#### AAPA We Are Family (Medicine) Conference San Diego, CA February 6, 2023

**Date/Time:** Monday, February 6, 2023 – 3:15pm – 4:15pm

**Title:** Do Anxiety and Depression Make You Smarter?

**Description:** This lecturer is a basic primer on general anxiety, panic disorder, and major depression. These conditions are commonly encountered in primary care settings. We will review the DSM criteria and discuss the nuance in diagnosing mental health conditions. Furthermore, I intend to present common ways of making patients feel comfortable bringing up and describing their mental health concerns in a primary care setting.

# DO ANXIETY AND DEPRESSION MAKE YOU SMARTER?

Jay C. Somers, PA-C, DHSc

## **Disclosures**

Non-Declaration Statement: I have no relevant relationships with ineligible companies to disclose within the past 24 months.

### **Educational Objectives**

## At the conclusion of this session participants should be able to:

- 1) Diagnose General Anxiety and Panic Disorder using the DSM-5 TR criteria
- 2) Diagnose major depression using the DMS -5 TR criteria
- 3) Use several simple scales to help identify anxiety and depression
- 4) Talk to patients about their mental health.



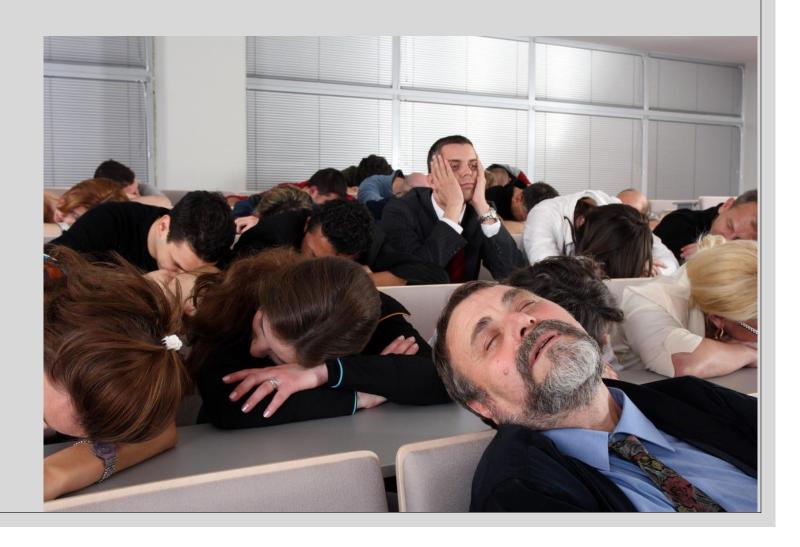
## Who Is Here?

PAs Graduated In Past 2 years?

PAs Graduated In Past 10 Years?

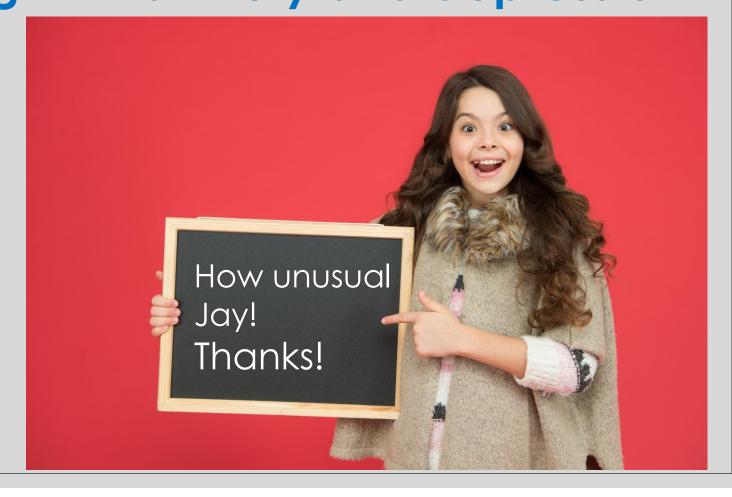
## My Promises To You....

I Will Do My **Best To NOT Make This Another Boring Lecture On Mental Health!** 



My intention is that you come away with some practical knowledge that you can apply to your patients presenting with anxiety and depression

later this week.



