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## Anxiety in Children: What GPs need to know

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### What questions will be covered?

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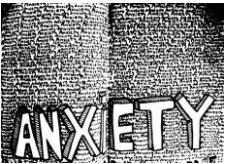
- Understanding anxiety disorders in children
  - Are Anxiety Disorders something GPs should worry about?
  - What kinds of presentations are typically seen in children?
  - How young can anxiety disorders present?
  - What you can look out for in a GP setting?
  - Are there any irreversible causes to look for?
- Treating and preventing anxiety disorders in children
  - When to refer?
  - What treatments are available?
  - What evidence is there that the treatments work?
  - Is there a role for medication?
  - What treatment would a clinical psychologist deliver?
  - How can I help a child requesting disability provisions for exams?

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### Why Anxiety Disorders?

ARE THEY SOMETHING GPs SHOULD WORRY ABOUT?

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- Earliest age of onset
- Myth “He’ll grow out of it”
- Higher risk for depression
- Higher risk for suicide
- Higher risk for alcohol & drug problems

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## Understanding anxiety disorders in children

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### Burden to society

ANXIETY DISORDERS

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- Mental Disorders third largest impact on disease burden
- Anxiety Disorders cost Australia **\$10.4 billion** each year
- Preventable AND Treatable

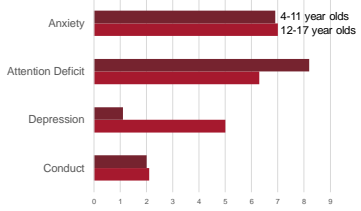


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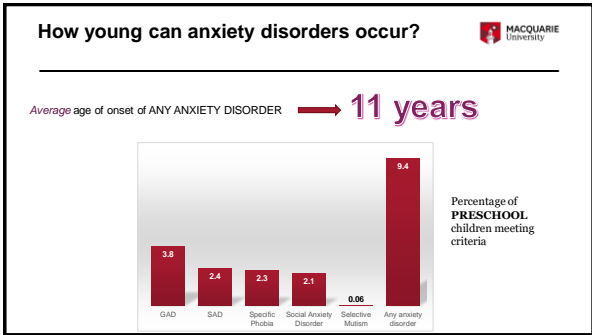
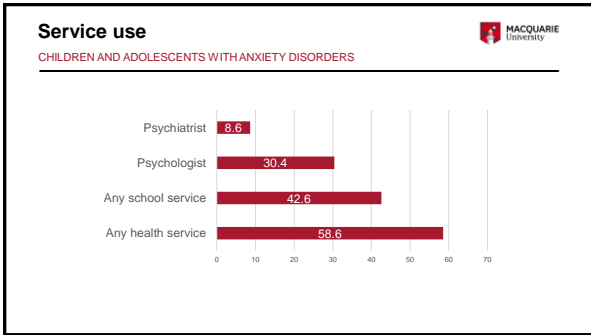
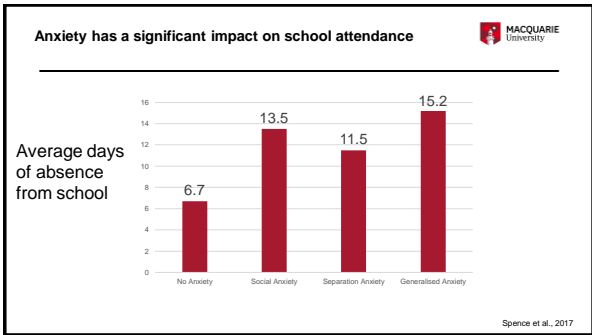
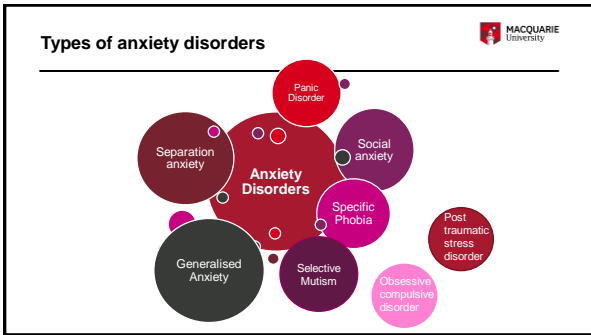
### 12-month prevalence of mental disorders in Australia

RESULTS FROM THE NATIONAL CHILD AND ADOLESCENT MENTAL HEALTH SURVEY

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Lawrence et al., 2015



### Diagnosis in a GP setting

WHAT TO LOOK FOR

- Significant impact on the child/family life
- Avoidance – missing school, disability provision request for exams
- Physical complaints (stomach aches, muscle aches, tired, difficulty sleeping)
- Excessive reassurance
- Parental anxiety
- Exam stress

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### Comorbidities

WHAT TO LOOK OUT FOR

- Anxiety frequently precedes or is comorbid with
  - depression
  - substance use problems
  - eating disorders
- Anxiety often highly comorbid in children with ASD

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## How Does a Child Develop Anxiety?

Are there any reversible causes GPs should look for?



