

Anxiety Disorders and Gender

Dan J. Stein
Bavi Vythilingum
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Foreword

Large epidemiologic studies have consistently found the anxiety disorder to be one of the most common psychiatric disorders in the world. Anxiety disorders have a negative impact on physical and mental health as well as on educational, social, and occupational functioning and overall quality of life. It has long been known that anxiety disorders are much more prevalent in women than men, but more recent work has also found differences in comorbidity, symptoms, and how these disorders affect each gender. As the term “sex” refers to biological aspects and “gender” refers to the psychological and social aspects of maleness or femaleness, it is appropriate to discuss these differences in anxiety disorders as “gender differences,” to acknowledge the biological and psychosocial components that are inherent in their etiology and persistence. What is not yet known is if there are gender differences in the psychobiology or treatment responses of the anxiety disorders and if these are found to exist, what clinical implications they may have.

This book, edited by two international authors on anxiety disorders (Dan Stein and Bavi Vythilingum), is a treasure trove of the collective wisdom of the leading anxiety disorder psychiatrists and psychologists from across the globe. Each chapter addresses the gender aspects of one of the anxiety and related disorders: general anxiety, panic, social anxiety, obsessive-compulsive and related disorders, trauma, and stress-related disorders. There are also summary chapters on anxiety disorders in women and men.

Genetics, neuroimaging, gonadal hormones, psychological diagnostic tests, clinical evaluation, pharmacology, and psychotherapy of each disorder are elegantly discussed. The essential role of cognitive behavioral therapy is emphasized, with modifications for specific diagnoses. Gender differences in phenomenology are illustrated, for example, women with obsessions are more likely to focus on contamination and cleaning, while men are more likely to focus on sexual and symmetry obsessions. Interestingly, these differences appear to be stable across cultures, suggesting that biological or cross-cultural gender roles may play a role. Gender differences are also illustrated for body dysmorphic disorder in which women are more likely to focus on facial and breast details, while men are more likely to be preoccupied by inadequate musculature. In terms of comorbidity by gender, women with obsessive-compulsive disorders are more likely to suffer from depression, while men are more likely to have a substance abuse disorder.

The importance of disorders in the perinatal period, including those – the majority – that are persistent disorders from earlier onset, and their implications for treatment and child development are given due prominence.

These examples and many others contribute to the compelling case for the study of gender differences in psychiatry to better understand and treat mental disorders with increased specificity. The need for gender-specific early intervention is gaining more prominence as the possibilities and implications for both genders become more apparent. The authors have made a critical advance in this work on gender differences in anxiety disorders. This valuable book will not only inform the reader of the most recent knowledge but also greatly assist them in the optimal care of all patients suffering from anxiety disorders.

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Introduction

Anxiety disorders are the most prevalent of the psychiatric disorders, and therefore of particular interest to both the practising clinician and to the mental health policy-maker. In this volume we also often refer to the anxiety and related disorders, as the 5th edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)* (American Psychiatric Association 2013) has split the older category of anxiety disorders into anxiety disorders, obsessive-compulsive and related disorders, and trauma- and stressor-related disorders. The DSM-5 approach takes into account a growing evidence-base which suggests that there is both diagnostic validity and clinical utility in separating out these conditions, but the manual also lists these disorders directly adjacent to one another in order to emphasize their significant overlap (Stein et al. 2011).

The volume approaches these disorders through the important prisms of sex and gender. There is a growing appreciation in psychiatry and clinical psychology that sex and gender have important implications for diagnosis, for pathogenesis, and for management. Consider, for example, the finding that in countries with lower traditionality of female gender roles there is a narrowing of differences between men and women in prevalence of mental disorders (Seedat et al. 2009). Relatedly, there is also growing awareness of the complexity of sex and gender; these are constructs that entail biological, psychological, and sociocultural mechanisms.

