

ANXIETY DISORDERS

Composite Diagnostic Evaluation

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Development of CODE-AD

It was in the Third Edition of the Diagnostic and Statistical Manual of the American Psychiatric Association (1980) that the term anxiety disorder was first used in reference to a category of clinical syndromes (providing for an Axis I diagnosis) distinctive from the personality disorders (i.e., Axis II diagnoses). It included two groups of disorder, i.e., phobic disorders, consisting of agoraphobia, social phobia and simple phobia – diagnoses based on the content of the experience which triggers the fear response – and anxiety states, consisting of panic disorder, generalized anxiety disorder, obsessive compulsive disorder and post-traumatic stress disorder – a diagnosis based on a stressful life experience (event) in the patient's past (Table 4)

In prior classification, such as the Ninth Edition of the International Classification of the World Health Organization, the three prototypes of anxiety disorders, i.e., anxiety states, phobic states and obsessive compulsive disorder, were an integral part of the class of Neurotic Disorders, Personality Disorders and Other Nonpsychotic Mental Disorders. As such, they were conceptualized as conditions which develop in subjects under stress with personality disorder (Table 5).

Table 4

Anxiety Disorders

I. PHOBIC DISORDERS

Agoraphobia with Panic Attack
Agoraphobia without panic Attack
Social Phobia
Simple Phobia

II. ANXIETY STATES

Panic Disorder
Generalized Anxiety Disorder
Post-traumatic Stress Disorder Acute
Post-traumatic Stress Disorder
Chronic or Delayed

Table 5

**NEUROTIC DISORDERS, PERSONALITY DISORDERS AND OTHER
NONPSYCHOTIC MENTAL DISORDERS**

**Anxiety States
Hysteria
Phobic State
Obsessive-compulsive Disorder
Neurotic Depression
Neurasthenia
Depersonalization Syndrome
Hypochondriasis**

**Neurotic Disorders, Personality Disorders and Other Nonpsychotic Mental Disorders in
the ICD-9.**

Similar to the DSM-III, in the DSM-III-R of the American Psychiatric Association, anxiety disorders remain Axis I diagnoses. In variance with the DSM-III, however, anxiety disorders are no longer divided into two groups, but separated into seven distinct syndromes (Table 6).

Unlike the ICD-9, DSM-III and DSM-III-R, in the ICD-10, anxiety disorders, i.e., phobic anxiety disorders and other anxiety disorders, together with obsessive-compulsive disorder, stress related and adjustment disorder, dissociative disorder and somatoform disorder, are an integral part of neurotic, stress-related and somatoform disorders (Table 7).

Considering that anxiety disorders and their forms and subforms are conceptualized differently and identified by different diagnostic criteria in the various classifications, it was decided to develop a Composite Diagnostic Evaluation of Anxiety Disorders (CODE-AD), suitable for the screening for and identification of anxiety disorders; for comparing diagnostic concepts in the DSM-III-R and ICD-10; and for determining whether the anxiety disorder identified qualifies for a nosologic category.

The diagnostic instrument for screening, the first component of CODE-AD, consists of 20 variables (Table 8), which are assessed in terms of “present” or “absent”; a glossary of definitions and a decision tree (Table 9). By employing this screening instrument, a decision can be reached whether or not the disorder in question displays characteristic features of one or more of seven anxiety diseases (Table 10).

Table 6

ANXIETY DISORDERS

**Panic Disorder with Agoraphobia
Panic Disorder without Agoraphobia
Social Phobia
Simple Phobia
Generalized Anxiety Disorder
Obsessive Compulsive Disorder
Post-traumatic Stress Disorder**

Anxiety disorders in the DSM-III-R

Table 7

NEUROTIC, STRESS-RELATED AND SOMATOFORM DISORDERS

- I. Phobic anxiety disorders**
 - Agoraphobia without panic disorder**
 - Agoraphobia with panic disorder**
 - Social phobia**
 - Specific phobia**
- II. Other anxiety disorders**
 - Panic disorder**
 - Generalized anxiety disorder**
 - Mixed anxiety and depressive disorder**
- III. Obsessive-compulsive disorder**
 - Predominantly obsessive**
 - Predominantly compulsive**
 - Mixed**
- IV. Reaction to severe stress, and adjustment disorders**
 - Acute stress reaction**
 - Post-traumatic stress disorder**
 - Adjustment disorder**
 - Dissociative disorder**
 - Somatoform disorder**

Neurotic, stress-related and somatoform disorders in the ICD-10.

