

## **Clinical Anxiety Scale**

**Rationale for Anxiety Dimension:** There is mounting evidence that co-morbid anxiety and possibly the severity of anxiety symptoms may have a major influence on the treatment outcome of mood disorders, in terms of treatment response and a high risk of suicide and suicide attempts. While co-morbid anxiety disorders diagnosis may be made, they do not capture all of the co-morbid anxiety because of the asymmetry of criteria (e.g. two weeks of criteria symptoms for major depression and 6 months of criteria symptoms for Generalized Anxiety Disorder. Anxiety occurring as a component of a Mood disorder is not captured). Also the severity of the anxiety is not captured by a co-morbid diagnosis. The addition of an anxiety severity dimension may increase clinical awareness and increase the focus of treatment on the severity of co-morbid anxiety as a part of treatment planning, and possibly to the development of more effective treatments for co-morbid anxiety in the mood disorders and perhaps other disorders.

At present, the Mood Workgroup is considering a simple method by which a clinician is able to rate anxiety severity on a single dimension, useful for both mixed anxiety depression and major depression accompanied by anxiety:

Anxious Symptoms:

- a. describes (irrational) worries
- b. feeling uneasy
- c. feeling nervous
- d. motor tension
- e. feels something awful may happen

Anxious Distress- defined as 3 or more of the above anxious symptoms.

- 0. Not anxious
- 1. mildly anxious
- 2. Moderate Anxiety – 2 symptoms
- 3. Severely Anxious 3-5 symptoms
- 4. Severely anxious with motor agitation