



## **Anxiety: Who gets it and how is it treated?**

**By Dr. Alisa Cooper, D.C., C.C.N.**

### **Case Histories**

*A) Susan began having bouts of anxiety in her early 20's. Her anxiety would hit her at random, and she would find herself with shortness of breath and her heart beating uncontrollably fast. Her doctor prescribed Xanax, for anxiety, and Paxil for depression, but she continued to suffer occasional panic attacks.*

*B) Joey is nearly 40, but he recalls having always been a nervous kid. Joey suffered through a rough childhood complete with constant ridicule and physical abuse at the hands of his alcoholic dad. His mother, also a victim of domestic abuse, had few coping skills to pass along to him. Joey gets through his days fairly well but swears he can't sleep without his Ambien.*

*C) Pat was around 60 when her anxiety became too much for her. Her husband was a controlling man and after many years of growing apart, Pat wanted out of the marriage. Pat's adult children were livid at her over this and vowed to oust her from the family. To complicate matters, Pat's health problems made her feel too vulnerable to strike out on her own. Desperate for relief from anxiety, Pat accepted a prescription from her MD for Lexipro.*

*D) Jack, 52, is as driven a human being as ever there was. And while his friends and family were used to his perfectionism, it seemed now to be bordering on obsessive compulsive disorder; he literally could not walk into a room without adjusting a tilted picture, smoothing an unruly rug tassel, or making a neat stack out of random papers. Lately, Jack has been noticing that his heart is racing even when he feels "relaxed." Jack's doctor wants him to take Beta-Blockers.*

**These four case histories teach us that anxiety can strike any of us**, and has struck all of us at some point or points in our lives, regardless of gender, age, employment status, education or family history. Secondly, **anxiety can run the gamut** from mild, moderate, to severe or even disabling; its causes **diverse and complex**.

Thirdly, anxiety is usually treated with various medications, which may, or may not be effective, and which may, or may not, have physical and emotional side effects.

### **General Information on Anxiety Medications**

**Benzodiazepines are the most common class of anti-anxiety drugs. They include Xanax, Klonopin, Valium and Ativan. Benzodiazepines are fast acting, meaning they typically bring relief within thirty minutes to an hour and are often given for panic attacks and overwhelming episodes of anxiety. Unfortunately, they do have their drawbacks. Some of the common side effects of benzodiazepines/tranquilizers are drowsiness, clumsiness, slurred speech, dizziness, confusion, depression, disorientation, memory loss, nausea and blurred vision.**

**You did not read that list wrong! Benzodiazepines are associated with depression, and the more the person takes, and the higher the dose, the more depressed they often become.** And while the medication relieves the anxiety, it also blocks feelings of pleasure or pain. Yet, without anxiety, pleasure and pain, how are we supposed to know we are alive? No wonder zombie shows are so popular today. Given the popularity of anti-anxiety medications, maybe the reality of that is not so far off! All kidding aside, because of the safety concerns of anti-anxiety drugs, other medications for treating anxiety have gained popularity such as **buspirone, beta blockers and antidepressants.**

The **antidepressants most widely prescribed for anxiety are SSRIs** (Selective Serotonin Re-uptake Inhibitors) such as Prozac, Zoloft, Paxil, Lexapro, and Celexa. Common side effects include nausea, headaches, sleepiness, sexual dysfunction, dizziness, upset stomach, weight gain and nervousness. These days all **antidepressants** are required by the FDA to carry a warning about **the risk of suicidal thoughts, hostility, and agitation.** There is also a risk that antidepressants will cause an **increase**, rather than a decrease, **in depression and anxiety!**

**Buspirone (aka BuSpar)** is a newer anti-anxiety drug that acts as a mild tranquilizer. Unlike the benzodiazepines, BuSpar is **slow acting and takes about two weeks to start working on anxiety.** On the upside, it's not as sedating, doesn't impair memory and coordination, is **not considered very addictive**, and the withdrawal effects are minimal. One cannot help but wonder what "not very addictive" actually means. Does that mean it is okay to be a little bit addicted? **Common side effects of buspirone include nausea, headaches, dizziness, upset stomach, constipation and/or diarrhea, drowsiness and dry mouth.**

**Beta blockers**, such as Inderal and Tenormin, are traditionally used to treat **high blood pressure and heart problems.** They are now also being prescribed for anxiety. They work by blocking *norepinephrine*, a stress hormone involved in the fight-or-flight response. This helps control the *physical symptoms* of anxiety such as rapid heart rate, a trembling voice, sweating, dizziness, and shaky hands. **Common side effects of Beta blockers include light-headedness, sleepiness, nausea and an unusually slow pulse.**

It must be a considerable relief to be given a reprieve from one's torturous anxiety! But, at what cost? Anti-anxiety medications cause **drowsiness and poor coordination**, and this contributes to **accidents** at home, at work, and on the road. Studies show that taking anti-anxiety medication increases your risk of having a **serious traffic accident**. And while many people may be able to tolerate anti-anxiety medication, many others will react adversely to them. Unfortunately, they are **not safe for everyone**, even when they are used responsibly. **For example, taking anti-anxiety medication with alcohol, prescription painkillers, or sleeping pills can be deadly.** Dangerous drug interactions can also occur when anti-anxiety drugs are taken with **antihistamines**, which are found in many **over-the-counter cold and allergy medicines**.

Medication does not cure the underlying problem that made the individual feel anxious in the first place, and it is usually not a long-term solution. Once you stop taking the medication, the **anxiety symptoms often resurface**. That having been said, if you have severe anxiety that is interfering with your ability to function, medication may be the best choice for you, especially if the benefits outweigh the risks and side effects.

Many people are now looking into **safer, more natural options** such as nutritional supplements and dietary modifications. Also, cognitive behavioral therapy, EFT (Emotional Freedom Technique), life coaching, and many self-help strategies such as meditation, hypnosis, biofeedback, exercise, yoga, laughter therapy and acupuncture often work just as well or better—minus the side effects and risks. Anxiety cannot be treated with a cookbook approach. Each person must be considered within the **context of their lives**, taking into consideration their unique coping skills and biochemical individuality. Utilizing this approach offers considerable hope and help to those who yearn to break free from the chains of anxiety.

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