispose people to anxiety, such as temperament, emotional management, cognitive biases and distortions, attachment relationship and parental practices (e.g., over-protectiveness).

How does GAD affect children and teens?

Like other anxiety disorders, GAD has psychological, physical and behavioural effects (see the table above).

What should be done in the case of people who seem to be suffering from GAD?

It is important to advise people who seem to have or who have GAD to get counselling. Scientific studies show that cognitive-behavioural therapy (CBT) is effective in treating GAD. It is also important to learn about GAD and to not hesitate to ask for help if needed.

What is cognitive-behavioural therapy for GAD and is it effective?

Cognitive-behavioural therapy (CBT) for GAD mainly consists in providing information to people on the types of anxieties and factors explaining their GAD, in increasing their tolerance of uncertainty, in helping them move toward problem solving, in developing their skills for managing their excessive anxiety reactions (e.g., relaxation), in correcting their unrealistic beliefs about their anxieties, and in lowering their anxiety (and therefore cognitive avoidance) about their worries.

Which cognitive-behavioural techniques are used to treat GAD?

- **Psychoeducation**
Psychoeducation involves providing information to people with GAD, particularly about their emotional reactions, the origin of their symptoms, the factors explaining their GAD and the various types of worries.
- **Problem solving**
One of the techniques frequently taught to people with GAD is problem solving. This technique helps them focus on their problems and find a more effective way of solving them. Problem solving comprises seven main steps:
 1. **Define the problem**
 2. **Generate solutions**
 3. **Assess the pros and cons of each solution**
 4. **Choose the solution (or combination of solutions) to apply**
 5. **Test the solution(s)**
 6. **Assess the outcomes**
 7. **Modify the solution or apply another one if necessary**



- **Imagery exposure**
Imagery exposure is one of the main methods applied in treating GAD. It is designed to decrease people's avoidance and fear of their worries in order to reduce the frequency of their worries. In short, this technique involves reading or listening to a scenario (written and then recorded on an audio cassette) depicting a worry until it no longer provokes anxiety.
- **Cognitive Restructuring**
Various exercises can also be undertaken to modify faulty beliefs about worries that generally contribute to persistent GAD. It is in fact possible to overturn certain unrealistic beliefs by providing additional information and by questioning these beliefs.
- **Progressive muscle relaxation**
Progressive muscle relaxation is sometimes used to help people with GAD relax, reduce their muscle tension and therefore increase their feeling of control over their worries. This type of technique primarily consists in learning to relax the muscles by contracting the main muscle groups for 10 seconds and then releasing them for the same amount of time.



Cognitive Restructuring

1. Identifying cognitive barriers in people's comments:

- If someone says that I am stressed out, this means that I will always be that way.
- If someone says that I'm very stressed, this means that no one can help me.

2. Examining the evidence:

- Are you sure that you will always feel stressed?
- Are you sure that no one can help you?

3. Confronting the cognitive barrier:

- Do you think everyone would think the same thing after hearing this comment?
- Has someone in the past ever helped you feel less stressed?
- Have you sometimes felt better after having been stressed?
- Do you know anyone who has experienced a lot of stress over an exam?
- Could it be that this exam caused you a lot of stress without your having noticed?

4. Converting the cognitive barrier into a realistic thought:

- You're right: it's normal for you to be surprised to learn that you are very stressed.
- But you probably need to accept the fact that you are stressed if you want to change and become less stressed.
- You are right, some exams or situations are sometimes more stressful than others.
- You are right not to want to remain stressed throughout your life.
- You are right to hope that someone can help you overcome your anxiety.
- It is true that some exams are really stressful.
- It is also true that some exams are not really stressful.

5. Applying problem solving:

- If someone had told your friend that he was very stressed, what do you think he would have done?
- What do you think your friend could do to feel less stressed?
- What about you? What do you do to feel less stressed before an exam?
- What do you tell yourself?

The goal of cognitive restructuring is to enable people to question their thought patterns on their own. We should never try to show them that they are wrong because this reinforces their negative beliefs and increases their anxiety. We therefore need to direct their thinking toward problem solving. This is how people can learn to restructure their cognitive barriers.

