

Aging: increased vulnerability to sequelae of anxiety

Anxiety

Declining homeostasis/reserve

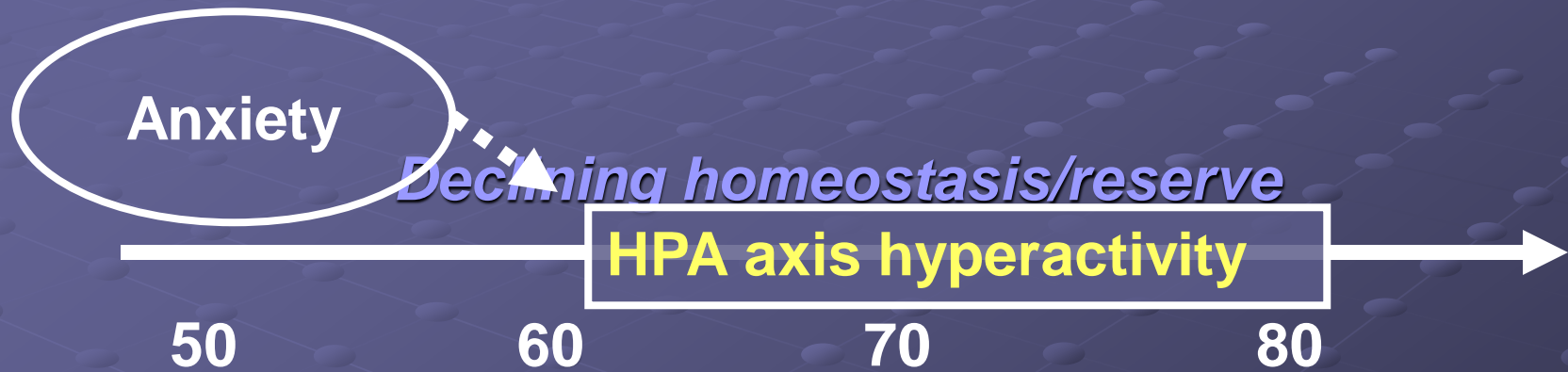
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60

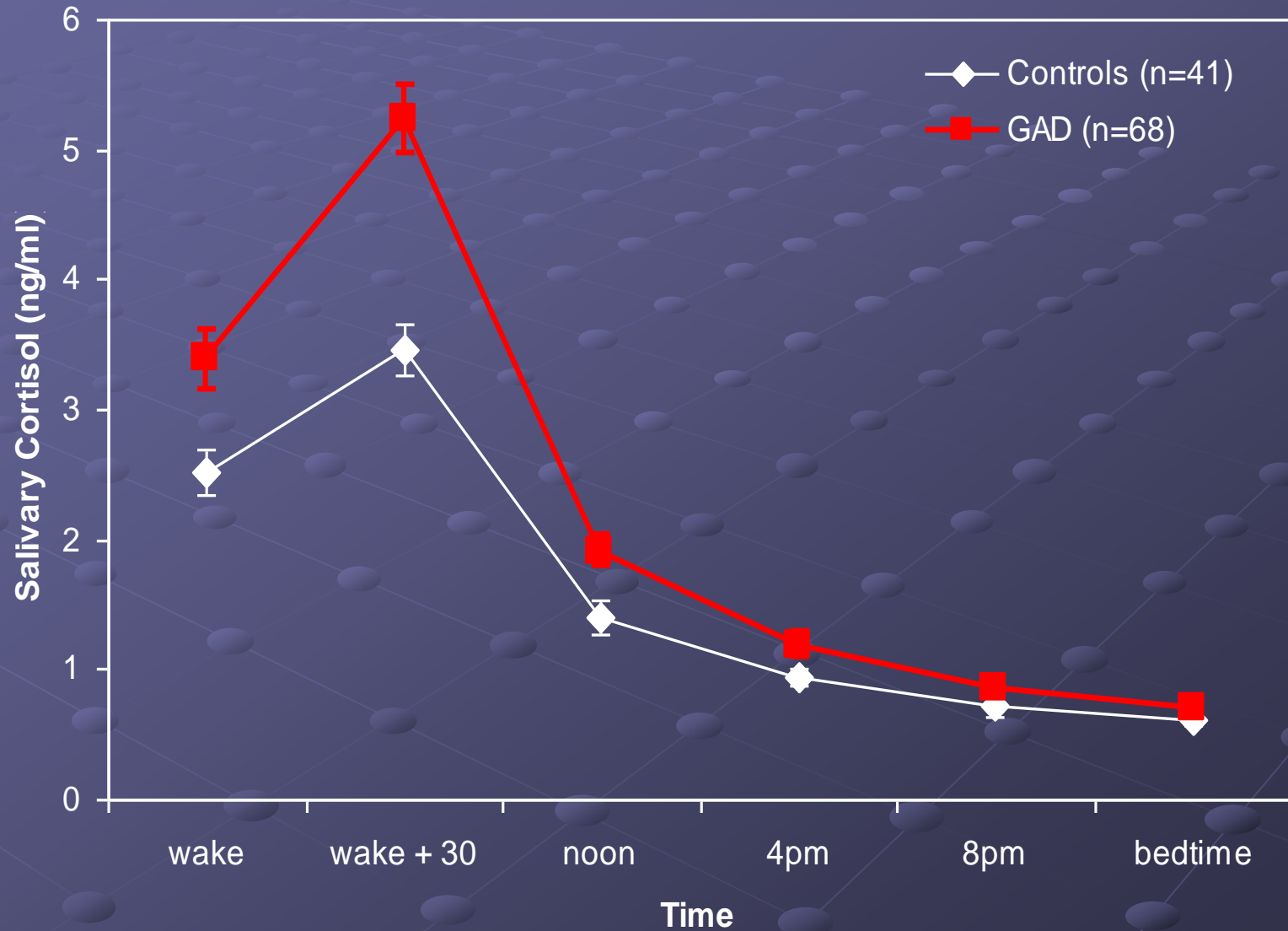
