



How to cope with generalized anxiety disorder

- Keeping a journal is a useful way to identify the stressors in your life and can be beneficial to your therapy.
- Setting up schedules and prioritizing your life may help to manage your time and energy.
- Keep alcohol consumption in moderation, and avoid drug use.
- See your doctor or find a support group to help with more effective coping strategies.

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Generalized Anxiety



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What is generalized anxiety disorder?

The term “generalized anxiety disorder” (GAD) refers to a condition characterised by extreme worry. In some ways, the term “tension disorder” is a better one because both mental tension (e.g. worry, irritability) and physical tension (e.g. muscle tension, insomnia) are experienced.

People with GAD worry about everyday life circumstances (e.g. job responsibilities, finances, the health of family members) or about more minor matters (e.g. household chores, keeping appointments). The worries are experienced as difficult to control, and they are clearly distressing or interfere significantly with work or with social functioning.

The worrying is accompanied by one or more of a range of physical symptoms, such as restlessness, getting tired easily, difficulty concentrating, irritability, muscle tension, and disturbed sleep.

The particular symptoms of generalized anxiety disorder may differ somewhat from person to person. For example, some people may experience mostly cognitive symptoms (i.e. worry), while in other people the bodily symptoms (e.g. aches and pains) are experienced as the main problem.

Characteristic symptoms

- People with GAD are prone to expecting the worst, even when there is no apparent reason for it.
- The worry is constant and occurs on most days for at least six months.
- Worrying generally concerns health, family, money or work related issues.
- The excessive worry interferes with all aspects of functioning and everyday living.
- Physical symptoms commonly associated with GAD are restlessness, irritability, muscle tension, fatigue, difficulty sleeping, and difficulty concentrating.
- Cognitive symptoms include difficulty controlling the worrisome thoughts.

Who gets GAD?

Around 3% to 8% of the general population will suffer from GAD at some point in their lives. The prevalence of the disorder is higher, however, in people who are already visiting a general practitioner. GAD is also more common in people with another psychiatric disorder, including another anxiety disorder. Finally, GAD is more common in women than in men.

Most people with GAD say that they have suffered from excessive worrying all their lives; the condition may start at a young age and may continue for many years. Symptoms often worsen during stressful times.

Treatment of GAD

Two types of treatment are available for GAD, namely medication and psychotherapy (talk therapy). As with most other disorders, a combination of the two is more beneficial.

Since this is probably a long-term condition that often requires life-long treatment, the prescription of medication should be approached carefully.

Antidepressants, which influence the activity of brain chemicals (neurotransmitters) in the body, are available.

Anti-anxiety medication can also be used. Sedatives should however be used on a short-term basis only as they have a risk of dependence.

Psychotherapy (talk- therapy): People with GAD can be seen as viewing the world through a lens that colors everything with negative predictions. Psychotherapy focuses on attempting to change this perspective.

A type of psychotherapy, cognitive behavioural therapy (CBT) includes self-monitoring and cognitive restructuring. Self-monitoring involves paying closer attention to one's thoughts and feelings. The technique is useful in demonstrating to oneself the connection between fearful thoughts about the future and feelings of anxiety.

Cognitive restructuring involves providing good counter-arguments that dismiss the logic of fear and worry found in GAD. Common cognitive distortions in GAD include probability overestimation, catastrophizing (looking only at the worst case scenario), and “all or nothing” thinking. Overcoming such distortions requires the help of a mental health professional.