Table 8

CODE-AD VARIABLES

1. Agoraphobia
2. Anxious Mood
3. Anxious Nervousness
4. Autonomic Hyperactivity
5. Avoidance Behavior
6. Compulsive Acts
7. Feared Endurance
8. Increased Arousal
9. Motor Tension
10. Numbing of General Responsiveness
11. Obsessive Thoughts
12. Panic Attacks
13. Persistent Avoidance
14. Persistent Reexperience
15. Phobic Fear
16. Psychic Trauma
17. Psychogenic Amnesia
18. Recurrent Panic Attack
19. Social Phobia
20. Spontaneous Panic Attacks

Variables employed in screening for anxiety disorders.

Table 9

Decision Tree

<u>Variables</u>	<u>No.</u>	<u>Diagnosis</u>
1. Psychic trauma	16	
Present proceed to 2. Absent proceed to 7.		No PTSD
2. Increased arousal	8	
3. Numbing of general responsiveness	10	
4. Persistent avoidance	13	
5. Persistent re-experience	14	
6. Psychogenic amnesia	17	
At least 2 of 5 present, STOP, then proceed to 7		PTSD
Less than 2 of 5 present, proceed to 7.		No PTSD

7. Compulsive acts	6	
8. Obsessive thoughts	11	
At least 1 of 2 present, Stop then proceed to 9. Both absent, proceed to 9.		OCD NO OCD
9. Anxious nervousness	3	
10. Anxious mood	2	
At least 1 of 2 present, proceed to 11. Both absent, proceed to 14.		No GAD
11. Automatic hyperactivity	4	
12. Increased arousal	8	
13. Motor tension	9	
At least 2 of 3 present, STOP, then proceed o 14. Less than 2 of 3 present, proceed to 14.		GAD No GAD
14. Panic attack	12	
Present, proceed to 15. Absent, proceed to 17.		No PD
15. Recurrent panic attacks	18	
16. Spontaneous panic attacks	20	
Both present, STOP, then proceed to 17. Less than 2 present, proceed to 17.		PD NO PD

Table 9 (cont.)

Decision Tree

<u>Variables</u>	<u>No.</u>	<u>Diagnosis</u>
17. Agoraphobia	---	
Present proceed to 18 Absent proceed to 20		No APP
18. Avoidance behavior	5	
19. Feared endurance	7	
At least 1 of 2 preset, STOP, then proceed to 20. Both absent, proceed to 20.		AP No AP
20. Social phobia	19	

Present proceed to 18		
Absent proceed to 20		NO SP
21. Avoidance behavior	5	
22. Feared endurance	7	
At least 1 of 2 present, STOP, then proceed to 23		SP
Both absent, proceed to 23.		No SP
23. Phobic fear	15	
Present proceed to 24		No SSP
Absent, STOP		
24. Avoidance behavior	5	
25. Feared endurance	7	
At least 1 of 2 present, STOP.		SSP
Both absent, STOP.		No SSP

Diagnostic decision tree used in the screening for anxiety disorders.

Table 10

Anxiety Disorders

Generalized Anxiety Disorder	GAD
Obsessive Compulsive Disorders	OCD
Panic Disorder	PD
Agoraphobia	AP
Social Phobia	SP
Simple Phobia	SSP
Post-Traumatic Stress Disorder	PTSD

The seven conditions included under anxiety disorders in the DSM-III-R.

The diagnostic instrument for the comparison of diagnostic concepts in the DSM-III-R and ICD-10, the second component of CODE-AD, consists of a semi-structured interview which can be administered with or without the use of a computer. Employment of the semi-structured interview (Table 11) generates the information necessary to decide whether the disorder identified by the screening instrument fits diagnostic criteria of one or more of the seven anxiety disorders of the DSM-III-R and the corresponding diagnoses in the ICD-10 (Table 12).

Finally, the diagnostic instrument for the determination of whether the disorder identified by the screening instrument qualifies for a nosologic entity, the third component of CODE-AD, consists of variables which are assessed in terms of "present" or "absent"; a glossary of definitions; and a decision tree which indicates whether the disorder fits any of the accepted diagnoses of anxiety disease (Table 13) and, if it does, whether it qualifies as a nosologic entity (Table 14).