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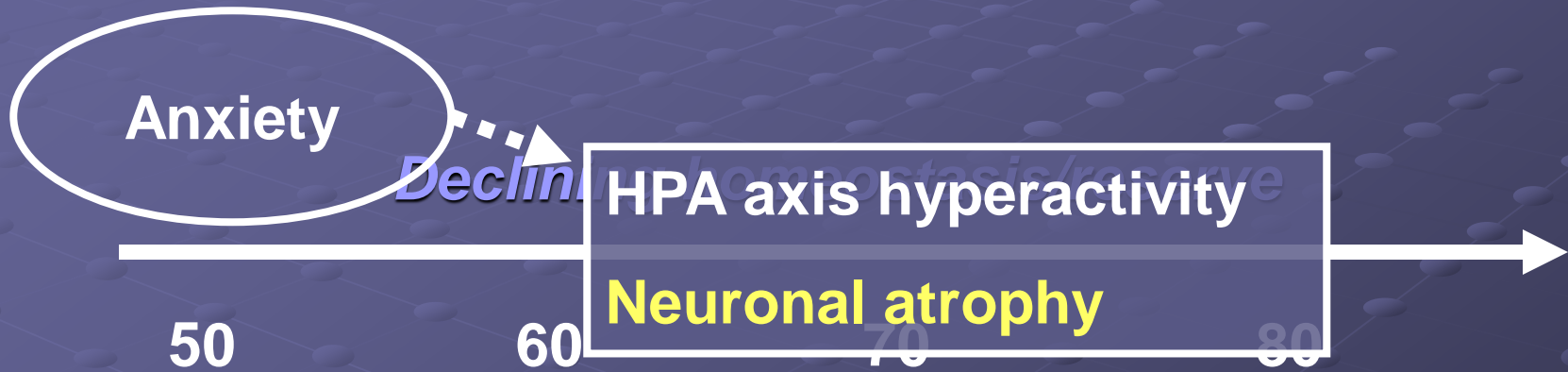
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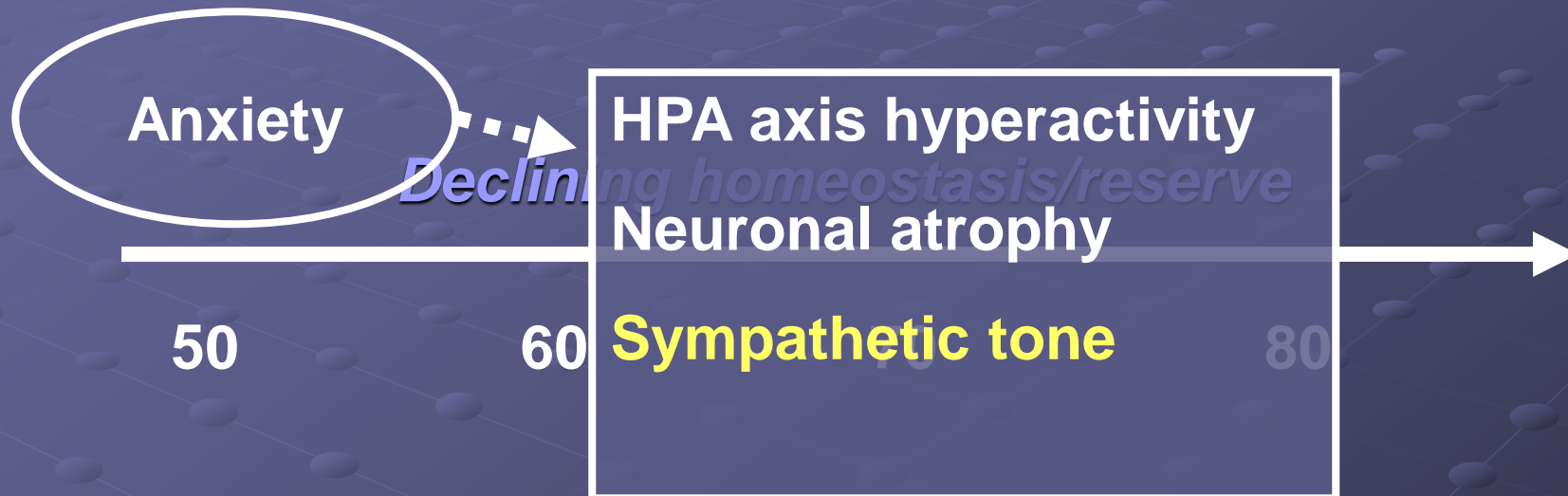
HPA Axis in Late-Life GAD



