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Diathesis stress model for panic-related distress: a test in a Russian epidemiological sample[☆]

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Abstract

To investigate a cognitive diathesis-stress model, the present study evaluated the main and interactive effects of anxiety sensitivity (AS) and exposure to aversive conditions (past month) in predicting theoretically relevant panic vulnerability variables in an epidemiologically defined sample from Russia ($N = 390$). Consistent with expectation, findings suggested that the combination of high levels of exposure to aversive conditions and high AS physical concerns predicted panic attacks (past week) and agoraphobic avoidance above and beyond the variance accounted for by negative affect. These findings are discussed in relation to biopsychosocial theories of panic disorder, which emphasize the importance of both a cognitive diathesis and stress component in the pathogenesis of the disorder.

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1. Introduction

Diathesis-stress models suggest that specific types of psychopathology arise from a combination of vulnerability factors (diatheses) in the context of life stress. Anxiety sensitivity (AS) is one particularly important cognitive diathesis for panic-related psychopathology (Taylor, 1999). Specifically, AS is theorized to be a dispositional, trait-like cognitive characteristic that predisposes individuals to the development of panic problems (Reiss & McNally, 1985); it encompasses fears of physical, mental, and publicly observable experiences (Zinbarg, Barlow, & Brown, 1997). Both prospective (Hayward, Killen, Kraemer, & Taylor, 2000; Schmidt, Lerew, & Jackson, 1997, 1999) and laboratory (Zinbarg, Brown, Barlow, & Rapee, 2001; Zvolensky, Feldner, Eifert, & Stewart, 2001) studies have supported this line of theorizing. Recent work also suggests the AS Physical Concern subdimension, rather than the other subdimensions, plays a specific role in fear responding to bodily sensations (Zinbarg et al., 2001).

Despite evidence suggesting that AS acts as a cognitive diathesis for panic disorder, relatively little attention has been paid to the stressor component of the model. Neglect of this component is surprising given that aversive life experiences are often associated with anxiety symptoms and problems. For instance, a wide variety of stressful life events (e.g., job loss, medical illness, divorce) are associated with anxiety symptoms (Benjamin, Costello, & Warren, 1990) and often precede the onset of panic disorder (Rapee, Litwin, & Barlow, 1990; Roy-Byrne, Geraci, & Uhde, 1986). Additionally, laboratory research indicates uncontrollable and/or unpredictable aversive events contribute to elevated levels of anxiety and fear (Sanderson, Rapee, & Barlow, 1989; Zvolensky, Eifert, & Lejuez, 2001) and perceived stress predicts fear responses to biological challenge (Zvolensky et al., 2002).

Perhaps because research has thus far indicated various types of stressors can elicit anxiety and fear to internal cues, models of panic disorder development have not specified a single or particular type of stressful event in the onset of the disorder. Rather, these models generally suggest “aversive life events” that elicit a discrete negative emotional response (fear) may lead to anxiety in certain individuals because they view their own emotions or bodily reactions as out of control (Barlow, 2002; Bouton, Mineka, & Barlow, 2001). Hence, these models presently ascribe a general role to aversive life events. Nonetheless, these models do predict that, in the absence of negative life events, people exhibiting a diathesis are not necessarily at increased risk for developing panic problems (Barlow, 2002). This perspective implies that the AS diathesis operates in a threshold type of model, with exposure to aversive conditions being an operative condition on the cognitive diathesis. Specifically, when the AS diathesis is low or below a yet to be specified critical threshold, panic-related symptoms would be relatively unlikely, with the diathesis at a relatively higher set-point, the expression of panic-related distress is conditional on the degree of exposure to aversive conditions. From this perspective, AS is a risk factor for panic psychopathology, but only in the presence of aversive life conditions.

To date, the vast majority of research on vulnerability for developing panic disorder has been conducted in the United States. However, it has been increasingly recognized that psychological science needs to pursue information on issues pertaining to anxiety-related psychopathology across diverse populations. Russia is a country that is currently well suited to testing the diathesis stress model of panic psychopathology. Indeed, the last decade has been a time of great turmoil and stress for Russians. People in Russia have experienced the collapse of their country’s political

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