



— A — What you need to know about anxiety

WORLD — OF — WORRY

BY SYDNEY LONEY

ILLUSTRATION BY RAYMOND BIESINGER

JIM FOLK'S MENTAL HEALTH odyssey began in 1974 with an upset stomach. Next came muscle tension, dizziness and heart palpitations. At the time, Folk was 21 years old and working in his family's auto-repair shop in Regina. When his symptoms didn't go away, he grew worried. "Whenever I had an ache or pain, I'd freak out," says Folk, now 64.

After a few months, he saw his doctor, who told him it was just stress and to go home and rest. "But I didn't feel stressed," Folk says. "And I couldn't figure out why every time I tried to relax, my symptoms went full tilt."

At first, Folk was convinced he had multiple sclerosis, or maybe cancer, even when doctors reassured him that he didn't. He began experiencing non-stop nausea coupled with debilitating panic attacks. "I'd start trembling all over, feel dizzy and have hot flashes," he says. "I was in the bathroom countless times, heaving with intense stomach upset. My symptoms were robbing me of more and more of my life."

Years passed, but his health failed to improve. Folk saw several doctors and mental health professionals and tried an array of pills and herbal remedies. Nothing worked. "My whole life revolved around a few blocks—to work and back home again. I could barely drive, couldn't visit friends, couldn't enjoy my family." Eventually his wife at the time told him he needed to get better or

their marriage was over. Folk booked an appointment with a psychologist. Two weeks later—and 10 years after the onset of his symptoms—he was finally diagnosed with generalized anxiety disorder and panic disorder.

Generalized anxiety disorder, or GAD, is a condition characterized by persistent, excessive worry—even when there's nothing concrete to worry about. "People with GAD try to plan for every eventuality, all the time," says Dr. Melisa Robichaud, a psychologist in Vancouver. "It's cognitively exhausting." It can be physically taxing, too, with symptoms ranging from fatigue and irritability to difficulty maintaining concentration to restlessness or agitation.

At its core, Robichaud says, anxiety is the body's most basic survival mechanism, the fight-or-flight response you get when you feel threatened. "Anxiety is like the body's smoke alarm: whether there's smoke or fire, it makes the same noise." It can be triggered by real danger but also by anything we perceive as dangerous.

People with GAD think through "what-if" scenarios excessively, and this cycle of worries can end up provoking even more anxiety. The thought of an unpaid bill can quickly escalate to worrying about what they'll do if they wind up homeless. "They're constantly in their heads and they can't stop their worrying once it begins," Robichaud says.

Who Is Affected?

While scientists aren't entirely sure why some people are more prone to GAD than others, part of the risk is genetic, says Simon Sherry, an associate professor of psychology and neuroscience at Dalhousie University in Halifax. The condition also often coincides with other illnesses, such as depression, and women are twice as likely as men to be affected, according to Sherry.

As anxiety disorders go, GAD is one of the most common, especially in older adults. Studies suggest it affects somewhere between three and 10 per cent of people, says Julie Wetherell, a psychologist at VA San Diego Healthcare System and professor of psychiatry at the University of California, San Diego who focuses

much of her research on psychological treatments for GAD in elderly patients. "GAD is more common in seniors than social-anxiety disorder, panic disorder, post-traumatic stress disorder and major depression."

It also manifests a little differently in people who are 55 and older. Wetherell says they tend to worry less about

work and more about personal health and family issues. "Sometimes people have a lifelong history of anxiety that they've coped with through distraction or workaholism," she says. "The pervasiveness of the worry becomes apparent when they're no longer working

or once they're unable to engage in previous coping strategies."

Tricky Diagnosis

Anxiety symptoms are associated with several health issues, which can make diagnosis difficult. Conditions that can cause—or mimic—anxiety include coronary artery disease, chronic obstructive pulmonary disease, dehydration and hyperthyroidism. "It's possible to have both a medical condition and anxiety, so when a medical condition is diagnosed, anxiety may remain

untreated," Wetherell says. Anxiety-like symptoms can be caused by medications, including blood pressure pills, hormones, steroids, antidepressants and over-the-counter drugs that contain caffeine, like some cough syrups and decongestants.

GAD sufferers rarely turn to psychologists and will instead often see



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a medical doctor about their physical symptoms. In some cases, professionals brush off both physical and psychological concerns. "Many people think that worry isn't a legitimate mental health complaint since everybody frets," Robichaud says. She's seen patients who endured symptoms for 15 years before seeking help. Older adults tend to downplay problems with anxiety. GAD sufferers often get accustomed to their extreme patterns of thinking, Sherry says. "If worry is your normal, you may not appreciate the extent to which you're living in distress," he says. "But while GAD is common, costly and impairing, it's also highly treatable, which is why it's important to seek help."

Medication vs. Therapy

It took two years of treatment before Folk was symptom-free. "While I had reasonable moments during the 12 years I was ill, most of the time was horrible," he says. "My anxiety disorder felt like a nightmare I couldn't wake up from."

