Biological Treatment of Panic Disorder

- Medications: Benzodiazepines, antidepressants, beta-blockers
  - High relapse rates after cessation of drug therapy

Cognitive-Behavioral Treatment of Panic Disorder

- Promotes self-efficacy
- General steps
  1. Educating the client about panic disorder
  2. Identifying and correcting catastrophic thinking
  3. Treating client to self-induce physiological symptoms in order to extinguish the conditioning
  4. Encouraging client to face the symptoms

Generalized Anxiety Disorder (GAD)

- Persistent, high levels of anxiety and excessive, hard-to-control worry over life circumstances
- DSM-5 diagnosis criteria
  - Symptoms must be present on the majority of days for six months
  - Causes significant impairment in life activities
- Develops gradually & often begins in childhood or adolescence

Etiology of GAD

- Biological dimension
Chapter 5

- Some stressors that influence GAD: poverty, poor housing, prejudice, discrimination, and peer relationship conflicts

Treatment of GAD
- Drug therapy
  - Benzodiazepines
    - Issues with dependence
  - Antidepressants
    - Lower risk of dependence
- Cognitive-behavioral therapy
  - Effective psychological treatment (60% showed significant symptom reduction that persisted 12 months after treatment)

**Obsessive-Compulsive & Related Disorders**
- Obsessive-compulsive disorder: consistent, anxiety producing thoughts or images; overwhelming need to engage in activities or mental acts to counteract anxiety or prevent occurrence of dreaded event
- Hoarding disorder: inability to discard items regardless of their value

**Common Obsessions and Compulsions**
- Obsessions: contamination, harm, exactness
- Compulsions: checking, cleaning/washing, repeating

**Other Types of OCD-Related Disorders**
- Body dysmorphic disorder: preoccupation with a perceived physical defect; symptoms cause significant distress or impairment in life activities
- Hair-pulling disorder: recurrent and frequent hair-pulling despite repeated attempts to stop
- Skin-picking disorder: results in skin lesions

**Etiology of Obsessive-Compulsive & Related Disorders**
- Heredity is involved
- Endophenotype characteristics for OCD
  - Impairment in: decision making, planning, mental flexibility
- Increased metabolic activity in frontal lobe of left hemisphere of the brain

**Multipath Model of Obsessive-Compulsive Disorder**