

International Journal of Advanced Psychiatric Nursing

E-ISSN: 2664-1356 P-ISSN: 2664-1348

www.psychiatricjournal.net

IJAPN 2025; 7(1): 19-20 Received: 15-10-2024 Accepted: 20-11-2024

Vibba Lal

Ph.D. Scholar, Department of Psychiatric Nursing, Shri Jagdishprasad Jhabarmal Tibrewala University, Jhunjhunu, Rajasthan, India

Generalized anxiety disorder

Vibha Lal

DOI: https://doi.org/10.33545/26641348.2025.v7.i1a.196

Abstract

Generalized anxiety disorder (GAD) is characterized by excessive and uncontrollable worries and associated somatic and cognitive symptoms. Generalized anxiety disorder is a mental health disorder that produces fear, worry, and a constant feeling of being overwhelmed. It is characterized by excessive, persistent, and unrealistic worry about everyday things. This activity illustrates the evaluation and management of generalized anxiety disorder and explains the inter professional team's role in managing patients with this condition. The aim of the current chapter is to present a review of theoretical models and empirical findings on the etiology and maintenance of GAD.

Keywords: Generalized anxiety disorder, excessive worry, somatic symptoms, cognitive symptoms

Introduction

It's normal to feel anxious from time to time, especially if your life is stressful. However, excessive, ongoing anxiety and worry that are difficult to control and interfere with day-to-day activities may be a sign of generalized anxiety disorder.

Generalized anxiety disorder can be developing in child or an adult. Generalized anxiety disorder has symptoms that are similar to panic disorder, obsessive-compulsive disorder and other types of anxiety, but they are all different conditions.

Generalized anxiety disorder is one of the most common mental disorders. Up to 20% of adults are affected by anxiety disorders each year. Generalized anxiety disorder is characterized by persistent, excessive, and unrealistic worry about everyday things. This worry could be multifaceted, including financial, family, health, and future concerns. It is excessive, difficult to control, and is often accompanied by many nonspecific psychological and physical symptoms. Excessive worry is the central feature of generalized anxiety disorder.

Case Report

35 years male client admitted to psychiatric ward with complaints of fear, worry, and a constant feeling of being overwhelmed. It is characterized by excessive, persistent, and unrealistic worry about everyday things from the past 3 months. This worry could be multifaceted, including financial, family, health, and future concerns. It is excessive, difficult to control, and is often accompanied by many nonspecific psychological and physical symptoms.

Investigation

HB = 15.7 RBC = 5 MEQ/L TLC = 4200 Platelet Count = 300000 PVC = 25.3

Physical Examination

On physical examination client is having Palpitation
Sweating
Trembling
Shortness of breath
Chest pain

Corresponding Author: Vibha Lal

Ph.D. Scholar, Department of Psychiatric Nursing, Shri Jagdishprasad Jhabarmal Tibrewala University, Jhunjhunu, Rajasthan, India

Diagnosis

Steps to help diagnose generalized anxiety disorder may include

- Psychological evaluation: This includes discussing your feeling, thoughts, symptoms, and behaviour patterns to determine if client have generalized anxiety disorder that interfere with clients quality of life, this may include with taking to client 's family or friends
- **Diagnostic criteria for GAD:** Doctor may use criteria in the diagnostic and statistical Manual of mental disorders (DSM-5), published by the American psychiatric Association.
- Physical exam: This may be done to help rule out other problems that could by causing clients and to check for any related complication

Discussion

Generalized anxiety disorder is characterized by persistent, excessive, and unrealistic worry about everyday things. GAD can have a profound effect on a person's life.

Cognitive behaviour therapy, anxiety management technique include relaxation training, slow breathing techniques, mindfulness meditation and hyperventilation.