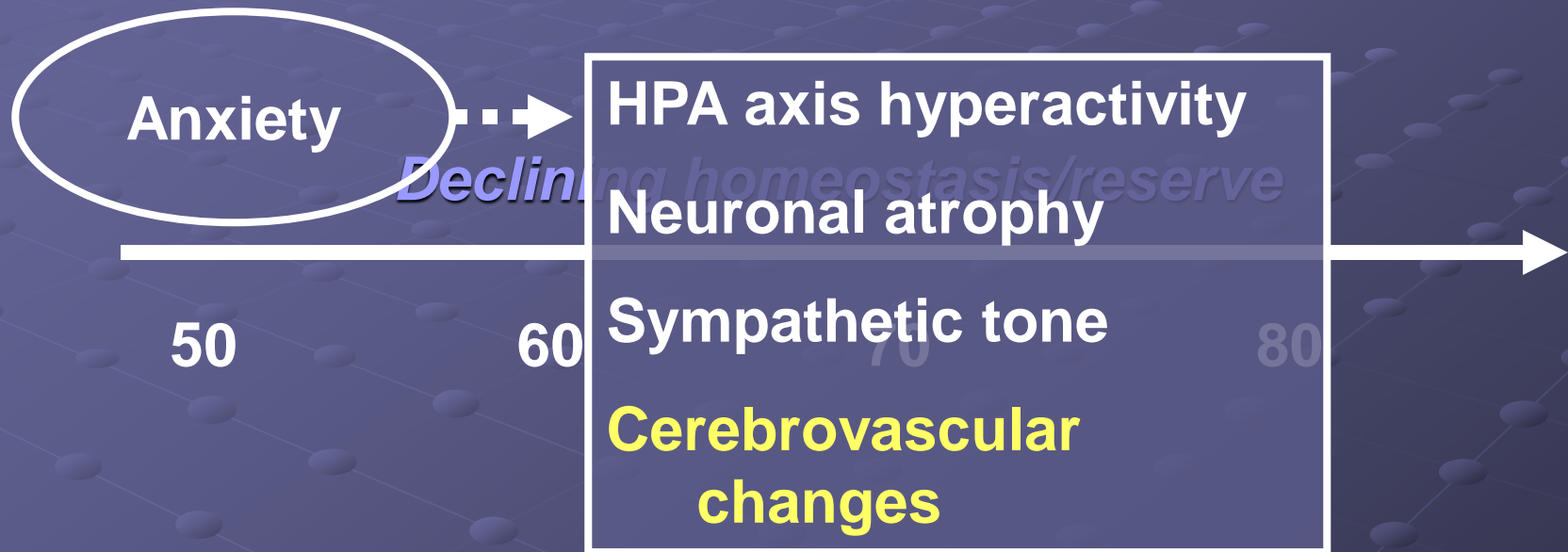
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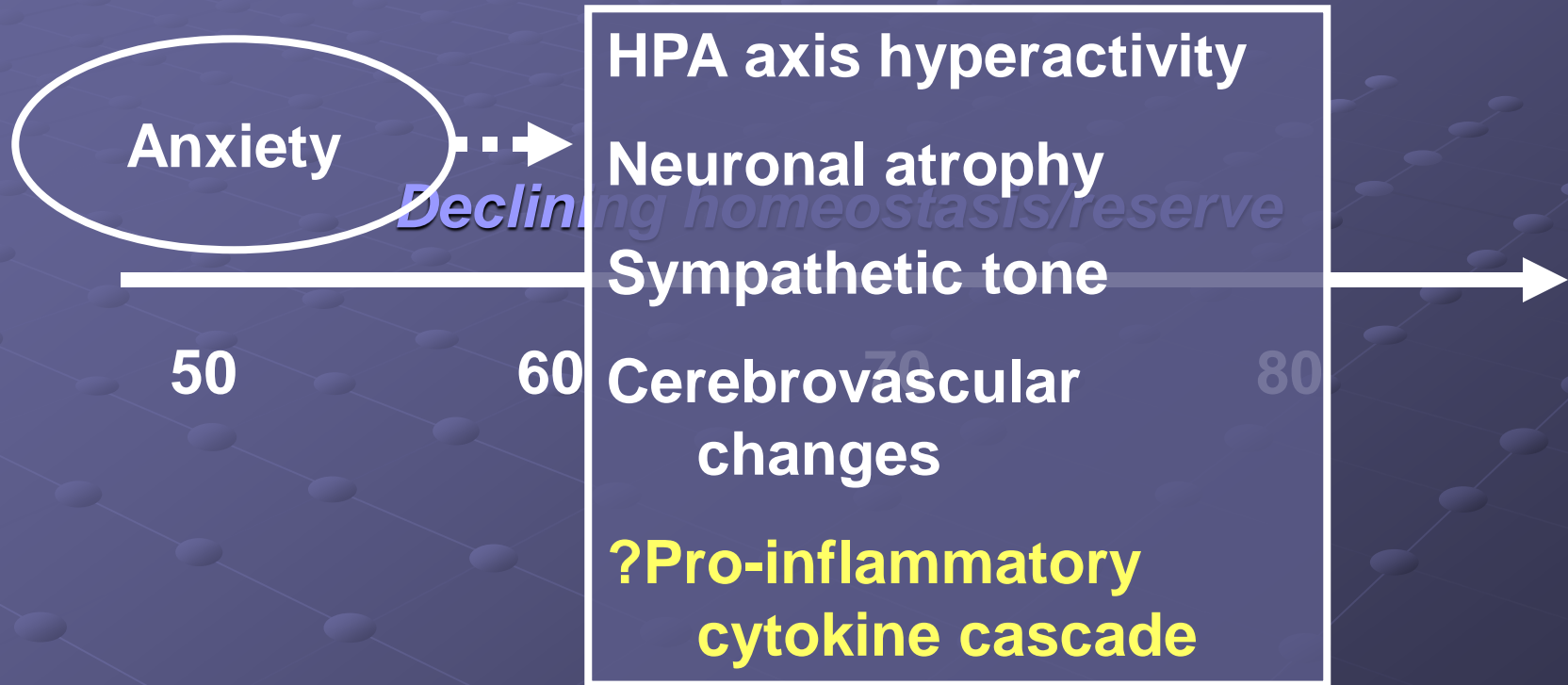
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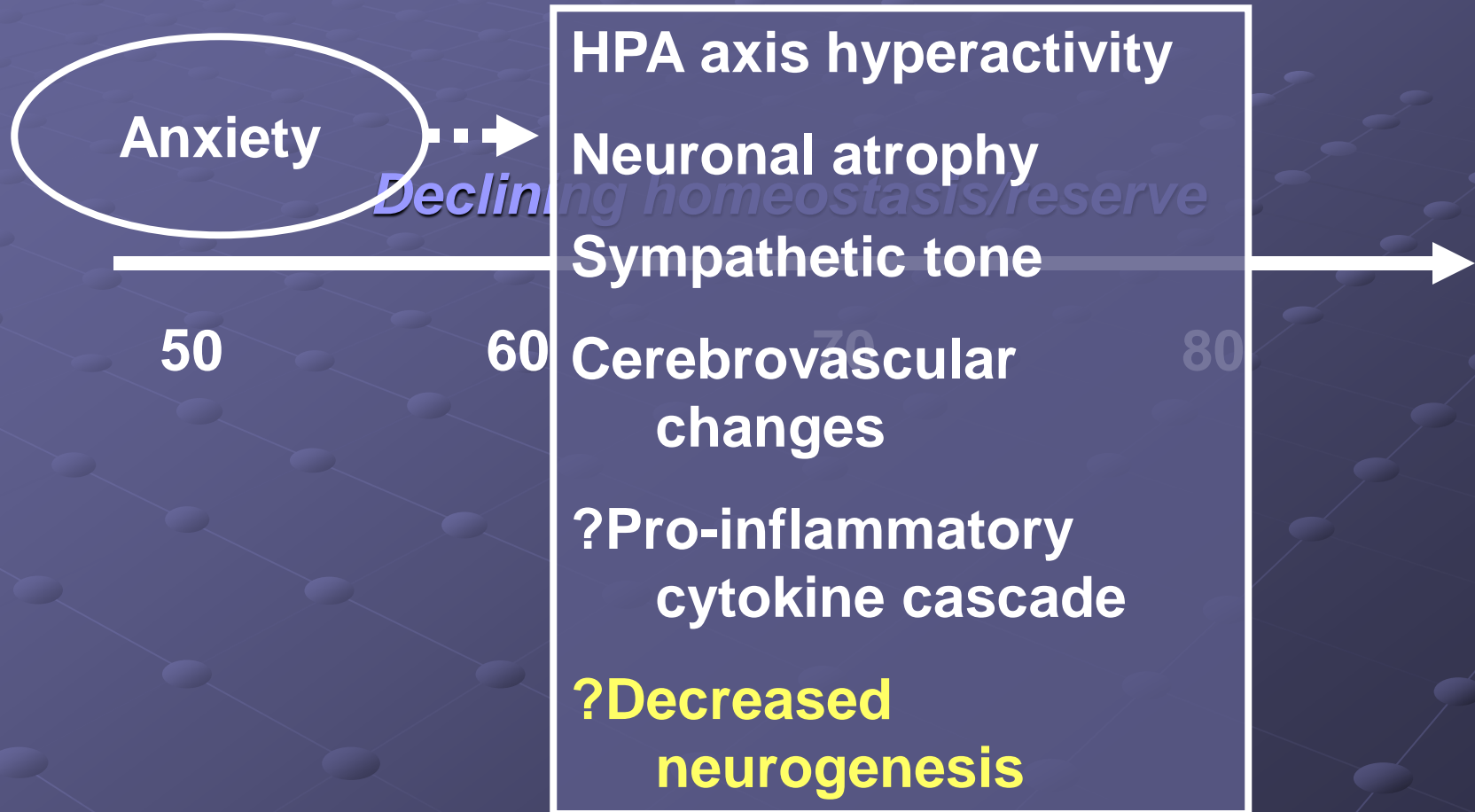
