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Separation anxiety in the elderly

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Abstract

Separation anxiety has been studied in children and young adults but little is known about this form of anxiety in older people. This study aimed to examine socio-demographic, psychological and physical health correlates of separation anxiety in the elderly. Eighty-six ambulatory subjects aged 62–87 years were recruited from primary medical care practices to participate in this study. The presence of lifetime DSM-IV affective and anxiety disorders was determined by structured clinical interview. Subjects also completed a battery of self-report questionnaires measuring levels of state and trait anxiety, juvenile and adult separation anxiety. Adult separation anxiety scores were moderately correlated with juvenile separation anxiety scores ($r = .52, P < .001$), trait anxiety ($r = .55, P < .001$) and state anxiety scores ($r = .66, P < .001$), as well as younger age ($r = .39, P < .001$). Higher adult separation anxiety scores were also associated with a lifetime history of any anxiety disorder ($t = 3.74, df = 84, P < .001$) or any affective disorder ($t = 2.12, df = 84, P < .05$). However, adult separation anxiety was not associated with increasing age, being widowed, living alone or poorer physical health. Clinicians working with the elderly need to routinely explore this form of anxiety as it may complicate the pattern of presentation of other anxiety and affective disorders, and require specific forms of intervention.

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1. Introduction

Studies on heightened levels of separation anxiety have been mainly confined to children and adolescents (Last, Francis, & Hersen, 1987). However, recent case studies and other studies of adult outpatients with anxiety disorders have suggested that fears typical of juvenile separation anxiety disorder (SAD) may persist into early and middle adulthood (Manicavasagar & Silove, 1997) (Manicavasagar, Silove, & Hadzi-Pavlovic, 1998). Such fears have included anxiety when separated from close attachment figures, preoccupation that loved ones will be harmed and avoidance of being alone.

Both genetic factors (Silove, Manicavasagar, O'Connell, & Morris-Yates, 1995) and environmental stressors such as the loss of, or separation from, loved ones and physical ill health have been implicated in the development of heightened separation anxiety (Bowlby, 1973) (Bowlby, 1969). Whilst the elderly are particularly vulnerable to the experiences of loneliness, separation and grief, there has been no previous study of separation anxiety in this age group.

Indeed there have been relatively few studies of anxiety disorders across the adult age span and which have included people aged 65 years and over. Reported prevalence rates have varied depending on the use of hierarchical diagnostic criteria and case threshold criteria (Krasucki, Howard, & Mann, 1998). Phobic disorders, obsessive-compulsive disorder and panic disorder all appear to be commoner in younger life and in females when hierarchical diagnostic methods were used. The same trends were reported for generalized anxiety disorder, but there was no decline in prevalence with age when only threshold criteria were used. Further, apart from agoraphobia, anxiety disorders in old age have tended to persist from early life (Lindesay, 1991). Possible reasons for the decline in the rates of anxiety disorders in the elderly include changes in biological vulnerability (Sheikh, King, & Taylor, 1991), cohort effects, increased mortality in people with early onset anxiety disorders, and misattribution of anxiety symptoms to medical illness (Krasucki et al., 1998).

This study aimed to examine the levels of juvenile and current adult separation anxiety, and to identify possible socio-demographic, medical and psychological correlates of adult separation anxiety in an older sample.

We hypothesized that (a) subjects with heightened levels of juvenile separation anxiety may be more likely to manifest similar symptoms in later life and (b) aspects of increased aging such as illness in, or the death of, family and close associates, reduced availability of social supports, and declining physical independence may be associated with the development or rekindling of separation anxiety in vulnerable older people. Finally, we will describe a series of cases to illustrate symptoms of separation anxiety in older people.

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