Indeed, part of the interest of the current volume is that chapters necessarily cover a broad range of different disciplines in an effort to unpack sex and gender in relation to anxiety and related disorders. In this brief introduction, we wish to make a few key points about the relevant literature, in the hope that this will provide the reader a conceptual framework for the remainder of the volume. We cover in turn, some key advances at the intersection of sex/gender and the anxiety and related disorders, as well as a number of the important gaps that remain.

Key Advances

Several key advances have been made at the intersection of sex/gender and anxiety related disorders. In the realm of diagnosis and evaluation, both clinical and community studies have repeatedly emphasized important differences in the prevalence and presentation of anxiety and related disorders in women (Baxter et al. 2013).

Community studies demonstrate that anxiety and related disorders are more common in females throughout the world, with the onset of this difference occurring between pregnancy and menopause. At the same time, when it comes to treatment-seeking, the female predominance is not always apparent; social anxiety may for example be more likely to interfere with the professional and social lives of men than of women, accounting for a less skewed distribution of males in social anxiety disorder clinics. DSM-5 has taken particular care to document gender issues in each of its chapters.

A second important advance has been in the awareness that sex and gender-related variables impact on the pathogenesis of mental disorders. As above, such mechanisms may range from the biological to the cultural. Puberty, the menstrual cycle, pregnancy, and the menopause are important precipitants for onset, exacerbation, recurrence and relapse of a number of mental disorders, including several of the anxiety and related disorders. These events certainly involve complex changes in hormonal profiles, and in multiple downstream aspects of neurocircuitry and neurochemistry (McEwen 2014). It is also notable that girls demonstrate more internalizing coping styles and more anxiety than boys; suggesting the importance of developmental factors in contributing to the complex array of factors involved in pathogenesis of anxiety and related disorders (Altemus et al. 2014). At the same time it is important to emphasize that such differences are not absolute and, indeed, the magnitudes of such differences across gender is small.

A third important advance has been in awareness of the impact of sex and gender-related variables on the pharmacotherapy and psychotherapy of mental illness. There is increased understanding, for example, of pharmacodynamic and pharmacokinetic differences between males and females for a range of different medications. Lower doses of z-drugs, for example, may be required in females. Similarly, psychotherapy of anxiety and related disorders may well need to address gender-related issues. For example, in many places in the world, it may be relatively easier for a woman not to have to do exposure work around agoraphobic concerns; clinicians may need to be particularly encouraging of basic psychotherapy principles under such circumstances.

Key Gaps

At the same time that there have been important advances at the intersection of sex/gender and the anxiety and related disorders, it is also important to emphasize multiple gaps in our understanding.

First, despite the attention of community and clinical studies to sex differences in psychopathology, and despite the attention to gender in DSM-5, at the end of the day sex and gender have not impacted on diagnostic criteria for key serious mental disorders, nor for common mental disorders (American Psychiatric Association 2013). That said, perhaps this is not so much a deficit in understanding as a reasonable approach to enhance the diagnostic validity and clinical utility of the nosology. Thus, for example,

while it behoves the clinician to be aware of telescoping of symptoms in women with certain conditions (e.g. gambling disorder), this does not imply that women have such a distinct symptom profile that they warrant a different diagnostic criteria set.

Second, despite significant research in laboratory, clinical, and community settings on sex and gender-related factors in the pathogenesis of anxiety and related disorders, our knowledge base remains fragmentary. Indeed, it should be noted that for many differences between males and females, we remain uncertain whether these reflect biological or psychosocial mechanisms. While there are clearly differences in brain structure across the sexes, the mechanisms and implications behind such differences are far from clear, and reductionistic conclusions should be avoided. There is a definite need for longitudinal studies of sex and gender-related variables in relationship to psychopathology; this may shed great light on differences between males and females in years to come. There is also a need to focus not only on proximal (psychobiological) mechanisms but also on distal (evolutionary) mechanisms; for example, in women factors that promote reproductive success may also contribute to a range of health problems (Jasienska 2013).