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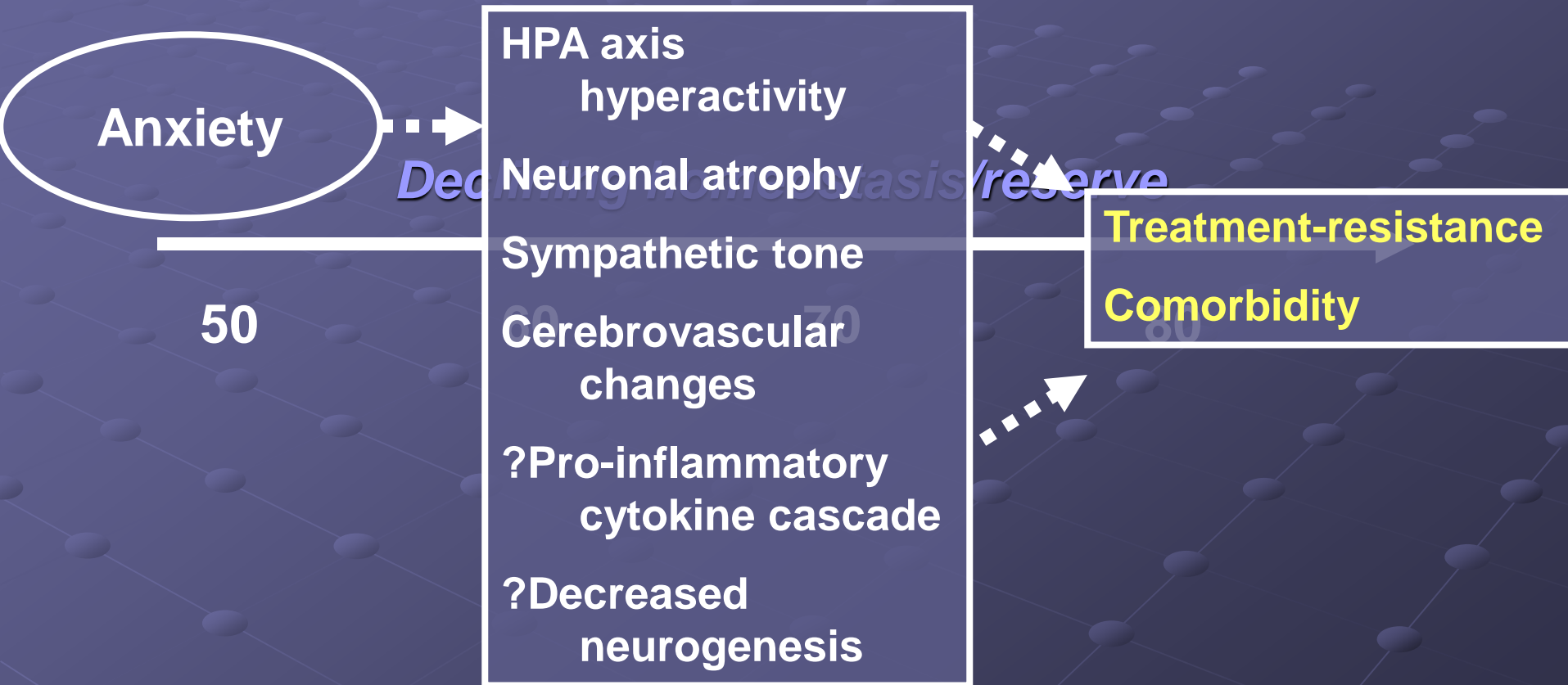
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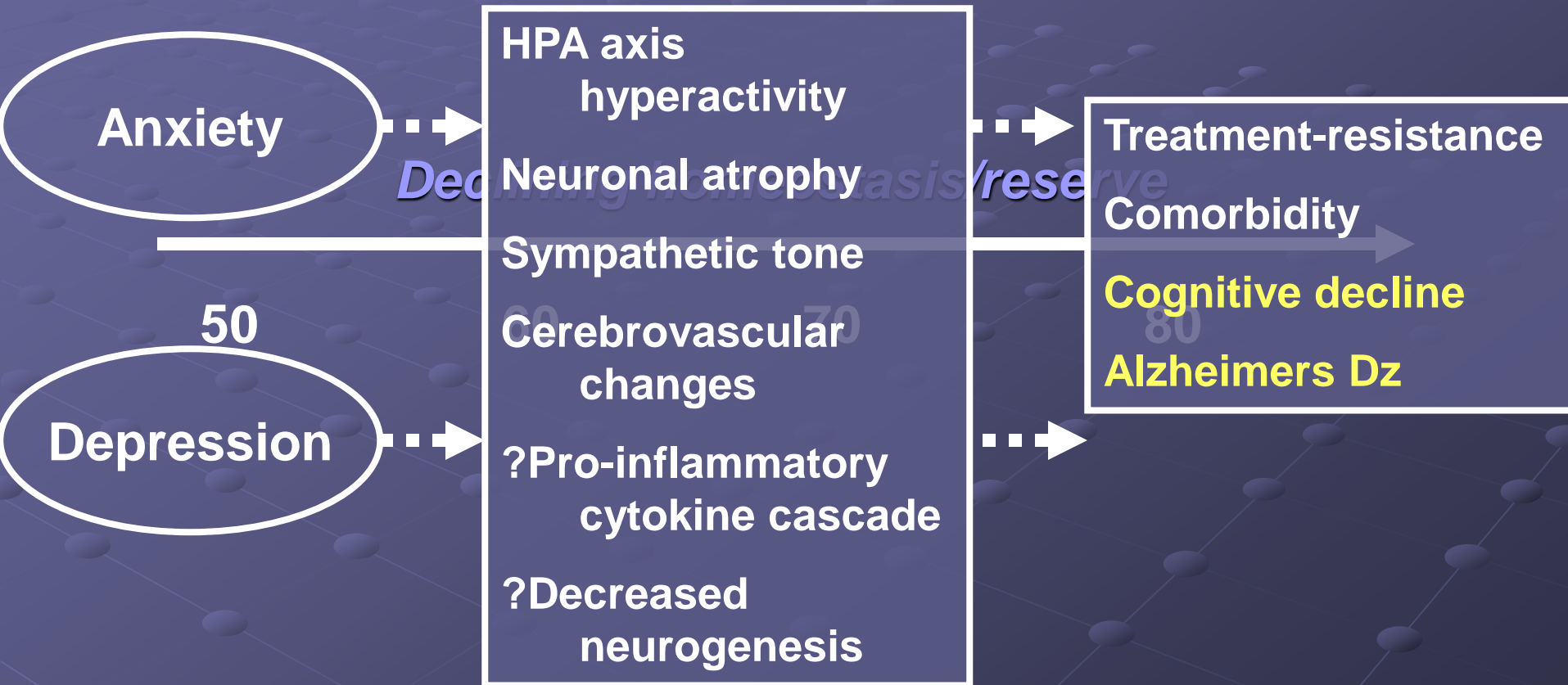
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