



Anxiety Disorders Programme



What is Anxiety

Anxiety is the body and mind's natural reaction to threat or danger. In certain cases, high levels of anxiety are considered normal and helpful if they prompt an escape from danger. In situations such as interviews and exams, anxiety can enhance performance.

When anxiety becomes excessive or debilitating, however, it is then considered an Anxiety Disorder. In recent decades, there has been a dramatic improvement in our understanding of anxiety and how it can be treated.

How common are Anxiety Disorders?

Anxiety disorders are the most common mental health problem along with depression, affecting the population of Ireland and Europe. They account for a similar level of stress and disability within society as cancer or heart disease.

It is estimated that 1 in 9 individuals will suffer a primary anxiety disorder over their lifetime. Only a fraction of these individuals receive appropriate treatment which is a great pity, as it has been demonstrated consistently that with expert therapy the majority of sufferers can achieve a lasting improvement.

Causes of Anxiety Disorders

Anxiety can be primary or secondary to other mental health problems such as depression or substance misuse. Primary Anxiety Disorders are thought to result from a combination of genetic predisposition and life stress triggering a vicious cycle. Physiological reactions in the brain and body, distorted thoughts and beliefs about risk and danger and patterns of behaviour such as avoidance or safety-seeking, all interact to develop and maintain the problem.

Types of Clinical Anxiety

Anxiety can be the main or "primary" problem or it can be a secondary problem, which means that it is a symptom of another disorder. Depression and substance or alcohol misuse are often associated with high levels of anxiety, but in these cases, lasting benefit will come from treating the underlying problem rather than focusing solely on the anxiety symptoms.

In primary Anxiety Disorders, the symptoms tend to have followed a set pattern over several months or years. The symptoms occur independently of other mental health problems.

PANIC DISORDER

Sudden episodes of acute severe anxiety associated with a fear of death or collapse.

AGORAPHOBIA

A fear of being away from a place of safety, often associated with panic. Sufferers can become house-bound or confined to small “safe” areas.

SPECIFIC PHOBIAS

Associated with a desire to avoid intense fears of triggers such as rats, spiders, heights, enclosed spaces.

OBSESSIVE COMPULSIVE DISORDER

A complex and disruptive disorder in which sufferers feel compelled to ward off contamination, disaster or other negative events by carrying out time-consuming rituals such as washing, checking or ruminating.

SOCIAL ANXIETY

Excessive anxiety and self-consciousness in social situations with a central fear of being judged negatively or harshly or appearing foolish. It leads to avoidance of performance situations as well as hiding away in social gatherings.

GENERALISED ANXIETY DISORDER

A disorder of uncontrolled worrying, spread across numerous everyday themes. Sufferers constantly agonise over what they anticipate might go wrong in the future, causing distress, sleep disturbance and exhaustion.

POST-TRAUMATIC STRESS DISORDER

A carefully defined disorder resulting from a trauma such as a road traffic accident or an assault. Sufferers are troubled with intrusive memories or flash-backs of the incident and they are on a state of high alert.

Treatments

Cognitive Behaviour Therapy (CBT) treatments are highly effective in Anxiety Disorders. They target exaggerated danger beliefs and safety behaviours in a collaborative way, with the aim of breaking the vicious cycle and helping sufferers achieve greater confidence in the face of what they fear. By learning about this cycle and by challenging beliefs and behaviours, sufferers gradually master their fears and regain their functioning.



CBT work can be greatly supported by meditational strategies such as mindfulness meditation, occupational therapy, Serotonin-boosting anti-depressant drugs and sedative anti-anxiety drugs (to ease the worst of the anxiety during the acute phase). Best results are achieved by carefully focused CBT combined with other forms of help, as needed.

Anxiety Disorders Service

The Anxiety Disorders Service is a comprehensive, multi-disciplinary, assessment, treatment and after-care service for sufferers from primary Anxiety Disorders. It aims to deliver the best available treatments for anxiety in an accessible and flexible way as well as providing follow-up care and support for those that need it.

Assessments

Appropriate referrals are assessed at the Dean Clinic, St Patrick's University Hospital, which involves the use of standardised rating scales and assessment tools carried out by a multi-disciplinary team under the direction and supervision of Dr. Michael McDonough, the Director of the Anxiety Disorders Programme. A detailed report is compiled and sent to the referrer. A copy of this report can be made available to the service user if they so wish.

At the assessment, a comprehensive treatment plan is devised which may involve:

- referral for in-patient admission
- referral to attend the Anxiety Programme as a day patient
- referral for individual CBT on an out-patient basis
- advice on drug treatment or
- recommendations for other forms of therapy depending on what is considered most appropriate.

Admissions to St Patrick's University Hospital, either as a day patient or an in-patient, are covered by all the standard Health Insurers.

The Anxiety Disorders Programme

The programme (Level 1) is delivered over 2-3 days per week at St Patrick's University Hospital. The therapeutic framework of the programme is based on cognitive-behavioural (CBT) models of anxiety, mindfulness and self-compassion approaches. Group psychotherapy process integrates theoretical, experiential and reflective learning.

The multi-disciplinary team includes Clinical Nurse Specialists, an Occupational Therapist and a Psychiatry Team.

Level 1 has OCD and non-OCD streams (GASPP stream - Generalised Anxiety, Agoraphobia/Panic and Phobias). Those attending the 5-week rolling programme can also be referred to individual therapy if required, and medical input on drug prescribing, depending on their needs.

The time spent on the programme varies according to each individual's needs and responses (usually 5 to 15 weeks). Some clients will move to Level 2 one day a week for 8 weeks after completing Level 1. Aftercare follow-up is provided in Level 3, which requires a half-day monthly commitment. Additionally, referral for individual CBT on an out-patient basis via the Dean Clinic can be arranged.

Research and Development

The Anxiety Disorders Service is based on the very best available treatments. The programme team will continue to expand and develop the programme in line with developments in the treatment of Anxiety Disorders internationally, and as a result of its own research and audit.

All those participating in the programme are invited to contribute to this process. St Patrick's University Hospital Group is a teaching and research centre affiliated with Trinity College, Dublin and the Anxiety Disorders Service has close links with the college's CBT training programme.

Referrals

Referrals should be made to Referral Enquiries at Tel: 01 249 3535.

Fax: 01 249 3609. Email: thedeanclinics@stpatsmail.com

Referrers are invited to use the hospital's standard referral form which is downloadable from www.stpatricks.ie

Please also see www.stpatricks.ie/anxiety-disorders-service for more detailed information about the programme. Referrals are accepted from all medical practitioners such as GPs and Psychiatrists.

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