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## Treating and preventing anxiety disorders in children

## When to refer



- "When the anxiety is causing significant interference in the child's or the family's life"
- Consider prevention



## What treatments are available?



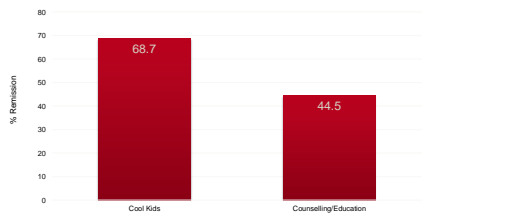
- Cognitive Behavioural Treatment is the treatment of choice
  - First line of treatment
  - 10 -16 sessions
  - Child and Parents
  - Available as online or face-to-face

**COOLKIDS**



**COOLKIDS**

CBT LEADS TO BETTER OUTCOMES THAN COUNSELLING/EDUCATION

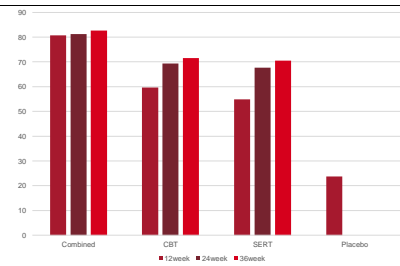


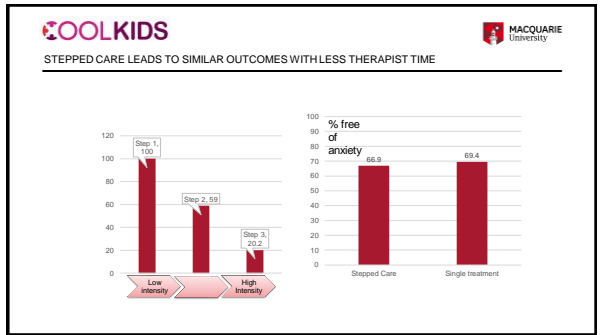
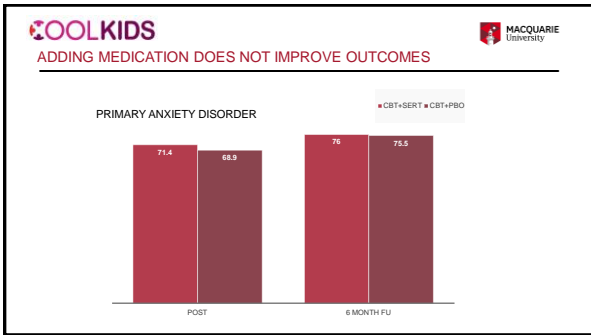
Hudson et al., 2009

## Is there a role for medication?



CAMS TRIAL





- What would a clinical psychologist do?** MACQUARIE University
- Cognitive restructuring
  - Gradual exposure
  - Parent management
  - Coping skills:
    - Relaxation
    - Problem solving
    - Assertiveness
    - Social Skills

**Example of Detective thinking** MACQUARIE University

Area	Student Thinking	Corrected/Expanded Ideas
What is the problem?	"There is no one to help the girl run up"	"There is no one to help the girl run up"
What is the cause?	"She is afraid of the stairs"	"She is afraid of the stairs"
What is the effect?	"She is not going to school"	"She is not going to school"
What is the solution?	"She should be helped"	"She should be helped"
What is the result?	"She is happy"	"She is happy"

**Gradual Exposure** MACQUARIE University

**OVERCOMING FEAR BY FACING FEAR**

- Encourage facing fears in small steps
- Allow fear to be experienced
- Allow learning of new information
- Repeat each "step" to enable learning
- Reward each step
- Success is related to how many "challenging exposures"

**Developing a Fear Hierarchy** MACQUARIE University

Rank	Item	Rating (0-10)
1	Thinking about stairs	1
2	Watching someone else climb	2
3	Standing at the bottom of the stairs	3
4	Walking up the stairs	4
5	Running up the stairs	5
6	Walking up the stairs with a friend	6
7	Running up the stairs with a friend	7
8	Walking up the stairs with a friend	8
9	Running up the stairs with a friend	9
10	Walking up the stairs with a friend	10

What doesn't he do? (e.g. jump, walk, run?)

What is the goal?

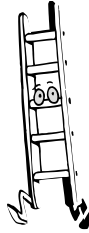
What is the result?

## A STEPLADDER APPROACH



### Fear of lifts

1. Observing a large shopping centre lift
2. Observe a friend go in a lift up one floor.
3. Walk inside a lift and back out again
4. Stay inside a lift and press the one floor down.
5. Stay inside a lift and press two floors.
6. Practice 1-5 in a different lift
7. Stay inside for 2 minutes
8. Stay inside for 5 minutes.
9. Stay inside the lift for 10 minutes
10. Stay inside for 30 minutes
11. Stay inside and press the stop alarm
12. Practice 7-11 in a different lift



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## Parent management



- Encourage approach
- Reduce accommodation
- Pay attention to courageous behavior
- Change the conversation (reduce reassurance)



## Disability provisions



### The role of the GP

Develop solutions for 'approach'



## TAKE HOME POINTS



- Anxiety is the most common mental disorder in young people
- Take anxiety problems in young people seriously
- CBT is the recommended treatment of choice
- Consider low intensity options for motivated families
- Avoidance leads to a vicious cycle
- Fight fear by gradually facing fear
- Develop long term solutions for approach

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## Thinking Points



- Consider some strategies, policies or practices that you could put in place that may encourage 'approach' rather than 'avoidance.'



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## Resources at Macquarie University



[www.mq.edu.au/ceh](http://www.mq.edu.au/ceh)



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