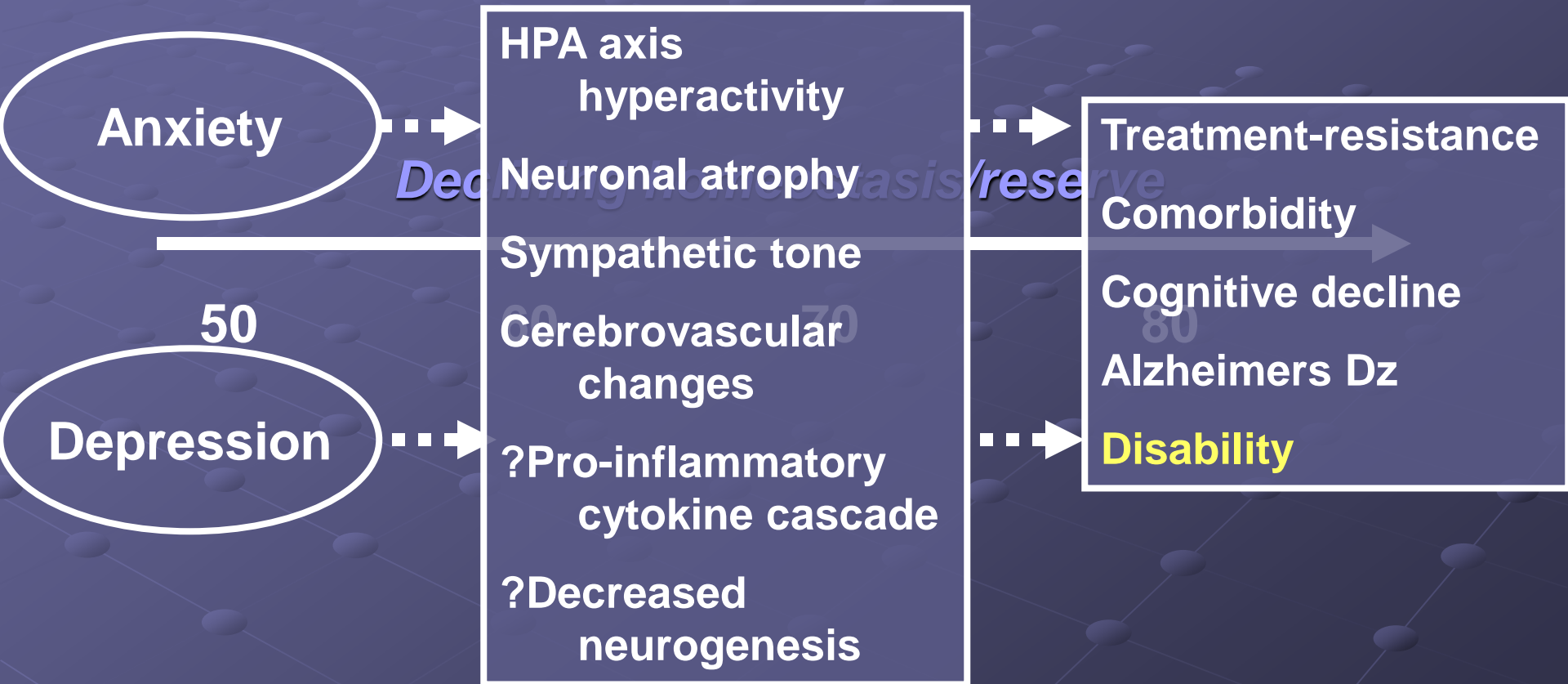
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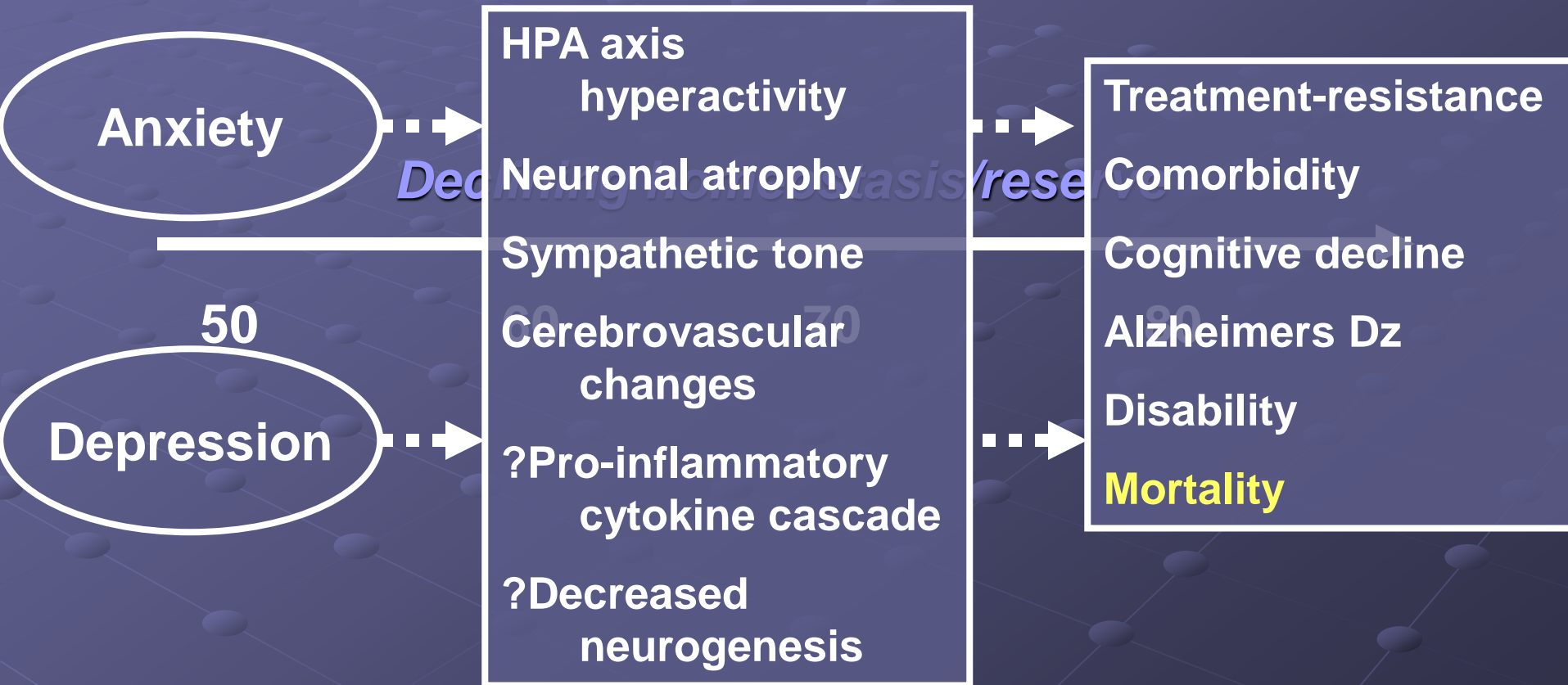
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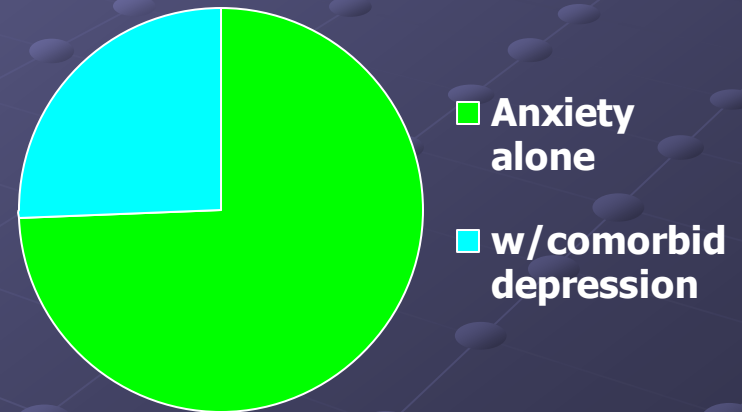