Conclusion

Anxiety management techniques can help a person to manage their own symptoms. Such techniques can include relaxation training, slow breathing techniques, mindfulness meditation and hyperventilation control. These techniques require regular practice and are most effective if used together with a cognitive behaviour therapy treatment program. Prioritize issues in your life. Client can reduce anxiety by carefully managing your time and energy. Avoid unhealthy substance use. Alcohol and drug use and even nicotine or caffeine use can cause or worsen anxiety. If client addicted to any of these substances, quitting can make you anxious. If you can't quit on your own, see your doctor or find a treatment program or support group to help you.

Conflict of Interest

Not available

Financial Support

Not available

References

- American Psychiatric Association. Diagnostic and statistical manual of mental disorders: DSM-5. 5th ed. Washington: American Psychiatric Association; 2013. p. 222. doi:10.1176/appi.books.9780890425596. ISBN 978-0-89042-555-8.
- Barić H, Đorđević V, Cerovečki I, Trkulja V. Complementary and alternative medicine treatments for generalized anxiety disorder: systematic review and meta-analysis of randomized controlled trials. Adv Ther. 2018 Mar;35(3):261-288. doi:10.1007/s12325-018-0680-6. ISSN 0741-238X. PMID 29508154. S2CID 3939726.
- Craske MG, Stein MB. Anxiety. Lancet. 2016 Dec 17;388(10063):3048-3059. doi:10.1016/S0140-6736(16)30381-6. ISSN 1474-547X. PMID 27349358. S2CID 208789585.
- 4. Craske MG, Stein MB. Anxiety. Lancet. 2016 Jun 24;388(10063):3048-3059.

- doi:10.1016/S0140-6736(16)30381-6. PMID 27349358. S2CID 208789585.
- DeMartini J, Patel G, Fancher TL. Generalized anxiety disorder. Ann Intern Med. 2019 Apr 2;170(7):ITC49-ITC64. doi:10.7326/AITC201904020. PMID 30934083. S2CID 91187957.
- American Psychiatric Association. Diagnostic and statistical manual of mental disorders: DSM-5. 5th ed. Washington, D.C.: American Psychiatric Association; 2013. p. 222. ISBN 978-0-89042-554-1.
- 7. Geddes J, Price J, Gelder RM, Mayou R. Psychiatry. 4th ed. Oxford: Oxford University Press; 2012. p. 287. ISBN 978-0-19-923396-0.
- 8. National Institute of Mental Health. Generalized anxiety disorder: when worry gets out of control. [cited 2019 May 30]. Available from: https://www.nimh.nih.gov.
- Etkin A, Prater KE, Schatzberg AF, Menon V, Greicius MD. Disrupted amygdalar subregion functional connectivity and evidence of a compensatory network in generalized anxiety disorder. Arch Gen Psychiatry. 2009 Dec;66(12):1361-1372. doi:10.1001/archgenpsychiatry.2009.104. PMID 19996041.
- Stern TA. Anxiety disorders. In: Massachusetts General Hospital comprehensive clinical psychiatry. 2nd ed. London: Elsevier; 2015. p. 899-912. ISBN 978-0-323-32899-9. OCLC 905232521.
- 11. Spitzer RL, Kroenke K, Williams JB, Löwe B. A brief measure for assessing generalized anxiety disorder. Arch Intern Med. 2006 Jun 12;166(10):1092-1097. doi:10.1001/archinte.166.10.1092. PMID 16717171.
- 12. Schalet BD, Cook KF, Choi SW, Cella D. Establishing a common metric for self-reported anxiety: linking the MASQ, PANAS, and GAD-7 to PROMIS anxiety. J Anxiety Disord. 2014 Jan;28(1):88-96. doi:10.1016/j.janxdis.2013.11.006. ISSN 1873-7897. PMC 4046852. PMID 24508596.

How to Cite This Article

Lal V. Generalized anxiety disorder. International Journal of Advanced Psychiatric Nursing. 2025;7(1):19-20.

Creative Commons (CC) License

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work noncommercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.