# GENERALIZED

## DSM-5-TR ANXIETY DISORDER Diagnostic Criteria

- A. Excessive anxiety and worry, occurring more days than not for at least 6 months about a number of events.
- B. The Individual finds it difficult to control the worry.
- C. This anxiety is associated with **at least three** of the following anxiety symptoms:
  - A. Restlessness
  - B. Easily Fatigued
  - C. Difficulty concentrating or blanking out.
  - D. Irritability
  - E. Muscle tension
  - F. Restless sleep and/or onset or maintenance issues.
- D. The anxiety, worry, or physical symptoms cause SIGNIFICANT distress or impairment of social or occupational functioning.
- E. The symptoms are not caused by other DRUGS (Illicit or prescribed), MEDICAL conditions (e.g., hypoglycemia, encephalopathy, hypothyroidism), or OTHER mental health conditions.

## GENER ANXIETY

- A. Excessive anxier number of ever
- B. The Individual fi
- C. This anxiety is as
  - A. Restlessness
  - B. Easily Fatigu
  - C. Difficulty co
  - D. Irritability
  - E. Muscle tens
  - F. Restless slee
- D. The anxiety, wo social or occupation
- E. The symptoms and conditions (e.g., hy health conditions.

In KIDS who have difficulty controlling worry

Only **ONE** of these symptoms has to be present for 6 -months

- -Restlessness
- -Feeling tired
- -Focus and concentration problems
- -Irritability
- -Muscle tension
- -Sleep problems



months <u>about a</u>

nptoms:

npairment of

CAL R mental



## **Specific Concerns in Kids**

In children and adolescences worries are often centered on school or sports performance.

Kids may worry about catastrophic events out of proportion (Coronavirus, active shooter, and weather events)

Often excessive worry or perfectionistic behavior outside of external pressure

Watch out for other mental heath conditions that look like GAD:

- Separation Anxiety
   Obsessive Compulsive Disorder
- Social AnxietyAlcohol and Drugs

I = Irritability

C = Impaired Concentration

A = Anxiety, Nervousness, Worry

N = No control over worry

T = Time (at least 6-months)

 $\mathbf{R}$  = Restlessness

**E** = Energy decreased

**S** = Impaired Sleep (onset or maintenance)

**T** = Tension in Muscles



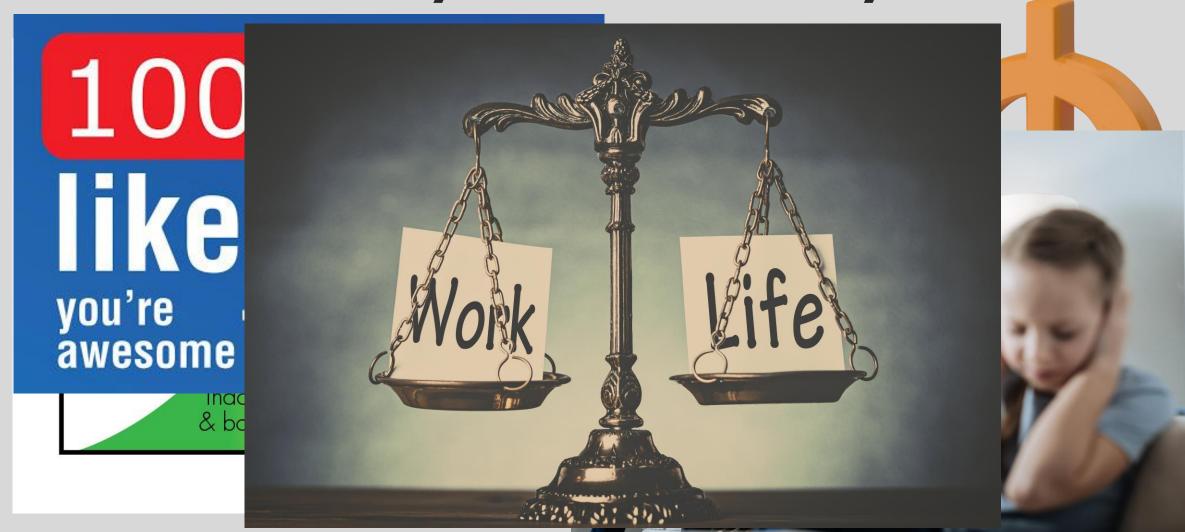
## I CAN'T REST

#### What Makes GAD Different?

Everybody Gets Anxious, Right?