Folk's psychologist taught him that he could react physically, even when

he wasn't aware that he was anxious, and explained why he wasn't able to calm himself down. "It was helpful for me to know what was going on in my body," Folk says. "Then it took a year of stress reduction and daily self-reflection strategies to help me learn not to react to life with fear."

His success in overcoming GAD eventually led him to found anxietycentre.com, a site that offers information and counselling by mental health professionals to those grappling with the condition. The guidance provided on the site is based on cognitive behavioural therapy, which is the gold standard in treating anxiety disorders. CBT teaches patients to change their unhealthy patterns of thinking and behaviour in order to help them

function normally. "I worked hard at overcoming my fear of anxiety and panic attacks and, over time, my symptoms subsided," Folk says. He's been symptom-free since 1985.

While some medications can help treat anxiety, they come with serious side effects, such as sedation, cognitive impairment (over long-term



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use) and even the development of a tolerance, which can lead to addiction. Wetherell often recommends a non-pharmaceutical approach rooted in relaxation and meditation. "Our research team is currently using Mindfulness-Based Stress Reduction, which has no side effects," she says. (MBSR techniques include mindful breathing and mental body scans to increase awareness of physical sensations.) "We found that MBSR reduces cortisol, a stress hormone that damages the hippocampus and frontal lobe of the brain, so it may have beneficial effects on memory and thinking, as well as on anxiety."

Wetherell says there are videos on YouTube that lead people through body scans (which coach participants in bringing awareness to each part of the body sequentially) and other mindfulness techniques. "I encourage people to practise daily so they can use relaxation techniques when they're anxious," she says.

Other studies support Wetherell's findings. In January, researchers from the Georgetown University Medical Center in Washington, D.C., published a study showing that GAD patients had fewer hormonal and immunological stress markers in their blood after taking an MBSR class for eight weeks. An important aspect of mindfulness is to learn to zero in on present-moment experience, says Robichaud. "For GAD patients, worries involve thoughts

about negative events that might occur in the future, so being able to focus on the present can be beneficial."

To remain present, Christine Purdon, professor in the department of psychology at the University of Waterloo, suggests patients be aware of the tenses they're thinking in. "I ask them, 'Is your mind in the future? Does it need to be there?'" Purdon shows people how to recognize that whatever they're worrying about is neither imminent nor realistic. The goal, she says, is also to help people realize when they're underestimating their ability to cope and overestimating the demands of their environment.

How to Manage GAD

For mild cases of GAD, lifestyle changes may help. One of the most important is exercise. Researchers at Princeton University found that physical activity reorganizes the brain in a way that reduces the organ's response to stress so that anxiety is less likely to interfere with normal brain function. Exercise can also tire you out, so you sleep better—and sleep is key. Lack of shut-eye can contribute to excessive worrying.

So can too much time spent on social media. Last year, a study published online by the journal *Computers in Human Behavior* showed that using multiple social media platforms increases the risk of anxiety and depression (multi-tasking and

switching from one thing to another are associated with poorer attention, cognition and mood).

There's also some evidence that what you eat may play a role in your ability to calm your mind. A 2015 study in the journal *Psychiatry Research* found that eating foods high in probiotics (pickles, kefir, sauerkraut) may protect against symptoms of social anxiety.

And a 2011 U.S. study found that fare high in omega-3s (such as fatty fish) has been linked to lower anxiety.

Staying the Course

Although you can reduce—or even overcome—GAD, maintaining solid mental health remains a lifelong process. Mark Virgin, a 54-year-old lawyer in Vancouver, was diagnosed two years ago and sees his psychologist twice a year for checkups. “I still suffer from anxiety, but now I’m equipped with coping mechanisms,” he says. Virgin tries to meditate daily. He’s also reduced his coffee and alcohol consumption and stays committed to an exercise regimen.

Afraid of how the stigma associated with mental illness might affect

his work and relationships, Virgin initially attempted to mask his symptoms, until they became crippling. He would worry about potential issues—usually work related—and build up improbable, worst-case scenarios in his head. “It got to the point where I was having a hard time leaving my home—and I’m a pretty extroverted person,” he says.

CBT helped Virgin recognize the implausibility of the catastrophic narratives he had been constructing. One of the strategies he found to be most useful was writing out the scenarios, then reading them back. “I was suddenly struck by how disproportionate what I’d constructed was to reality,” he says.

Virgin now speaks openly with co-workers and friends about his experience, with the goal of encouraging others to address their symptoms. He also serves as the board president of AnxietyBC. “I decided to share to try and de-stigmatize it,” he says. He hopes that dialogue will allow others to speak freely and learn about treatment options. “It’s exceptionally liberating when you finally have the tools to manage this disorder.” **R**

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IN DUE TIME

If you want a rainbow, you gotta put up with the rain.

DOLLY PARTON