Third, despite many advances in the prevention and treatment of anxiety and related disorders, it is remarkable how little is known about what can be done specifically to improve male or female clinical outcomes during the management of anxiety and related disorders. It is again possible that this reflects not so much a lack of knowledge about appropriate pharmacotherapy and psychotherapy of anxiety and related disorders, as the fact that the treatments provided are substantially similarly across gender. This is not to downplay the need and scope for much further development of this important area of investigation

Conclusion

In recent decades there has been growing awareness of sex and gender-related variables in both the basic and clinical context. During this time there has also been growing work on anxiety and related disorders, and a growing number of women have entered the professional workforce of psychiatry and clinical psychology. A volume on the intersection between sex/gender and anxiety-related disorders therefore seems very timely; the prism of sex and gender provides an important perspective on these prevalent and disabling disorders. This volume will cover a broad range of conditions, and will attempt to synthesize the state of the art knowledge in this area. In subsequent chapters leading authorities will address each of the major anxiety disorders, obsessive-compulsive and related disorders, and trauma- and stressor-related disorders.

At the same time, despite important advances it is remarkable that so much remains unknown. In the laboratory context, male rats have been a model organism for many years, and there is a real need to include female rats in experiments (Clayton and Collins 2014). In the clinical context, it is clear that women suffer much more than men from anxiety and related disorders, and while some of the

contributing factors to this phenomenon have been investigated, many others have not. Historically, psychiatry has at times had a patriarchal and condescending approach to women. Going forwards, it must take sex and gender issues with utmost seriousness. We hope that this volume makes one contribution, albeit relatively restricted, to this important goal.

Dan J. Stein and Bavi Vythilingum

References

- Altemus M et al (2014) Sex differences in anxiety and depression clinical perspectives. *Front Neuroendocrinol* 35(3):320–330
- American Psychiatric Association (2013) *Diagnostic and statistical manual of mental disorders*, 5th edn. Arlington: American Psychiatric Publishing Inc
- Baxter AJ et al (2013) Global prevalence of anxiety disorders: a systematic review and meta-regression. *Psychol Med* 43(5):897–910
- Clayton JA, Collins FS (2014) Policy: NIH to balance sex in cell and animal studies. *Nature* 509(7500):282–283
- Jasienska G (2013) *The fragile wisdom: an evolutionary view on women's biology and health*. Cambridge, MA: Harvard University Press
- McEwen BS (2014) Sex, stress and the brain: interactive actions of hormones on the developing and adult brain. *Climacteric* 17(S2):18–25
- Seedat S et al (2009) Cross-national associations between gender and mental disorders in the World Health Organization World Mental Health Surveys 66(7):785–795
- Stein DJ et al (2011) Meta-structure issues for the DSM-5: how do anxiety disorders, obsessive-compulsive and related disorders, post-traumatic disorders, and dissociative disorders fit together? *Curr Psychiatry Rep* 13(4):248–250

Generalized Anxiety Disorder

Katja Beesdo-Baum and Kevin Hilbert

A 32-year old woman complains of permanent nervousness, irritability and inability to relax. She has been working as a nurse on an oncology unit since she returned from maternity leave with her now 2-year old son. During shifts, she has trouble concentrating on her work because of concerns relating to her son's wellbeing in day care. She has also fears about possible accidents or harm coming to him even when he is with his father or the grandparents. "What if he runs on the street and gets caught by a car? What if they have an accident when driving home from kindergarten?" She therefore checks her mobile phone frequently or calls to hear that everything is o.k. The time she is spending with her family is usually well organized and any special events such as going on a trip are planned with extensive lists in advance. Situations outside of her personal control such as a short-notice business trip of her husband usually lead to intense distress. Just recently, related to adverse experiences of dying patients at work, she also developed excessive worries about severe illnesses befalling her son, herself or her husband which could lead to destruction of her family.

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