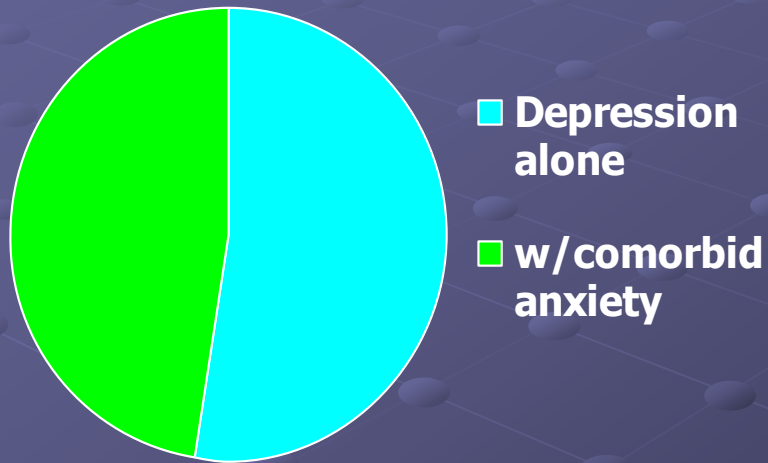
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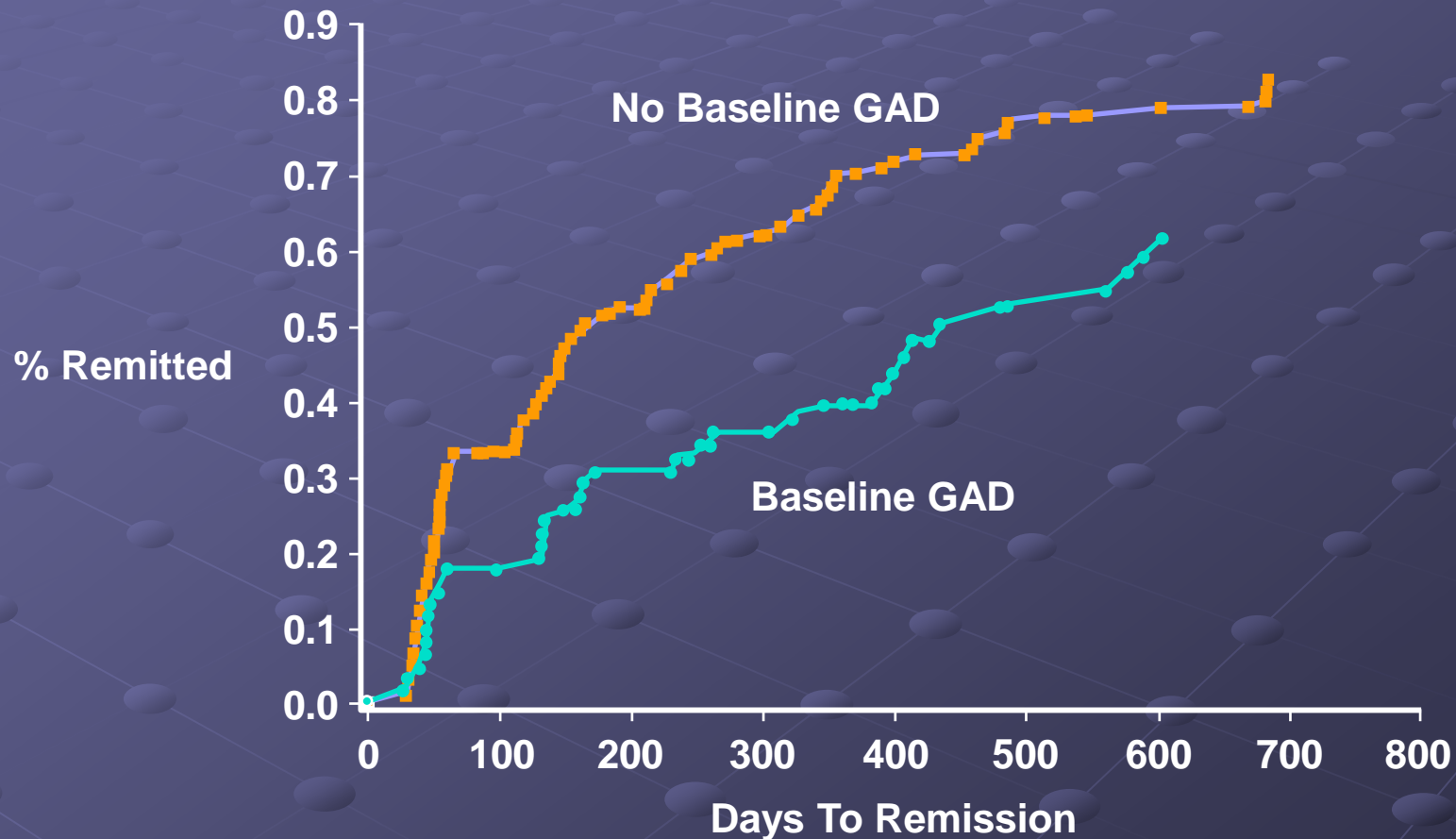
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Comorbidity in late-life depression and anxiety

