

Title Treatment of Anxiety Disorders

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Summary and conclusions in English, and full text report in Swedish

are available on www.sbu.se

Aim

To investigate the evidence on treatments available for anxiety disorders. Economic aspects were considered.

Conclusions and results

(partial list)

- Effective treatment options are available for all anxiety disorders. Apart from specific phobias, the effects of pharmacological and psychological treatments are only moderate. Symptoms are alleviated, but full remission is seldom accomplished. With few exceptions, symptoms recur when treatment is completed.
- Socioeconomic costs primarily in terms of lower productivity and greater ill health, raised death rates, and increased need for somatic care (treatment of physical symptoms) – are high. The cost effectiveness of various treatment options has not been determined.
- Scientific evidence is insufficient for comparing either the efficacy or cost effectiveness of different treatments.
- Some benzodiazepines are shown to be effective in treating certain anxiety disorders. However, it is well established that the drugs cause significant problems in terms of side effects, dependence, or exacerbation of symptoms after a certain period of treatment.
- No study has unequivocally explained why anxiety disorders are associated with raised death rates. Longterm studies on how to reduce raised death rates through some form of intervention are lacking.
- There are too few studies of relevant quality on psychodynamic therapy to evaluate its effect.

Methods

This was a systematic review covering literature up to 2005. A protocol was developed to assess the studies. Regarding pharmaceutical studies, only randomized controlled trials were included. Regarding psycho-

therapies, we accepted studies where the control group was on a waiting list. Electronic databases were used in the primary search for literature and supplemented by manual searches, reference lists, etc. Reviewers followed the protocol to rate the quality and internal validity of each study. Scientific evidence for each conclusion was based on the number of studies with high quality and internal validity.

Further research/reviews required

(partial list)

- Studies on the effect of combining antidepressant drugs and psychotherapy
- Studies of diagnosis, treatment, and other services in primary care
- Studies evaluating the effects on treatment in patients with comorbidities.