Table 11

31.	<u>Dr.-Pt.</u>	A discrete, well-defined episode of intense fear of discomfort is commonly referred to as a panic attack. Have you ever experienced one?		
	If Yes, proceed to 32.		DSM-III-R:	<u>No PD</u>
	If No, STOP, then proceed to C 69.		ICD-10:	<u>No PD</u>
32.	<u>Dr.-Pt.</u>	Did it occur only immediately before or after exposure to a dangerous or life-threatening situation or I a situation that has almost always caused you anxiety?		
	If Yes, STOP, then proceed to C 69.		DSM-III-R:	<u>No PD</u>
	If No, proceed to 33.		ICD-10:	<u>No PD</u>
33.	<u>Dr.-Pt.</u>	Did it occur only in situations when you were the focus (center) of the attention of others?		
	If Yes, STOP, then proceed to C 69.		DSM-III-R:	<u>No PD</u>
	If No, proceed to 34.		ICD-10:	<u>No PD</u>
34.	<u>Dr.-Pt.</u>	Did it occur only when you were under physical strain by markedly exerting yourself?		
	If Yes, STOP, then proceed to C 69.		DSM-III-R:	<u>No PD</u>
	If No, proceed to 35.		ICD-10:	<u>No PD</u>
35.	<u>Dr.-Pt.</u>	A discrete, well-defined episode of intense fear of discomfort is commonly referred to as a panic attack. Have you ever experienced one?		
	If Yes, proceed to 36.		DSM-III-R:	<u>No PD</u>
	If No, proceed to 37.		ICD-10:	<u>No PD</u>

Illustration of the semi-structured interview used to determine whether the anxiety disorder identified by the screening interview fits diagnostic criteria of any of the anxiety disorders in DSM-III-R and/or ICD-10.

Table 12

281. Computer Generated: (Check [✓] the one from DSM-III-R and from ICD-10 which apply.)

<u>DSM-III-R</u>	<u>ICD-10</u>
<input type="checkbox"/> No PD <input type="checkbox"/> PD Severe <input type="checkbox"/> PD in Full Remission <input type="checkbox"/> PD Moderate <input type="checkbox"/> PD Mild <input type="checkbox"/> PD in Partial Remission	<input type="checkbox"/> No PD <input type="checkbox"/> PD Severe Degree <input type="checkbox"/> PD Moderate Degree <input type="checkbox"/> PD
<input type="checkbox"/> No AP <input type="checkbox"/> AP Severe <input type="checkbox"/> AP Moderate <input type="checkbox"/> AP Mild <input type="checkbox"/> AP in Partial Remission <input type="checkbox"/> AP in Full Remission	<input type="checkbox"/> No AP <input type="checkbox"/> AP
<input type="checkbox"/> No SP <input type="checkbox"/> SP <input type="checkbox"/> No SSP <input type="checkbox"/> SSP	<input type="checkbox"/> No SP <input type="checkbox"/> SP <input type="checkbox"/> No SSP <input type="checkbox"/> SSP
<input type="checkbox"/> No OCD <input type="checkbox"/> OCD	<input type="checkbox"/> No OCD <input type="checkbox"/> OCD with Mixed Obsessional Thoughts and Acts <input type="checkbox"/> OCD with Predominantly Compulsive Acts
<input type="checkbox"/> No PTSD <input type="checkbox"/> PTSD Delayed Onset <input type="checkbox"/> PTSD	<input type="checkbox"/> No PTSD <input type="checkbox"/> PTSD Delayed Onset <input type="checkbox"/> PTSD
<input type="checkbox"/> No GAD <input type="checkbox"/> GAD	<input type="checkbox"/> No GAD <input type="checkbox"/> GAD

Proceed to 282.

Table 12 (cont.)

282. Computer Generated: (Check [✓] the one from DSM-III-R and from ICD-10 which apply.)

DSM-III-R

ICD-10

_____ PD-Severe with AP	_____ AP with PD Severe Degree
_____ PD-Moderate with AP	_____ AP with PD Moderate Degree
_____ PD-Mild with AP	_____ AP with PD
_____ PD in Partial Remission with AP	
_____ PD in Full Remission with AP	
_____ PD-Severe without AP	_____ PD-Severe Degree
_____ PD-Moderate Without AP	_____ PD-Moderate Degree
_____ PD-Mild without AP	_____ PD
_____ PD in Partial Remission without AP	
_____ PD in Full Remission without AP	
_____ AP without History of PD	_____ AP without PD
_____ No PD and/or AP	_____ No AP and/or PD

Proceed to 282.

282. Computer Generated: (Write out combined – mixed – diagnosis, if present, in DSM-III-R or ICD-10, separately.)

Diagnoses from DSM-III-R and ICD-10 which can be identified by the employment of the semi-structured interview.

