

Geriatric Mental Health Alliance
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ANXIETY DISORDERS IN OLDER ADULTS

Anxiety is a state of tension and apprehension. It is an uncomfortable but ordinary response to a perceived threat or danger. As such, it is a normal part of life. However, anxiety is defined as a mental health problem when:

- It is experienced with great intensity and frequency;
- It interferes with psychosocial functioning or daily activities;
- It occurs when there is no real danger or threat.

Anxiety is the most common mental health problem in the United States. More than 11% of older adults are coping with at least one anxiety disorder in any given year, and older women are twice as likely to have an anxiety disorder than are older men. The most prevalent anxiety disorders among older adults are Generalized Anxiety Disorders (7%).

It is common for older adults to worry about health, family, finances, and their own mortality. Individuals who suffer from anxiety usually are not psychotic, can form relationships, and can function in social roles. However, some anxious older adults are unable to either work, volunteer, or participate in community life without great discomfort.

Examples of common phrases used by anxious elders may include:

- I worry so much, I put off solving my problems because I can't handle it.
- This fear comes over me, and I get short of breath, my heart pounds, and I think I am going to die.
- I feel very nervous around other people, and I try to avoid having any attention called to me.
- I can't get these thoughts out of my head, and they make me very anxious.
- Ever since the accident, I can't stop thinking about it.

Older adults may express anxiety solely in terms of somatic symptoms, or feelings of physical distress. Indeed, a variety of co-morbid medical conditions worsen with anxiety, including hypoglycemia, hypertension, and heart disease. Increased levels of anxiety are also associated with more use of pain medications.

Common physical complaints of older adults with anxiety include headaches, stomach pain, chest pains, and fatigue. When such symptoms have been assessed by health care providers, and no underlying medical causes could be found, screening for anxiety is recommended.

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Anxiety disorders easily can be misunderstood as depression. These disorders may:

- Result in negative thoughts and feelings, such as helplessness and hopelessness;
- Lower self-esteem and confidence, leading to further disappointment and frustration;
- Lead to avoidance of places or situations, resulting in social isolation;
- Strain relationships with others by creating feelings of stress, guilt and shame.

Before diagnosing an anxiety disorder, thorough screening and assessment is always required!

Some helpful guidelines in working with an older adult who may have an anxiety disorder include:

- Determining the history of the presenting symptoms over time;
- Asking about life events or challenges that cause stress;
- Asking about methods for coping with daily challenges;
- Using self-report assessment instruments for treatment planning and to assess changes in symptoms over time.

Without proper assessment and intervention, the consequences of anxiety disorders for older adults may include onset or worsening of disability, decreased quality of life, and greater use of health services.

Careful explanations of conditions and symptoms, treatment options, and available medications can help to support treatment compliance and lead to better outcomes.

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This tip sheet on geriatric mental health is based on the Geriatric Mental Health Alliance of New York's best practices lecture given by Zvi Gellis, PhD in September, 2005.