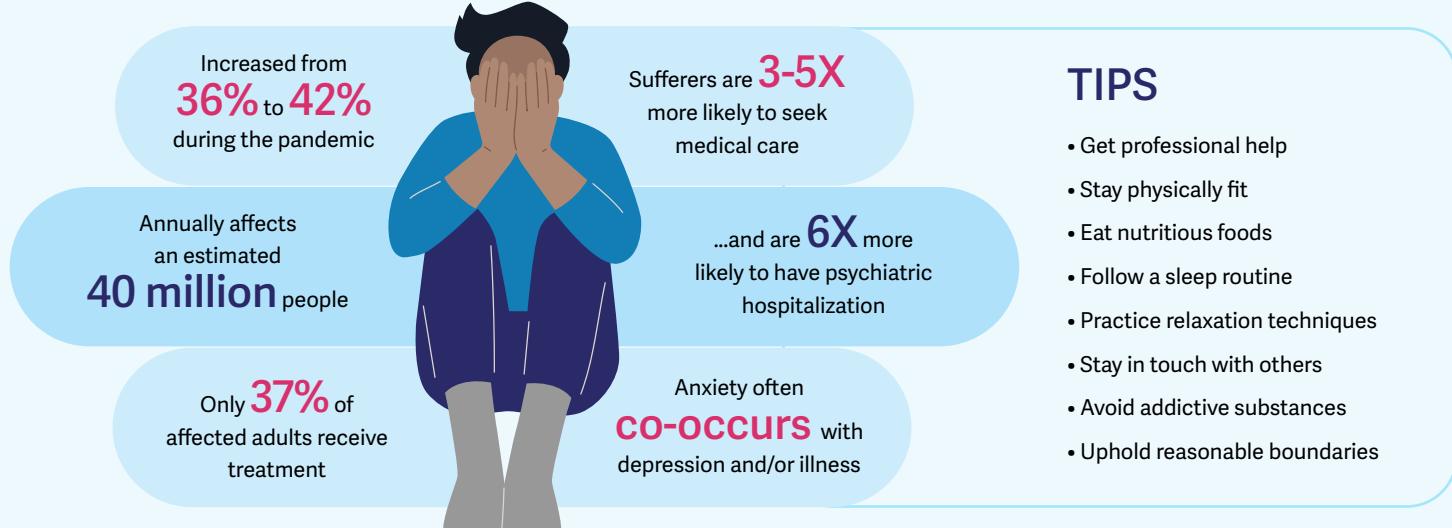


WELLNESSMONTHLY

Increase in Anxiety Disorders Demands Attention | **October 2022**

Anxiety in U.S. Adult Population*



Increase in Anxiety Disorders Demands Attention

The U.S. Preventive Services Task Force has released draft recommendations for primary care doctors to screen all of their patients under age 65 for anxiety as part of efforts to address declines in mental health among Americans.

Depression, anxiety disorders and other mental illnesses are leading causes of morbidity, disability and mortality. While most anxiety disorders can be effectively treated, they are often not even diagnosed.

Research shows that the prevalence and severity of anxiety disorders has increased since the start of the COVID-19 pandemic, often in concurrence with depression and/or physical illness. For example:

- From August 2020 to February 2021, the percentage of U.S. adults with recent symptoms of an anxiety or depressive disorder increased from 36 to 42 percent, according to the [Morbidity and Mortality Weekly Report](#).

- In a recent [Lyra Health](#) survey of 1,000 full-time employees in the U.S., 31 percent of respondents reported their mental health declined over the past year, with anxiety a leading complaint.
- From 2019 to 2021, mental health treatment within a 12-month period increased from 13 to 18 percent for men and 24 to 29 percent for women aged 18 to 44; predominant symptoms included anxiety and trouble concentrating, according to the [National Health Interview Survey](#).
- In a comparison study [published in The Lancet](#), five out of six people 18 to 29 years old reported experiencing mental health-related symptoms, including feeling anxious, nine months into the pandemic; both the prevalence and severity of symptoms increased, particularly for young adults, even though older adults have much higher COVID mortality risk.

Anxiety or Stress?

Anxiety disorder refers to psychiatric conditions that involve extreme fear or worry. Anxiety disorder includes generalized anxiety, social anxiety, separation anxiety, panic attacks, certain types of phobias and selective mutism (silence). Obsessive-compulsive disorder and post-traumatic stress disorder are closely related.

Stress response is not the same as anxiety, but similar symptoms can make it hard to distinguish between the two. They may include gastrointestinal upsets, headache, body aches, fatigue, jitteriness, insomnia, loss of appetite, sweating, trembling, rapid heart rate, dizziness, lack of interest in daily activities, low self-esteem, poor concentration, and anger or agitation.

A person's response to a stressful situation typically dissipates once the situation resolves. Sometimes stress is healthy because it prompts positive action. Anxiety usually involves a persistent feeling of apprehension or dread that interferes with daily life. People with anxiety disorders often have recurring, intrusive thoughts. At work, employees with anxiety disorders may report having difficulty dealing with problems, setting and meeting deadlines, managing staff or making presentations.

Relief for Anxiety Disorders

There are a number of reasons why someone may not seek care for an anxiety disorder. They may think symptoms will resolve on their own, believe they are effectively self-managing their condition, be in denial or embarrassed to ask for help.

Routine screenings by primary care providers of patients under age 65 would be an initial step in referring people with symptoms to a mental health professional for education, evaluation and potential treatment. A positive screening result would not necessarily mean someone has a clinical disorder.

Primary care physicians typically use surveys with scaled scores to assess patients' mental health. Wider use of screening for anxiety disorders would still be at a personal

provider's discretion, taking into consideration underlying health conditions and other life events. Psychiatrists often refer to criteria in the *Diagnostic and Statistical Manual of Mental Disorders*, published by the American Psychiatric Association, to diagnose an anxiety disorder.

There are a multitude of self-directed techniques available to reduce stress – exercise, healthy eating, deep breathing, meditation, yoga, nature connection, hobbies, social contacts, quality sleep, biofeedback – and more. Many people find talk therapy helpful when they are experiencing a period of distress and need extra support.

However, people with anxiety disorders may find these techniques do not provide sufficient relief. In those cases, a combination of medication and psychotherapy is likely to be recommended. With advances in medical technology, there is also an increasing interest in results from non-invasive procedures that use magnetic fields to stimulate nerve cells in the brain to reduce symptoms of anxiety and depression.

The Preventive Services Task Force is comprised of 16 expert volunteers who are appointed by the director of the [Agency for Healthcare Research and Quality](#), a federal agency. The panel determined that evidence on the benefits of screening people over 65 for anxiety was insufficient to make a recommendation.

Recommended Resource

Refer to this article for tips on how to manage [anxiety and stress in the workplace](#).

Did You Know?

More than 70 percent of packaged foods sold in the U.S. are classified as ultra-processed. They contain five or more ingredients such as artificial preservatives, colors, texturizing agents, and olfactory and taste enhancers that are associated with statistically significant increases in symptoms of mild depression and anxiety. Refer to [Nutrients](#); 2022 Jul; 14(13): 2568.