

Introduction

Anxiety and depression are not the result of character flaws or personal weakness; they are the result of biological problems in the brain that can be balanced.

It is critical to treat anxiety and depression within the context of your life.

Source: <https://www.amenclinics.com/conditions/anxiety-and-depression/>

Type 1: Pure Anxiety

Pure Anxiety often results from too much activity in the basal ganglia, setting one's "idle speed" on overdrive. People with pure anxiety often feel a great deal of tension and nervousness, and are overwhelmed by feelings of panic, fear and self-doubt; they tend to predict the worst and look to the future with fear. Their symptoms may be a consistently disruptive problem or may come in unpredictable waves.

Type 2: Pure Depression

Pure Depression often results from excessive activity in the deep limbic system—the brain's emotional center. People with this type struggle with depressive symptoms that range from chronic mild sadness (dysthymia) to crippling major depression, where it's difficult to even get out of bed.

Type 3: Mixed Anxiety/Depression

Mixed Anxiety/Depression involves a combination of both Pure Anxiety symptoms and Pure Depression symptoms (listed above). This type shows excessive activity in the brain's basal ganglia and the deep limbic system. One type may predominate at any point in time, but both symptom clusters are present on a regular basis.

Type 4: Over-Focused Anxiety/Depression

Over-Focused Anxiety/Depression involves excessive activity in the brain's anterior cingulate gyrus, basal ganglia and/or the deep limbic system. People with this type have trouble shifting attention and often get locked into negative thoughts or behaviors.

When "difficulty shifting" is combined with excessive basal ganglia activity, people get stuck on anxious thoughts. When combined with excessive deep limbic activity, people get stuck on negative and depressing thoughts. Many people get stuck on both anxiety-provoking and depressive thoughts at the same time. This can look like:

■ **Obsessive-compulsive disorder** (stuck on negative thoughts or actions)

■ **Phobias** (stuck on a fear)

■ **Eating disorders** (stuck on negative eating behavior)

■ **Posttraumatic stress disorder** (stuck on a past traumatic event)

Over-focused Anxiety/Depression tends to occur more frequently in children or grandchildren of alcoholics.

Type 5: Temporal Lobe Anxiety/ Depression

Temporal Lobe Anxiety/Depression is related to too little or too much activity in the temporal lobes, in addition to overactivity in the basal ganglia and/or deep limbic system. The temporal lobes are very important to memory, moods and emotions.

Type 6: Cyclic Anxiety/Depression

Cyclic Anxiety/Depression is associated with extremely high activity in the brain's basal ganglia and/or deep limbic system. These areas of excessive activity act like "emotional seizures" as the emotional centers hijack the brain for periods of time. Those with Type 6 Anxiety/Depression often have little or no control over these intense emotional episodes. Cyclical disorders, such as bipolar disorder, cyclothymia, premenstrual tension syndrome and panic attacks are part of this category, because they are episodic and unpredictable. A cyclical pattern is the hallmark of this type. Like other types, Cyclic Anxiety/Depression is a spectrum disorder, which means that it can range from mild to severe.

Type 7: Unfocused Anxiety/Depression

Unfocused Anxiety/Depression is associated with low activity in the prefrontal cortex (PFC) in addition to high activity in the basal ganglia and/or deep limbic system. The PFC is the brain's CEO and helps with the executive functions such as attention, focus, impulse control, judgment, organization, planning and motivation. When the PFC is underactive, people often have problems with these executive functions. Distinguishing Unfocused Anxiety/Depression from ADD can be difficult because of the similarity in symptoms; however, ADD—in its classic form—starts in childhood and can be seen consistently throughout a person's life. Unfocused Anxiety/Depression may not arise until later in life, and may be misdiagnosed as Adult ADD.

Of note: A variant of Unfocused Anxiety/Depression is caused by overall reduced blood flow and activity in the cortex along with too much activity in the basal ganglia and/or deep limbic system. This pattern may be related to a number of factors, such as physical illness, drug or alcohol abuse, hypoxia (lack of oxygen), infections (i.e. Lyme disease), traumatic brain injury or exposure to toxic substances (i.e. environmental or occupational toxins).

Symptoms of this variant include those listed for Unfocused Anxiety/Depression in addition to frequent feelings of sickness, mental dullness, "brain fog" or cognitive impairment.



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