Table 13

COMPOSITE DIAGNOSTIC CLASSIFICATION OF ANXIETY DISORDERS

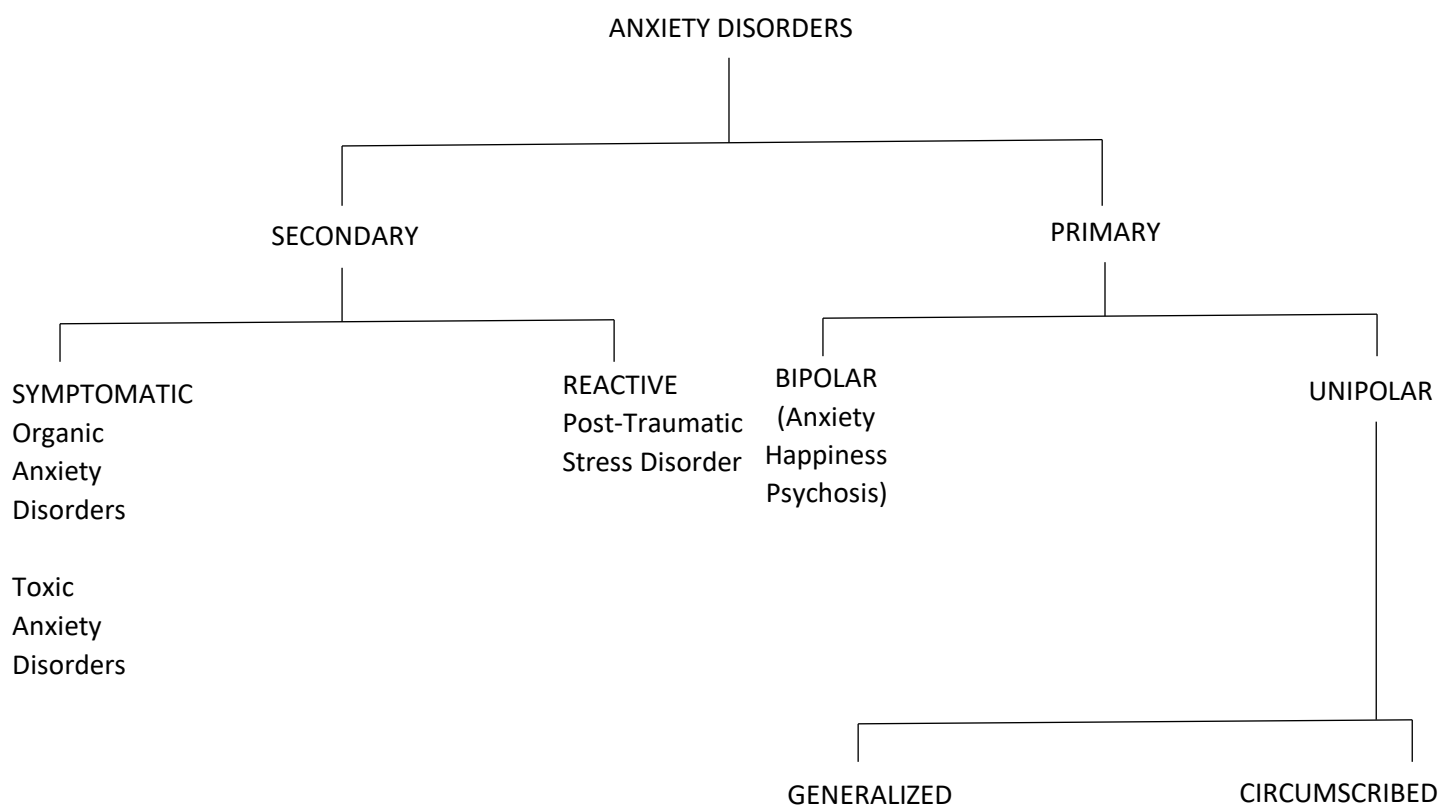
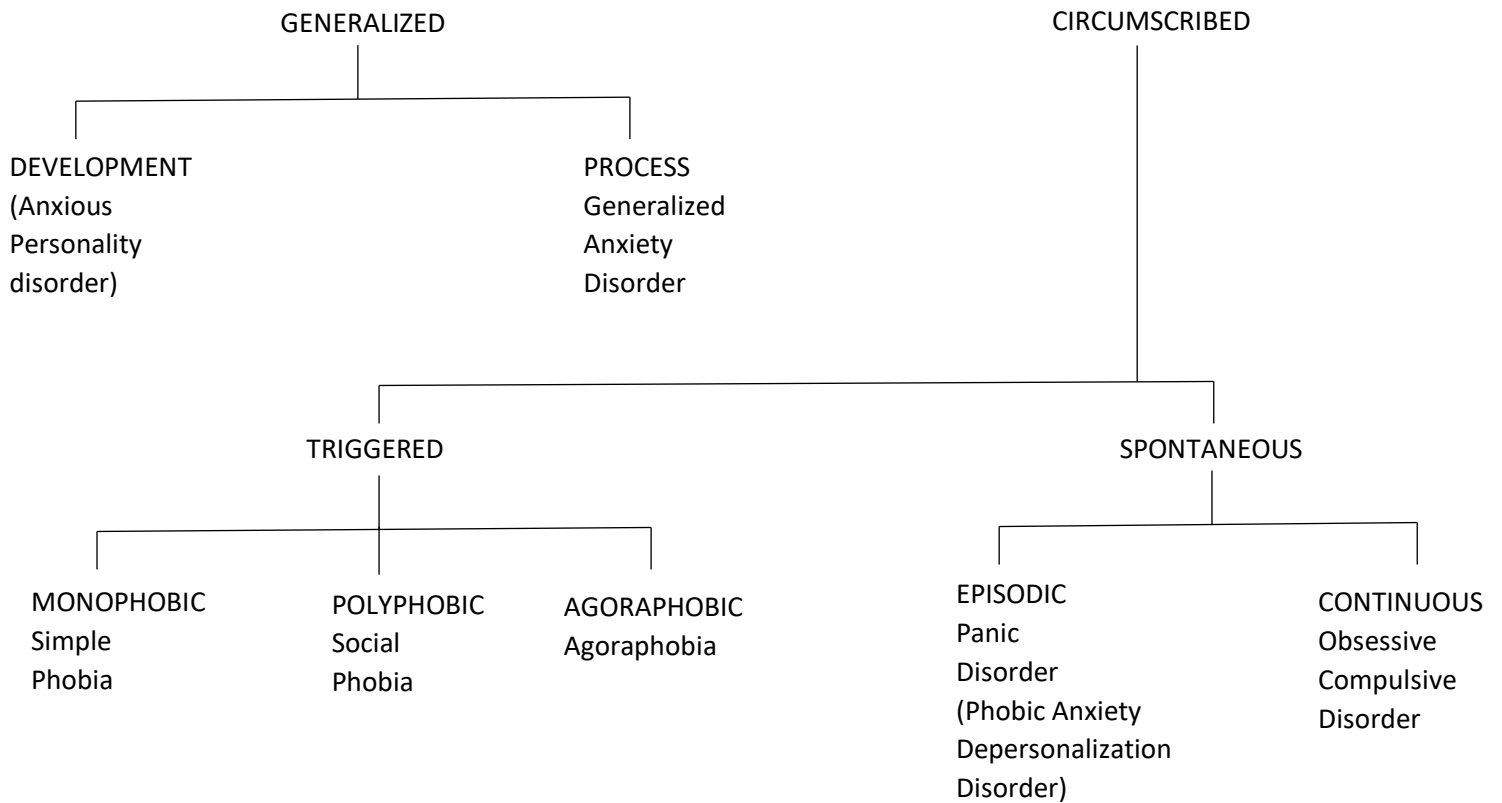


Table 13 (cont.)

CODE AD...



The diagnoses in parentheses are outside the scope of the class of anxiety disorders in the DSM-III and DSM-III-R

Table 14

<u>ORGANIZING PRINCIPLES</u>	<u>RESPONSE</u>
First	
Productive Psychopathologic Symptoms	Absent
Non-productive Psychopathologic Symptoms	Present
Pattern of Behavior Congruent with	
Content of Abnormal forms of experience	Present
Pattern of Behavior incongruent with	
Content of Abnormal Forms of Experience	Absent
Second	

Episodic Pathology	Present/Absent
Continuous Pathology	Present/Absent
Third	
Bipolar-Polymorphic	Absent
Unipolar-Monomorphic	Present
Fourth	
Lower Afferent – Central	Present/Absent
Higher Afferent – Central	Present/Absent
Fifth	
Partial	Present
Abortive	Present
Incomplete	Present

Criteria to qualify as a nosologic entity within anxiety disorders.