



Anxiety Disorders

The essential features of panic attacks remain unchanged, although the complicated *DSM-IV* terminology for describing different types of panic attacks (that is, situationally bound/cued, situationally predisposed, and unexpected/uncued) is replaced with the terms “unexpected” and “expected” panic attacks. Panic disorder and agoraphobia are unlinked in *DSM-5*. Thus, the former *DSM-IV* diagnoses of “panic disorder with agoraphobia,” “panic disorder without agoraphobia,” and “agoraphobia without history of panic disorder” are now replaced by two diagnoses, namely, panic disorder and agoraphobia, each with separate criteria. The core features of specific phobia and social anxiety disorder remain the same. In *DSM-IV*, selective mutism and separation anxiety disorder were classified in disorders usually first diagnosed in infancy, childhood, or adolescence. They are now classified as anxiety disorders.

These questions are from *DSM-5 Self-Exam Questions: Test Questions for the Diagnostic Criteria*, which will be available in August. It may be pre-ordered from American Psychiatric Publishing at <http://www.appi.org/SearchCenter/Pages/SearchDetail.aspx?ItemId=62467>. The questions were developed under the leadership of Philip Muskin, M.D., a professor of clinical psychiatry at Columbia University College of Physicians and Surgeons. The book contains 500 questions for all the categories of psychiatric disorders and includes Section III.

1. Which of the following disorders is included among the anxiety disorders in *DSM-5*?

- a) obsessive-compulsive disorder
- b) posttraumatic stress disorder
- c) acute stress disorder

- d) panic disorder with agoraphobia
- e) separation anxiety disorder

Correct Answer: E. separation anxiety disorder

Rationale: The anxiety disorders section contains a number of additions and deletions when compared with the prior edition. A number of anxiety disorders formerly classified by *DSM-IV* as “Disorders Usually First Diagnosed in Infancy and Childhood or Adolescence” are now included among the anxiety disorders, including separation anxiety disorder and selective mutism. *DSM-5* removed several disorders from the anxiety disorders, including obsessive-compulsive disorder, posttraumatic stress disorder, and acute stress disorder. This reorganization was the result of a scientific review that concluded that these were distinct disorders that were not sufficiently described by the presence of anxiety symptoms. Agoraphobia has been separated from panic disorder as a distinct disorder, which includes a panic attack specifier when they co-occur.

2. A 65-year-old woman reports being housebound despite feeling physically healthy. She reports falling while shopping several years ago; although she sustained no injuries, the situation was so distressing to her that she becomes extremely nervous when she has to leave her house unaccompanied. She has no children and few friends. She is very distressed by the fact that she has few opportunities to venture outside her home. Which of the following disorders best accounts for her disability?

- a. specific phobia – situational subtype
- b. social anxiety disorder
- c. posttraumatic stress disorder
- d. agoraphobia

- e. adjustment disorder

Correct Answer: D. agoraphobia.

Rationale: The essential feature of agoraphobia is marked fear or anxiety triggered by real or anticipated exposure to a variety of situations (using public transportation, going to open or public spaces, for example) from which escape or help might not be available. *DSM-IV* treated agoraphobia as feature of panic disorder, and individuals do frequently report a fear of having a panic attack in the feared situations; however, there are other incapacitating situations that could cause similar fear, including a fear of falling or of incontinence. This disorder can be very similar to other phobias such as Social anxiety disorder and specific phobia—situational subtype; however, the focus of the fear is not the situation itself, but rather the fear that an incapacitating event may occur during the situation. Agoraphobia does not have the cluster of symptoms associated with posttraumatic stress disorder and is not merely indicative of poor adjustment to a uniquely stressful situation.

3. A 35-year-old man is in danger of losing his job; the job requires frequent long-range traveling, and for the past year he has avoided flying. Two years prior, he travelled on a particularly turbulent flight, and although he was not in any real danger, he was convinced that the pilot minimized the risk and that the plane almost crashed. He flew again one month later, and although he experienced a smooth flight, the anticipation of turbulence was so distressing that he experienced a panic attack during the flight. He has not flown since. Which of the following disorders is the most likely cause of his anxiety?

- a. agoraphobia
- b. acute stress disorder
- c. specific phobia–situational type
- d. social anxiety disorder
- e. panic disorder

Correct answer: C. specific phobia–situational type

Rationale: Specific phobia is characterized by the marked fear or anxiety of a specific object or situation, which is perceived as being dangerous. This differs from agoraphobia, in which the focus of the anxiety is on the possibility of having panic or other incapacitating symptoms, or social anxiety disorder in which the focus is on being scrutinized by others. Trauma-related disorders should be considered in the differential; however, the lack of any real danger makes this unlikely, and the time course is not compatible with the criteria for acute stress disorder. Although the man did experience a panic attack, patients with many disorders, including specific phobia, can experience such attacks. Panic disorder should be diagnosed only when the attacks are unexpected and not otherwise explained by other disorders. **PN**