

Canadian Guidelines for Anxiety in Older Adults

Key takeaways for health care providers

Anxiety is not a normal part of aging and misconceptions about anxiety in older adults have led to it being underrecognized and undertreated. The clinical guidelines provide health care professionals with evidence-based best practices for the prevention, assessment, diagnosis, and treatment of anxiety. Access the full guidelines here.



Screening for Anxiety

Many risk factors for anxiety are associated with aging, such as cognitive impairment, functional limitations, multimorbidity, polypharmacy, poor health, pain and social isolation. However, anxiety is not a normal part of aging.



Diagnoses of Exclusion

It is important to rule out medical conditions, delirium, other mental health disorders, psychosocial stressors, medications, or other substances as primary causes. The most important thing to rule out is depression – anxiety is a common presenting symptom of depression in solder adults.



NonPharmacological Interventions

Cognitive Behavioural
Therapy (CBT) and
mindfulness therapy are two
interventions with evidence
for the treatment of anxiety
in older adults.

Psychoeducation about anxiety, supportive therapy, exercise, relaxation training, and referrals to community social support agencies are all important interventions.



Pharmaceutical Treatment

Older adults with anxiety need education and support when starting medication. It is important to let them know that it can take 4-6 weeks to see benefits and manage any initial side effects.

- There is evidence for antidepressants as a first-line treatment for anxiety disorders in older adults.
- Benzodiazepines should not be routinely used for treatment of anxiety given the poor balance of risks and benefits.







Canadian Guidelines for Anxiety in Older Adults

Key takeaways for older adults and care partners

Getting older brings about a lot of changes, some that are positive and some that are stressful. Anxiety is an illness like any other; however, it is not a normal part of aging and misconceptions about it create stigma. Below you will find key evidence-based information presented in the first clinical guidelines on anxiety in older adults. Learn more about anxiety in older adults and access additional resources here/beta/42.



What is Anxiety?

Anxiety refers to worried thoughts, feeling nervous or scared, or uncomfortable sensations in your body. Anxiety is normal in stressful situations, however, it should not last for a long time or be so intense that it gets in the way of your daily life.



Symptoms of Anxiety

Excessive anxiety can make it hard to concentrate or sleep. When you are very anxious, you may find yourself going over the same worries (about your health, finances, family, or something else). You may start to avoid certain situations that make you anxious, which could get in the way of important things.



How to Manage Anxiety

There is scientific evidence that exercise, relaxation therapy, and mindfulness meditation are effective treatments. Psychotherapy, specifically Cognitive Behavioural Therapy (CBT), has been shown to reduce anxiety and treat anxiety disorders in older adults.



Speaking with a Health Care Provider

- When addressing your anxiety with your health care provider, be ready with a list of your symptoms and medications you are taking. This will support a more accurate assessment of your situation.
- You should feel heard and be provided with additional methods to support you.



Medication

When anxiety does not get better, your health care provider might prescribe medication to treat it:

- There is strong scientific evidence to support the use of antidepressants to treat anxiety disorders in older adults.
- Benzodiazepines are not recommended for treating anxiety in older adults, as they can be addictive and cause undesirable side effects such as memory problems and increased risk of falls.

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