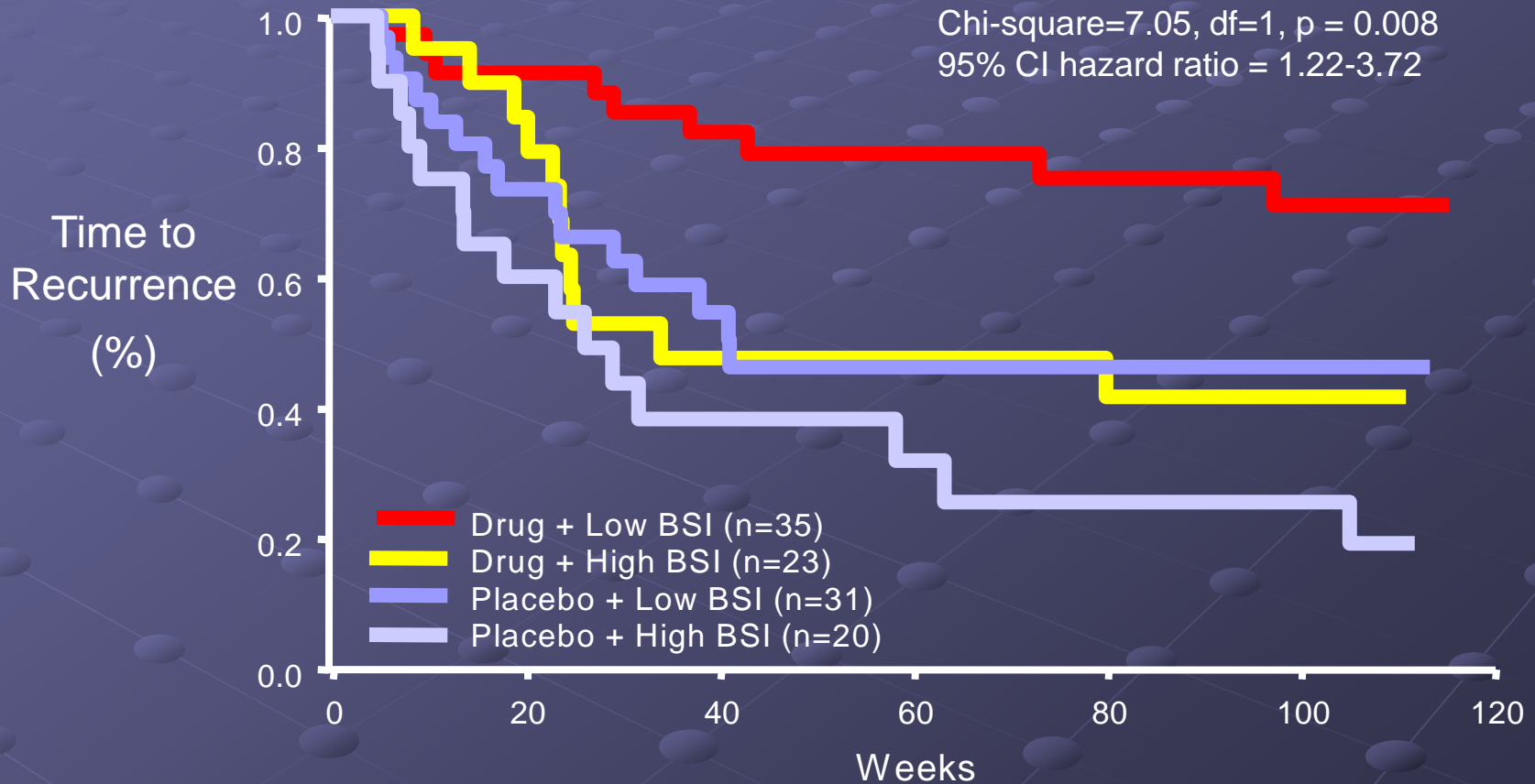


Anxiety comorbidity and acute treatment response in LLD



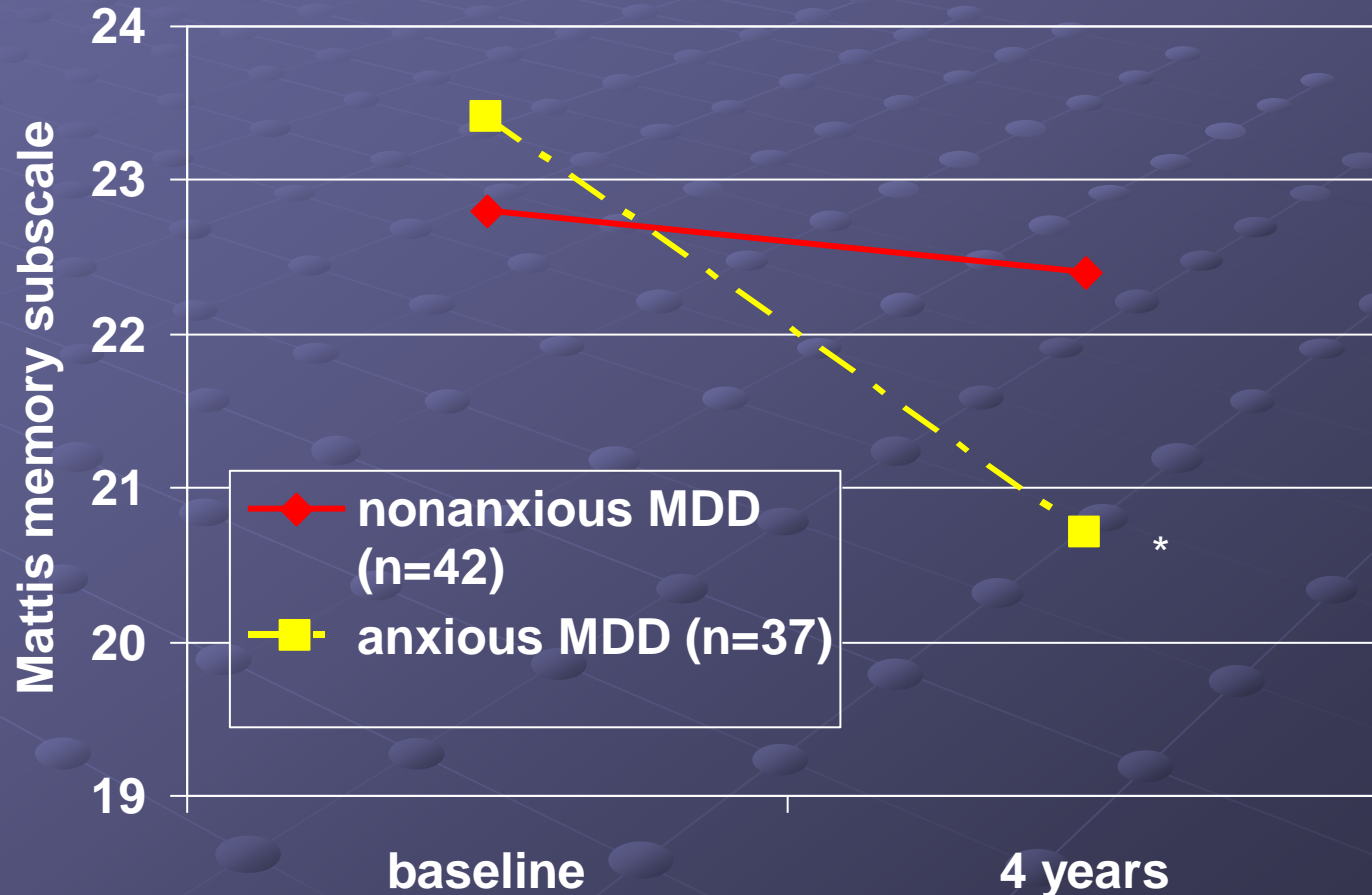
Steffens and McQuoid, Am J Geriatr Psychiatry. 2005; 13:40-47.

Effect of Baseline Anxiety on Time to Recurrence in MDD



Andreescu et al, 2007

MDD with comorbid GAD/panic: memory decline over 4 years f/u



* $p=0.05$ for group x time comparison

DeLuca et al, 2005

Medications efficacious for GAD

From clinical trials in young adults:

- FDA-approved: escitalopram, paroxetine, venlafaxine XR, duloxetine, buspirone.
- Also efficacious: other SSRIs, benzodiazepines, pregabalin, antihistamines

Prospective controlled studies in late-life GAD

Agent	study	Length	N	Age	Efficacy Results
oxazepam	Koepke 1982	4 wk	220	60+	oxazepam > placebo
ketazolam	Bresolin 1988	30 dy	63	66+	ketazolam > placebo
alpidem	Frattola 1992	3 wk	40	65+	alpidem > placebo
abecarnil	Small 1997	6 wk	182	60+	abecarnil > placebo

Koepke HH, et al. *Psychosomatics*. 1982;23:641-645.

Bresolin N, et al. *Clin Ther*. 1988;10:536-546.

Frattola L, et al. *Clin Neuropharmacol*. 1992;15:477-487.

Small GW, Bystritsky A. *J Clin Psychiatry*. 1997;58(suppl):24-29.

Problems With Benzodiazepines

- Benzodiazepines
efficacious BUT
- Already heavily
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Psychotropic	Odds Ratio of Fall
Benzodiazepine	1.4*
Antidepressant	0.9
Antipsychotic	1.5*
Sedative/hypnotic	1.1

* $P < .05$.