Stress- Anxiety- Panic- Worry- Burnout



## Panic Disorder

## DSM -5-TR Diagnostic Criteria

A. An abrupt surge of intense fear or intense discomfort that reaches a peak within minutes, during which time FOUR or more of the following symptoms occur:

#### Panic Attacks

(Not a mental

disorder)

→ Palpitations, pounding heart

→ Trembling or shaking

→ Feelings of choking

→ Nausea or abdominal distress

→ Chills or heat sensation

→ Derealization or depersonalization

→ Fear of dying

- → Sweating
- → Sensation of shortness of breath
- → Chest pain or discomfort
- → Feeling dizzy, unsteady, or lightheaded
- → Paresthesia (numbness or tingling)
- → Fear of losing control or going crazy

Panic Disorder B. A minimum of one of the attacks has been followed by at least 1-month (or more) of at least <u>One</u> of the following:

- ► Persistent concern or worry about additional panic attacks
- Significant maladaptive behavior due to the attacks.

C. The symptoms are not caused by other DRUGS (Illicit or prescribed), MEDICAL conditions (e.g., drug abuse, medications, hyperthyroidism, cardiopulmonary disorders, asthma, COPD), or OTHER mental health conditions.

# MAJOR DEPRESSIVE —— Disorder ——

## DSM -5-TR Diagnostic Criteria

FIVE or more of the following symptoms have been present during the same 2-week period AND represent a change from previous functioning At least ONE of the symptoms must be either

#### Depressed Mood or Loss of Interest

- ▶ Significant weight loss or weight gain (+/- 5%), when not dieting
- Insomnia or hypersomnia nearly every day
- Psychomotor agitation or retardation NOTED BY OTHERS.
- Fatigue or loss of energy
- Feelings of worthlessness or excessive or inappropriate guilt
- Diminished ability to think or concentrate, or indecisiveness, nearly every day (Can mimic ADHD)
- Recurrent thoughts of death or recurrent suicidal ideations

**S** = Sleep Changes

= Loss of Interest

**G** = Guilt

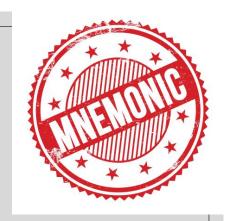
**E** = Lack of Energy

**C** = Concentration

A = Appetite (too much / too little)

**P** = Psychomotor Changes

**S** = Suicidal Ideations



SIG-E-CAPS

## Psychometric Scales



#### GAD-7

Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems?  (Use "" to indicate your answer)	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen		1	2	3

(For office coding

For Adults: 3 or more of these symptoms for at least 6-months Restlessness **Easily Fatigued Trouble** concentrating **Irritability Muscle Tension** Sleep Problems

Kids only need one of these symptoms.

#### PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

Not at all	Several da s	than half the days	every day
0		<u> </u>	
		ır	
0		2	3
0	1	2	3
0	1	2	3
0	1	2	3
0	1	2	3
0	1	2	3
0	1	2	3
G <u>0</u> +		+ + =Total Score:	
	0 0 0 0 0 0	0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1	0 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2

If you checked off any problems, how difficult have these problems made it for you to do your

Very

difficult

Extremely

difficult

work, take care of things at home, or get along with other people?

Somewhat

difficult

П

Not difficult

at all

For Adults: 5 or more of these symptoms during the same 2-week period hildren, this can present as

Loss of interest or pleasure

- ► Significant weight loss or weight gain (5% in 1 month)
- ► Insomnia or hypersomnia
- Psychomotor retardation
- Fatigue or loss of energy
- ► Feelings of worthlessness
- Decreased focus/ decide
- Recurrent thoughts of death

#### **Beck Anxiety Inventory**

Below is a list of common symptoms of anxiety. Please carefully read each item in the list. Indicate how much you have been bothered by that symptom during the past month, including today, by circling the number in the corresponding space in the column next to each symptom.

	Not At All	Mildly but it didn't bother me juch.	Moderately - it wasn't pleasant at times	Severely – it bothered me a lot	
Numbness or tingling	0	1	2	3	
Feeling hot	0				
Wobbliness in legs	C	Numbness	Hot	Wobblines	
Unable to relax	0				
Fear of worst	0	1	2	3	
happening					
Dizzy or lightheaded	0	1	2	3	
Heart pounding/racing					
Unsteady	Diz:	ziness Hed	art Pounding	Unsteady	
Terrified or afraid				,	
Nervous	0	1	2	3	
Feeling of choking	0	1	2	3	
Hands trembling	0		Hara da		
Shaky / unsteady	0	Choking	Hands	Shake	ıkey
Fear of losing control	0	CHOKING	<b>Trembling</b>	SHAK	
Difficulty in breathing	0				
Fear of dying	0	1	2	3	
Scared	0	1	2	3	
Indigestion	0	1	2	3	
Faint / lightheaded			l va		<b>21</b>
Face flushed					A 101
Hot/cold sweats	Inges	stion Lighthe	eaded Flush/S	weats	Any
Column Sum					

#### **BECK Anxiety**

(Provider completed)

Benefits Include:

Validated for populations 17 and older.

