Case Study: Diagnosis and Treatment of Generalized Anxiety Disorder

Name:

Course:

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Date:

Introduction

It is normal to experience anxiety from time to time in life especially when one is stressed. However, excessive and persistent worry and anxiety can be challenging to control and affect the day day-to-day activities. Excessive and prolonged anxiety can a sign of a generalized anxiety disorder (GAD). GAD is characterized by excessive and persistent worry about many different things. Individuals with GAD may antedate calamities and seem to be much concerned about work, family, health, money, and other issues. Baer (2015) states that people with GAD have a challenge in a controlling their worry. They are much worried about actual events or may anticipate the worst even when there is seeming reason for concern. GAD has symptoms similar to obsessive-compulsive disorder, panic disorder, and other forms of anxiety although they are all different conditions. Like diabetes and heart disease, anxiety disorders are complex and result from a combination of developmental, behavioral, genetic and other factors (Gerbarg & Brown, 2017). GAD can be treated using specific types of psychotherapy and drugs based on the preference of the patient and physician. This paper seeks to explore treatment case for a 46-year old male patient diagnosed with GAD. Besides the paper discusses some treatment decisions which will be put into consideration and their rationalization in the treatment of GAD as well as factors that can affect the patient's pharmacodynamics and pharmacokinetic decision.

## Decision Point One

### Chosen Decision

Start with Zoloft 50 mg PO daily

### Reason for Choosing this Decision

The patient was diagnosed with GAD upon examination of his clinical presentations in the clinic. Various medications can be used to treat this condition. The patient was administered with a dosage Zoloft 50mg PO daily. Zoloft is a first line drug belonging to a

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group of drugs called selective serotonin reuptake inhibitors (SSRIs). Zoloft acts by affecting chemicals in the brain may be unbalanced in individuals with GAD, obsessive-compulsive symptoms, panic, and depression. Zoloft is used to treat GAD, post-traumatic stress disorder, anxiety disorders, panic disorders, obsessive-compulsive disorder, and depression. Other drugs which can be used to treat the generalized anxiety disorder include hydrazine and imipramine. However hydrazine and imipramine are second-line agents, and it is advisable to use them as an alternative to trying first-line agents (Cuijpers et al. 2014). However, the use of hydrazine can cause constipation, blurred vision, dizziness, and drowsiness when administered to treat GAD. Similarly, imipramine is not recommended for individuals with myocardial infarction because it can cause adverse effects which can be fatal. Therefore, Zoloft is the most recommended antidepressant which can be used to begin treatment for this patient.

## Expected Results

Zoloft is an effective antidepressant that is expected to attain therapeutic action within the first two weeks of administration. The patient is expected to have improved energy levels, sleep, and mood by the fourth week of therapy. Zoloft is also expected to decrease unwanted thoughts, anxiety, fear, and some panic attacks. The shortness of breath and tightness of chest are expected to start disappearing by within the first three weeks. The patient should, therefore, show a decreased score of HAM-A scale. The dosage is based on a medical condition of the patient and response to treatment. The physicians may direct the patient to begin the medication at a low dose and gradually increase the dose with the aim of reducing side effects (Cuijpers et al. 2014).

## Difference between Expected Results and Actual Results

After four weeks the patient returns to the clinic and reports that he does not experience shortness of breath and tightness in the chest tightness. The patient also states that he had noticed

decreased worries about work over the last 4 or 5 days. Upon administering the HAM-A scale, it registered a score of 18 from the earlier partial response of 26. Although the rate at which the HAM-A was decreasing nearly contrary to the expectations, other results presented by the patients were moderate outcomes of the treatment and resembled the expectations of the therapy.

## Decision Point Two

## Selected Decision

Increase dose to 75mg orally

## Reason for Selection

The dosage of Zoloft is based on the condition of the patient and response to treatment. The reason why this decision was adopted by gradually increasing the dose to 75 mg is to fasten recovery and reduce the risks for side effects associated with the drug. At this point, the Zoloft is yielding the expected treatment outcomes, and the patient is responding positively to the therapy administered (Bandelow, 2015, p. 185). However, increasing the dose to 100mg may lead to an overdose and lead to side effects.

## Expected Results

Increasing the dosage is expected to enhance the action of Zoloft and fasten recovery. The HAM-A scale is expected to register a decrease of over 50% in its score by the end of four weeks. Besides, the feelings of worries about work and work are even expected to disappear further Barlow, D. H., (Allen & Choate, 2016, p.841). The patient is expected to attain normal breathing and reduced chest tightness.

## Difference between Expected Results and Actual Results

After four weeks the patient returns to the clinic and reports an even further reduction of his symptoms. The patient registers considerable decrease HAM-A scale to 10 which is 61%

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decrease. The results resemble the expectations of the therapy. Increasing the dose was aimed at fastening recovery. The symptoms of the therapy decreased by over 50% as expected and this indicated that the treatment had a successful response.

## Decision Point Three

### Selected Decision

Maintaining current dose

### Reason for this choice

Maintaining the current dose of 70 mg orally is meant to achieve a maximum positive response of the drug. Administration of Zoloft has shown a positive change in the state of the patient from the beginning. The current dose has yielded a decrease of 61% in the symptoms, and this means the dose is working very well and should be maintained at that dosage before changing the amount. Increasing the dose can result in adverse side effects as a result of an overdose.

### Expected Result

With the current dose showing a good positive response, it is expected that it will continue being effective in alleviating the GAD. Besides, it is expected that the amount of dosage administered will not have any side effects as it has been working effectively without any side effects. The patient is expected to have fully recovered by the twelfth week of this therapy and should not be experiencing further worries (Lader, 2015). Also, the shortened breathing and chest should completely disappear by this time.

### Differences between Expected Results and Actual Results

The current dose is meant to alleviate the condition of the patient. Administration of Zoloft should do away with the condition by the twelfth week of treatment. The generalized

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anxiety disorder should be fully treated at the end of the twelfth week Wasson, Emeruwa & Davidson, 2017). It is therefore possible that the nervous feelings, anxiety, and worries should cease. The expected results have consisted with the actual results.

<p align="center">Impact of ethical considerations on the Treatment Plan</p>

Ethical considerations were given a priority during decision making in planning for this treatment. Nilsson and Eriksson, (2017) argue that therapy for GAD dictates that some ethical considerations that will be made about the ethics before working with the treatment plan. Ethical considerations impacted on the decisions meant to use Zoloft which is a first-line agent rather than hydrazine and imipramine which are second-line agents. Using these second-line agents could have triggered several ethical questions due to the potential side effects associated with the use of hydrazine.

<p align="center">Conclusion</p>

GAD is characterized by excessive and persistent worry about many different things. Individuals with this condition experience extreme worry that can interfere with sleep and result in nausea, headaches, and tiredness. GAD can be treated with the use of antidepressants such as Zoloft which helps to the condition in about twelve weeks. Treatment of this condition is impacted by some ethical considerations which determine the best form of therapy for the condition.

<p align="center">Also Read: Write My Nursing Case Study</p>

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