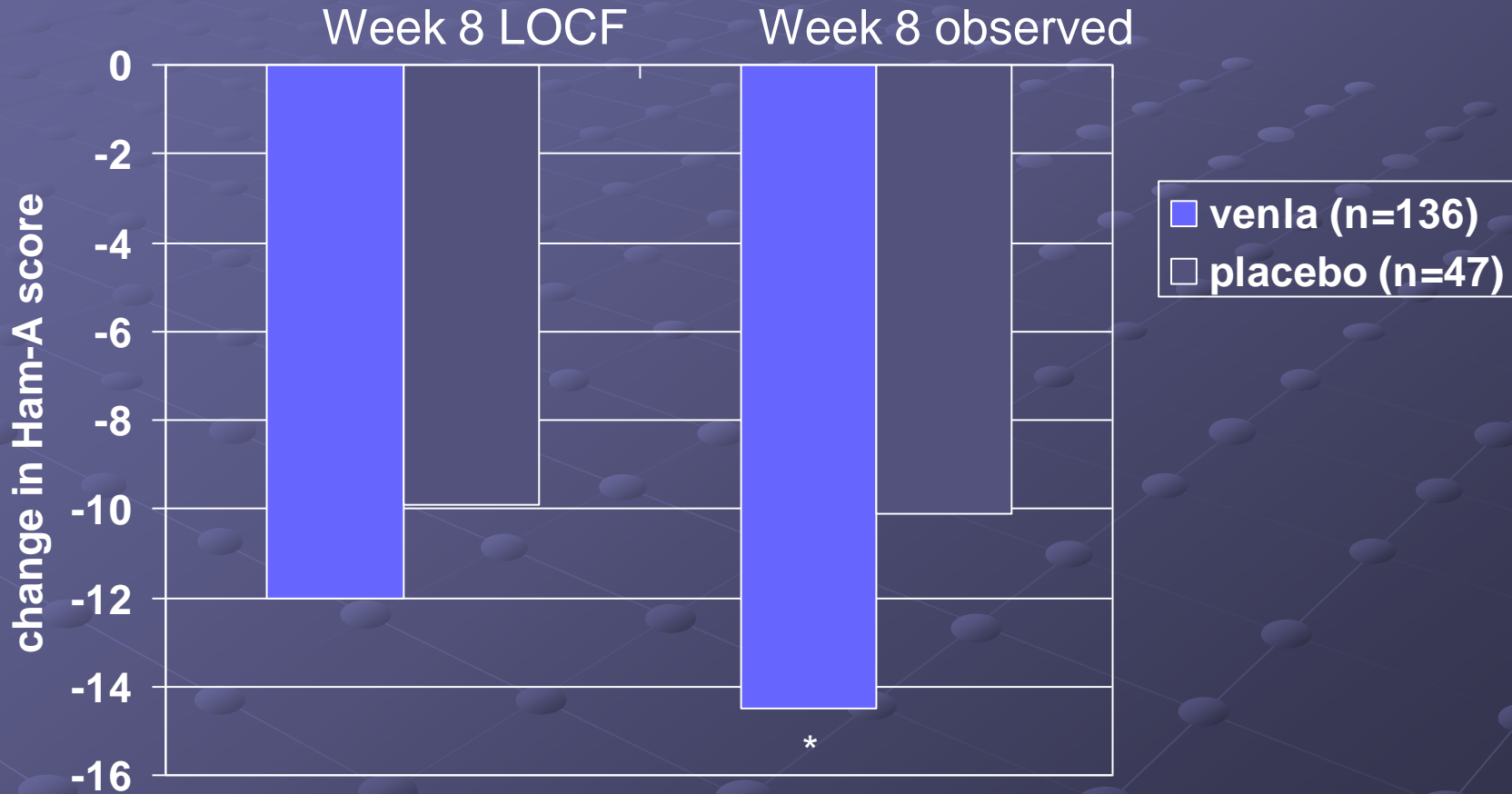
Problems With Benzodiazepines

- Benzodiazepines efficacious BUT
- Already heavily prescribed in elderly
- Associated with falls
- Associated with cognitive impairment

* $P < .05$.

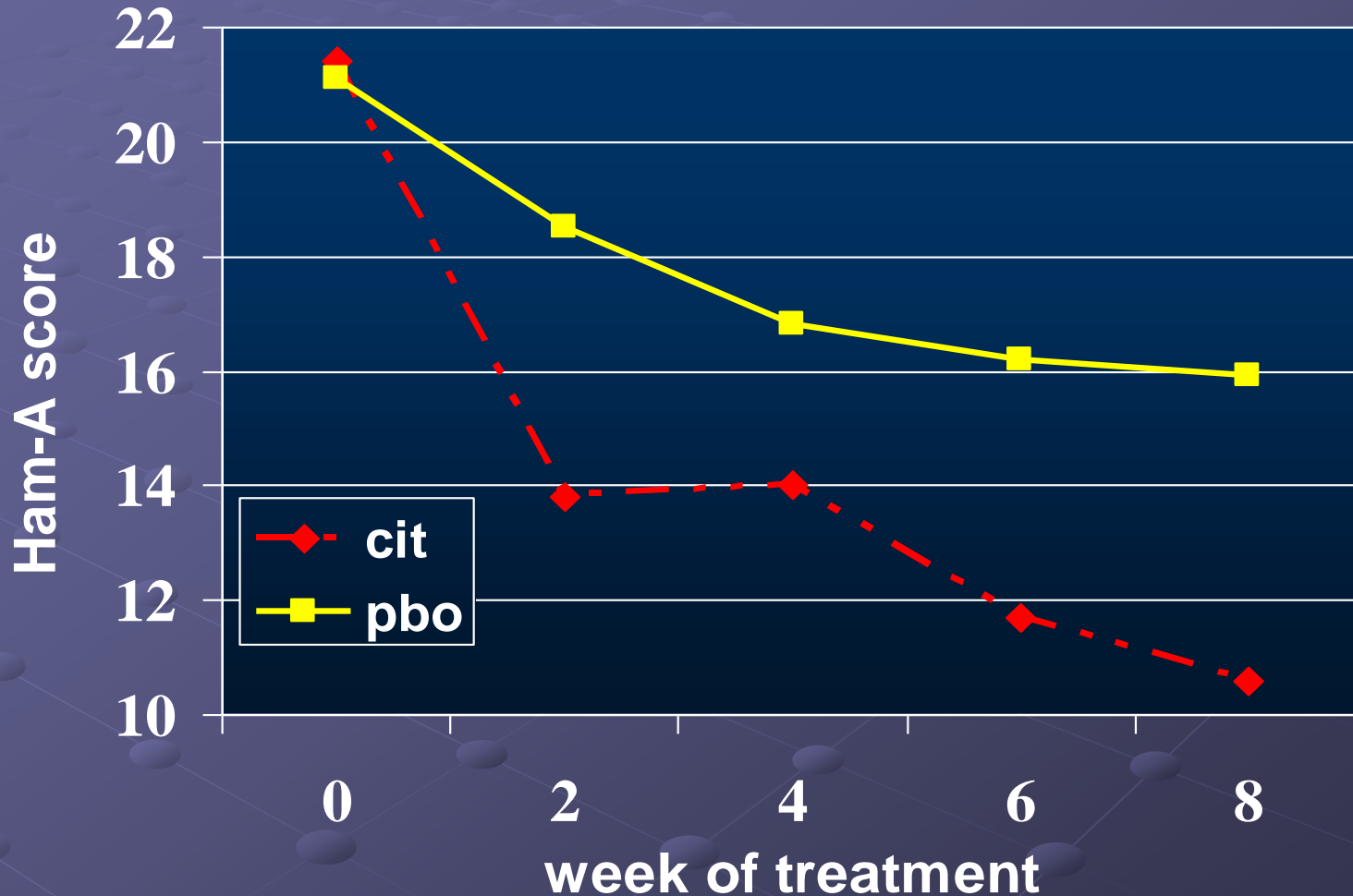
Landi F, et al. *J Gerontol A Biol Sci Med Sci*. 2005;60:622-626.

Venlafaxine ER in older GAD pts



* $p < 0.01$ for change compared to placebo
Katz et al, 2002

Citalopram in geriatric anxiety disorders



Lenze et al, Am J Psychiatry, 2005

Citalopram for Geriatric Anxiety Disorders

- 30 subjects received citalopram for up to 32 weeks
- Significant decreases in 4 of the 6 most common individual symptoms:
 - Fatigue/asthenia
 - Headache
 - Gastrointestinal distress
 - Palpitations

Cognitive-Behavioral Therapy (CBT) for anxiety

- Relaxation training
 - Slow, deep breathing
 - Progressive muscle relaxation
 - Imagery
- Changing negative automatic thoughts
 - Overestimation of risk
 - Catastrophization
- Exposure to anxiety-provoking situations
 - e.g., systematic desensitization

Comparison of CBT and attention placebo for late-life GAD