Addresses restlessness & worry directly **and** additionally lists several physical symptoms that are commonly associated with anxiety.

21 Questions & 63 Total Points

Anything over 36 indicates potential seriously impairing anxiety.

**Beck Depression Inventory** 

I do not fool cod	0
	3
	_
	0
future	
I feel the future is hopeless and that things	3
cannot improve	
I do not feel like a failure	0
I feel I am a complete failure as a person	3
I get as much satisfaction out of things as I	0
used to	
I am dissatisfied or bored with everything	3
I don't feel particularly guilty	0
I feel guilty all of the time	3
I don't feel I am being punished	0
I feel I am heing nunished	3
I don't feel disappointed in myself	0
I hate myself	3
I don't feel I am any worse than anybody else	0
I blame myself for everything bad that	3
happens	3
happens	0
l	
happens I don't have any thoughts of killing myself	0
happens I don't have any thoughts of killing myself I would kill myself if I had the chance	0 3
happens I don't have any thoughts of killing myself I would kill myself if I had the chance I don't cry any more than usual	0 3 0
I don't have any thoughts of killing myself I would kill myself if I had the chance I don't cry any more than usual I used to be able to cry, but now I can't cry	0 3 0
happens I don't have any thoughts of killing myself I would kill myself if I had the chance I don't cry any more than usual I used to be able to cry, but now I can't cry even though I want to	0 3 0 3
	I do not feel like a failure  I feel I am a complete failure as a person  I get as much satisfaction out of things as I used to  I am dissatisfied or bored with everything  I don't feel particularly guilty  I feel guilty all of the time  I don't feel I am being punished  I don't feel disappointed in myself  I hate myself  I don't feel I am any worse than anybody else

<u> </u>	IIIVEIIIOIY	
Q12	I have not lost interest in other people	0
	I have lost all of my interest in other	3
	people	
Q13	I make decisions about as well as I	0
	ever could	
	I can't make decisions at all anymore	3
Q14	I don't feel that I look any worse than I	0
	used to	
	I believe that I look ugly	3
Q15	I can work about as well as before	0
	I can't do any work at all	3
Q16	l can sleep as well as usual	0
	I wake up several hours earlier than I	3
	used to and cannot get back to sleep.	
Q17	l don't get more tired than usual	0
	I am too tired to do anything	3
Q18	My appetite is no worse than usual	0
	I have no appetite at all anymore	3
Q19	I haven't lost much weight, if any,	0
	lately	
	I have no appetite at all anymore.	3
Q20	I am no more worried about my	υ
	health than usual	
	I am so worried about my physical	3
	problems that I cannot think of	
	anything else	
Q21	I have not noticed any recent change	0
	in my interest in sex	
	I have lost interest in sex completely	3

#### **BECK Depression**

(Patient completed)

#### **Benefits Include:**

- Validated for populations 13-80 years old.
- Addressed depressed mood and loss of interest directly **and** Address the 7 other DSM criteria.

