Pergamon

Journal of Anxiety Disorders, Vol. 12, No. 5, pp. 421–435, 1998
Copyright © 1998 Elsevier Science Ltd
Printed in the USA. All rights reserved
0887-6185/98 $19.00 + .00

**PII S0887-6185(98)00026-7**

# Medical Utilisation and Costs in Panic Disorder: A Comparison With Social Phobia

Clare S. Rees, ph.d., Jeffrey C. Richards, ph.d.,
and Leigh M. Smith, m.a.

*Curtin University of Technology*

**Abstract**—There is considerable evidence that people with panic disorder utilise the physical health care system more frequently than people in the general community and so incur for themselves, and impose on the public health care system, considerably greater costs. Although this is probably because of specific characteristics to do with panic disorder, it may also be a function of having any anxiety disorder where panic is prominent. This study represents one of the few comparisons of medical utilisation and costs incurred by people with panic disorder to those incurred by people with another anxiety disorder, in this case, social phobia. Before treatment, 41 people with panic disorder, 15 with social phobia and 43 nonanxious controls were interviewed about their use of the medical care system over the previous 12 months. As expected, people with panic disorder had significantly higher utilisation rates than either the nonanxious controls or the socially phobic subjects, and incurred substantially higher costs. Adequate screening for panic disorder at the primary medical care level together with appropriate treatment referral therefore have the potential to substantially reduce the personal and community costs incurred by people with panic disorder. © 1998 Elsevier Science Ltd

"A 38 year old Puerto-Rican woman admitted to the emergency department reported chest pain, dizziness, shortness of breath, and the fear that she was dying. The electrocardiogram showed no abnormalities. She had no cardiac risk factors" (Tommasini & Federici, 1992, p.319). This example is one of many similar presentations in which panic disorder often remains unidentified because of the presumed presence of an underlying medical condition. For people with panic disorder, the experience of heightened anxiety symptoms usually occurs without the person being able to identify any obvious cause. As a result, the origins of the symptoms experienced are unclear, particularly during the initial

Requests for reprints should be sent to Jeffrey C Richards, School of Behavioural & Social Sciences & Humanities, University of Ballarat, P.O. Box 663, Ballarat, Victoria 3353, Australia.

panic attack. The frightening symptoms of palpitations, tachycardia and chest pain for example, result in many sufferers seeking treatment at emergency departments because they fear they are experiencing a heart attack.

Compared to people with other psychological disorders, those with panic disorder may have the highest use of emergency departments for problems with an emotional origin (Weissman, 1991). Indeed, Katon, Vitaliano, Russo, Jones, and Anderson (1987) stated that people with panic disorder frequently seek medical care services for a wide variety of complaints which includes visits to multiple medical practitioners and the frequent use of emergency rooms, clinics and hospitals. This is consistent with the National Ambulatory Medical Care Survey which gathered information on approximately 90,000 patient visits to a sample of physicians from nine medical specialty groups in the United States and found that anxiety accounted for 11% of all visits (Schurman, Kramer, & Mitchell, 1985). However, despite a large number of visits to primary care physicians and associated specialists, the search for an explanation for the symptoms of panic typically results in frustrating and costly misdiagnoses. In one study of the National Institute of Mental Health Epidemiologic Catchment Area (ECA) program, which was the first major epidemiological study to incorporate the *DSM-III* criteria for panic disorder, Boyd (1986) reported that in comparison with other mental disorders, panic disorder was associated with the highest number of physical and mental health visits. Panic disordered patients were also found to receive about three times more mental health treatment than those with specific phobias, alcohol dependence and drug dependence. More recently, Siegel, Jones, and Wilson (1990) found that people with panic disorder had on average seven times the number of medical visits expected for the general population.

Not surprisingly, such high utilisation rates are associated with greatly increased expenditures on medical services. For example, Sheehan, Ballenger, and Jacobsen (1980) reported that in the United States 100 million dollars were spent in 1980 on health care costs and related employment losses for people with panic disorder. More recently, in the United states it has been estimated that 33 million dollars per year is spent on medical care utilisation in individuals with panic disorder (Katon, 1992) because as observed earlier by Sheehan (1982), referral to psychiatrists or other mental health professionals typically occurs late in the course of the disorder as patients remain preoccupied with their somatic symptoms which tend to override its emotional component. Delays in proper diagnosis are therefore costly both for the individual and for the health care delivery system. Siegel et al. (1990) suggested that a conservative estimate of annual charges for physician visits for people with panic disorder was $1,068 in 1990, which contrasted to $403 for physician expenditures in the general population. Support for these estimates came from Simon, Ormel, VonKorff, and Barlow (1995) who found that primary care patients with *DSM-III-R* anxiety or depressive disorders have health care costs which are one and a half to twice as high as for those people without a *DSM-III-R* diagnosis. These large cost differences were found after adjustment for medical morbidity.

متن کامل مقاله

دریافت فوری

ISIArticles
مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات