Temporal patterns of anxious and depressed mood in generalized anxiety disorder: A daily diary study

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Abstract

Research suggests that anxiety disorders tend to temporally precede depressive disorders, a finding potentially relevant to understanding comorbidity. The current study used diary methods to determine whether daily anxious mood also temporally precedes daily depressed mood. 55 participants with generalized anxiety disorder (GAD) and history of depressive symptoms completed a 21-day daily diary tracking anxious and depressed mood. Daily anxious and depressed moods were concurrently associated. Daily anxious mood predicted later depressed mood at a variety of time lags, with significance peaking at a two-day lag. Depressed mood generally did not predict later anxious mood. Results suggest that the temporal antecedence of anxiety over depression extends to daily symptoms in GAD. Implications for the refinement of comorbidity models, including causal theories, are discussed.

Temporal antecedence of anxiety over depression

Numerous studies have shown that anxiety disorders tend to temporally precede depression, using both retrospective (Essau, 2011) and prospective methods (Rush et al., 2005) with designs that are less vulnerable to the confounds of psychological dependence. However, research has been limited by the use of retrospective designs that do not allow for the separation of temporal order and the measurement of concurrent associations. In this study, we used daily diary methods to determine whether daily anxious mood also temporally precedes daily depressed mood. Daily anxious and depressed moods were concurrently associated. Daily anxious mood predicted later depressed mood at a variety of time lags, with significance peaking at a two-day lag. Depressed mood generally did not predict later anxious mood. Results suggest that the temporal antecedence of anxiety over depression extends to daily symptoms in GAD. Implications for the refinement of comorbidity models, including causal theories, are discussed.
Further, many previous studies on temporal sequencing of anxiety disorders and major depression may have been confounded by the fact that different disorders have varying ages of onset. For example, anxiety disorders often emerge in childhood (Kessler, Berglund, Demler, Jin, & Walters, 2005), whereas depression tends to emerge in adolescence or later (Lewinsohn, Hops, Roberts, & Seeley, 1993). The apparent temporal primacy of anxiety over depression may simply reflect developmental differences in course. Examining daily changes in mood eliminates this potential confound, and may be a more powerful test of the idea that aspects of anxiety act as risk factors for depressive symptoms. Further, scrutinizing symptoms at the daily level may uncover patterns that are not discernable over long follow-up periods. For example, one recent study showed that depression and GAD often develop simultaneously (Moffitt et al., 2007). Even in this case, anxiety may precede depressed mood within simultaneous episodes, a finding that would be obscured by looking only at disorders over long follow-up periods.

Finally, in addition to the methodological benefits and implications for comorbidity models, understanding daily symptom co-occurrence may be useful in its own right, as it would enhance our understanding of the phenomenological experience of the naturalistic course of symptoms within episodes. As anxious and depressed moods vary considerably from day-to-day (de Vries, Dijkman-Caes, & Delespaul, 1990), investigating how symptoms within disorders unfold on a daily basis may provide a more nuanced view of the experience of comorbidity. For example, comorbidity typically implies that two disorders are experienced contemporaneously, but among people with comorbid disorders, it is unclear if symptoms within each disorder emerge and desist in relative synchronicity (i.e., with people feeling depressed on the same days they feel anxious), or if symptoms of one disorder trigger symptoms of the other, or if symptoms of each disorder operate relatively independently. Furthermore, syndromes are made up of different kinds of symptoms, and these may show differing temporal patterns. For example, anxious mood could potentially predict fluctuations one symptom of depression (e.g., depressed mood) but not another (e.g., anhedonic mood). Ultimately, a better understanding of the descriptive nature of symptom co-occurrence could potentially generate hypotheses about the maintenance of symptoms and disorders.

Despite its conceptual and methodological importance, research on daily temporal sequencing of symptoms within disorders is virtually nonexistent. Some evidence (drawing from sources as diverse as experimental research on response to uncontrollable negative events, non-human primate research, and attachment research; Alloy, Kelly, Mineka, & Clements, 1990) suggests that anxiety symptoms may precede depressive symptoms within episodes, but this research remains very limited. One study found that daily fluctuations in anxiety predicted later depressive symptoms (and not the reverse; Swendsen, 1997), but given the paucity of studies, more research is clearly needed.

The current study

We explored temporal associations between anxious and depressed moods over the course of a three-week daily diary study. Diary methods offer several benefits over traditional designs. First, within-subjects designs dramatically increase power. Second,
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