Weight Loss or Gain

**Fatigue** 

Worthlessness

Insomnia

Psychomotor Agitation

Poor focus and concentration

**Thoughts of death** 

21 Questions & 63 Total Points 10-18 indicates mild depression and anything over 30 indicates severe depression.

**Beck Depression Inventory** 

Q1	I do not feel sad 0 Q12   I have not lost interes	Q12 I have not lost interest in other people		
	I am so sad and unhappy that I can't stand it 3 I have lost all of my i	I have lost all of my interest in other		
Q2	I am not particularly discouraged shout the people			
	future	ut as well as I	0	
	I feel the future is hor			
	cannot improve Other Symptoms	: all anymore	3	
Q3	I do not feel like a fai	ıy worse than l	0	
	I feel I am a complete COVERED			
Q4	I get as much satisface - Future thinking		3	
	used to	as before	0	
	I am dissatisfied or b - Failure	1	3	
Q5	I don't feel particular - Fulfillment	ıal	0	
	I I feel guilty all of the	earlier than I	3	
Q6	I don't feel I am being - Guilt	pack to sleep.		
	- Feeling of being punished	an usual	0	
Q7	I don't tool dicannain	hing	3	
	Thate myself - Expressive emotion	than usual	0	
Q8	I don't feel I am any v - Empathy	anymore	3	
	I blama mysalf for av	ht, if any,	0	
	- Self-image			
Q9	Idon't have any thou - Physical health perception	anymore.	3	
	I would kill myself if  - Libido	out my	U	
Q10	I don't cry any more	1	_	
	I used to be able to cr	ny physical	3	
	even though I want to	t think of		
Q11			0	
	was in the second secon	y recent change	U	
	I feel irritated all the time    I feel irritated all the time   3	say sampletaly	3	
	I have lost interest in	sex completely	5	

#### **BECK Depression**

(Patient completed)

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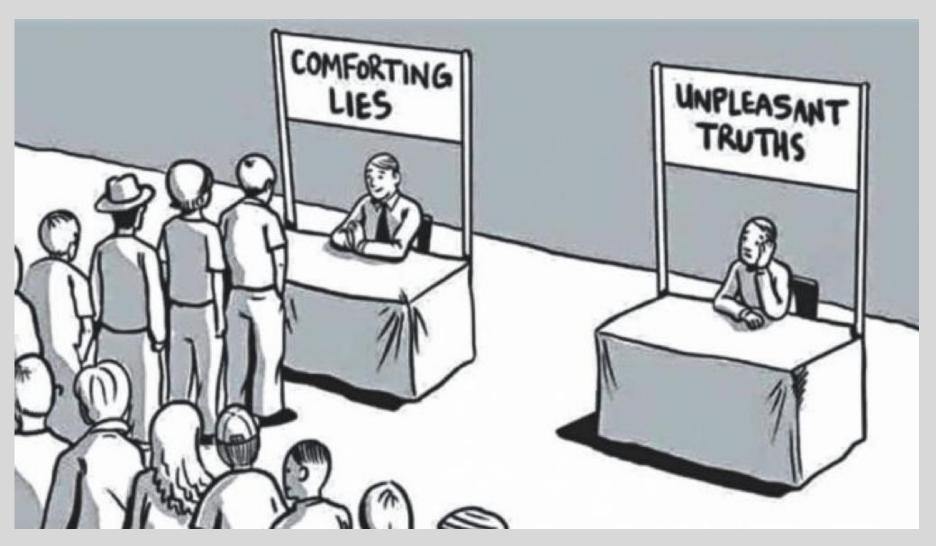
**Thoughts of death** 

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## Treatment for Mental health



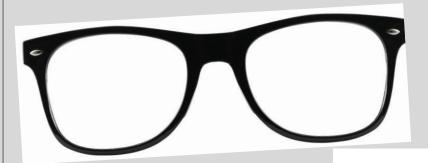
## The Sad Truth....





# How do we frame our discussion with patients?

#### What tools can we use?







# osychsearch.net OSM "I don't have time to listen to all that.

I only do what we call in the biz, **Medication Management** 

#### Medication FDA Approved For General Anxiety Disorder



Paroxetine (Paxil)



**Escitalopram (Lexapro)** 



**Duloxetine (Cymbalta)** 



**Venlafaxine (Effexor)** 

Only Duloxetine has FDA approval to treat children 7 and above for GAD but many SSRIs are used off label for this – Notably Sertraline (>6) and Fluoxetine (>7).

### In Kids

ONLY 1 Medication has been approved by the FDA to date to treat GAD in kids. In 2014 Duloxetine (Cymbalta) was approved for 7–17 year-olds. However, SSRIs are very commonly used in adolescent populations for Anxiety.

Sertraline (Zoloft), Fluoxetine (Prozac), and Fluvoxamine (Luvox) have been approved in Pediatric populations (>/= 7 years old) to treat OCD.



#### **Depression Medication In Kids**

Only THREE medications have been approved by the FDA to treat Major Depression in kids 12-17 years old.

- Citalopram (Celexa) -Fluoxetine (Prozac)

- Escitalopram (Lexapro)

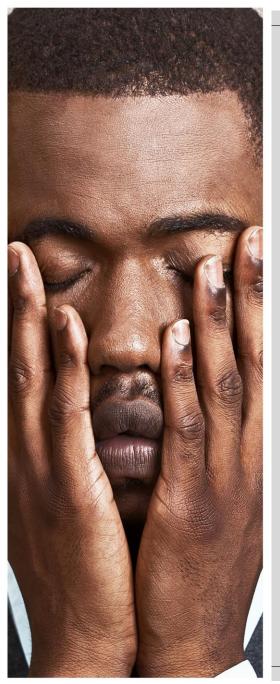




Sertraline (Zoloft), Fluoxetine (Prozac), Fluvoxamine (Luvox)

have been approved in pediatric populations (>/= 7 years old) to treat OCD.





#### Medication FDA Approved For Major Depressive Disorder

#### Classes of Medication Indicated

► Selective Serotonin Reuptake Inhibitory (SSRI)

(Celexa, Paxil, Zoloft, Prozac, Lexapro)

► Serotonin and Norepinephrine Reuptake Inhibitor (SNRI)

(Cymbalta, Effexor, Pristiq, Fetzima)

► Tricyclic Antidepressants

(Amitriptyline, Desipramine, Doxepin)

**Monoamine Oxidase Inhibitors (MAOI)** 

(Emsam, Nardil, Parnate)

► Atypical Antidepressants

(Trazodone, Mirtazapine, Wellbutrin)

► N-Methyl D-Aspartate (NMDA) Antognist

(Spravato (Esketamine) nasal spray)

## Primary Concerns with SSRI/SNRI

Nausea Sexual Dysfunction Agitation Weight gain Insomnia

Many of these symptoms can be confused with worsening anxiety and depression and may lead to non-compliance.





#### In Pediatric Populations

After the FDA and UK regulatory agencies released warnings in the 1980's about increased suicidal thoughts and suicidal behaviors in kids taking antidepressants use of these medication fell worldwide

The current literature calculates the risk of suicidality in children as low and reports 1-2 % of kids taking SSRI experience the emergence of suicidal thoughts and behaviors but not completed suicides.<sup>3</sup>

Greatest risk in the first 9-days and usually with higher-than-normal starting doses.

**Informed** consent should include the discussion of the relative risk of increased suicidal thinking with antidepressant medications versus the risk of suicide without psychopharmacologic treatment.

### Non-Pharmacological Treatments

Cognitive Behavioral Therapy (CBT) - Targeting thoughts and behaviors related to mood.

Interpersonal Psychotherapy (ITP) – Focuses on improving relationships with friends and family, increasing social support, and improving problem-solving skills.

**Family Based treatments –** This intervention promotes family alliances and connections and promotes success outside of the home.

**Dialectal Behavioral Therapy (DBT)** – Decreases moderate to severe anxiety mixed with depression along with self-harm and suicidal behaviors.

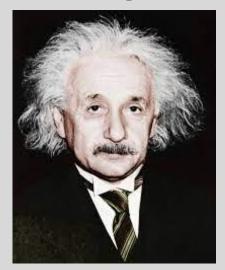
**Miscellaneous -** Exercise programs, structured sleep, motivational interviewing, and nutrition.

## But do Anxiety and Depression MAKE YOU SMARTER!?



While the research is still inconclusive, two large population cohort studies suggest high intelligence has a moderating effect on the personality trait of Neuroticism.5

Intelligent



#### Neurotic



## Neuroticism



Individuals with neuroticism often are self-conscious and shy and tend to internalize phobias, anxiety, panic, aggression, and negativity.

## However....

Higher intelligence does seem to increase the risk of depression, EVEN after controlling for higher neuroticism. 5



### <u>References</u>

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https://www.aacap.org/App Themes/AACAP/docs/resource center/resources/med\_guides/Depr essionGuide-web.pdf

Navrady LB, Ritchie SJ, Chan SWY, et al. Intelligence and neuroticism in relation to depression and psychological distress: Evidence from two large population cohorts. *Eur Psychiatry*. 2017;43:58-65. doi:10.1016/j.eurpsy.2016.12.012

#### <u>Mental Health - Handouts</u>

- General Anxiety Disorder -7 (GAD-7)
- Beck Anxiety Inventory (BAI)
- Beck Depression Inventory (BDI-II)
- Patient Health Questionnaire-9 (PHQ-9)
- Adult ADHD Self Report Scale (ASRS-v 1.1)



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