



## Traumatic and socially stressful life events among persons with social anxiety disorder

Brigette A. Erwin<sup>a,\*</sup>, Richard G. Heimberg<sup>a</sup>,  
Brian P. Marx<sup>b</sup>, Martin E. Franklin<sup>c</sup>

<sup>a</sup>Adult Anxiety Clinic, Department of Psychology, Temple University, Weiss Hall,  
1701 North 13th Street, Philadelphia, PA 19122-6085, USA

<sup>b</sup>Department of Psychology, Temple University, USA

<sup>c</sup>Center for the Treatment and Study of Anxiety, University of Pennsylvania School of Medicine, USA

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### Abstract

This study examined the frequency of reexperiencing, avoidance, and hyperarousal symptoms most often associated with posttraumatic stress disorder (PTSD) among 45 persons with social anxiety disorder and 30 nonanxious controls in response to an extremely stressful social event (which did not satisfy *DSM-IV*'s PTSD Criterion A). Avoidance and hyperarousal in response to reminders of socially stressful events were common among patients; more than one-third would have met criteria for PTSD if these events satisfied *DSM-IV* PTSD Criterion A. Frequency of this PTSD-like symptom pattern did not differ among patients who did and did not experience another event that did satisfy PTSD Criterion A. Implications of these findings for the treatment of social anxiety disorder are discussed.

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Etiological accounts of social anxiety disorder are varied and complicated by its heterogeneous symptom profile and a generally incomplete understanding of the causes of anxiety disorders. Nonetheless, the available evidence suggests that multiple genetic (Kendler, Neale, Kessler, Heath, & Eaves, 1992; Schwartz,

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\* Corresponding author. Tel.: +1 215 204 1575; fax: +1 215 204 5184.  
E-mail address: berwin@temple.edu (B.A. Erwin).

Snidman, & Kagan, 1999) and environmental (Lieb et al., 2000) factors contribute to the emergence of social anxiety disorder.

The experience of a conditioning event is reported by a subset of individuals with anxiety disorders, in general, and social anxiety disorder, in particular, as having etiological significance (e.g., de Silva & Marks, 1999; Magee, 1999; Mulkens & Bögels, 1999; Öst & Hugdahl, 1981; Stemberger, Turner, Beidel, & Calhoun, 1995). However, little is known about the qualitative aspects of such events. Do these events involve “actual or threatened death or serious injury, or a threat to the physical integrity of self or others . . . (and responded to with) intense fear, helplessness, or horror,” such that they would meet *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)* Criterion A for posttraumatic stress disorder (PTSD; American Psychiatric Association, 1994, pp. 427–428) as suggested by the findings of Magee (1999), who demonstrated an association between the experience of sexual assault in childhood and the later onset of social anxiety disorder? Or would these events generally be considered to be less impactful (e.g., feeling humiliated after a poor public performance; being rejected by a potential romantic interest), but still be experienced by persons with social anxiety disorder as extremely stressful, as suggested by findings that conditioning events and vicarious learning were associated with the later onset of fear of blushing (Mulkens & Bögels, 1999) and social anxiety disorder (Öst & Hugdahl, 1981)?

Although persons with other anxiety disorders rate life events as having a greater negative impact than do nonanxious controls (Rapee, Litwin, & Barlow, 1990), the degree to which events falling short of meeting PTSD Criterion A are associated with strong emotional reactions is unknown. That persons with social anxiety disorder may experience strong emotional reactions to events not commonly considered to be traumatic (i.e., events that do not satisfy Criterion A for PTSD), such as humiliating social and performance events, is suggested by an emerging line of research on the images and memories experienced by persons with social anxiety disorder. In a study by Hackmann, Clark, and McManus (2000), persons with social anxiety disorder reported negative, spontaneous, recurrent images of events that occurred around the time of the onset of the disorder, the content of which centered around feared social situations and was stable over time. Rachman, Grüter-Andrew, and Shafran (2000) reported that socially anxious college students reported more frequent intrusive thoughts and images about a past anxiety-provoking social event, which interfered with their concentration, than did nonanxious students.

Several recent investigations have described the nature of images in persons with social anxiety disorder. When recalling feared social situations, persons with social anxiety disorder were more likely to take an observer’s perspective (seeing oneself as if through the eyes of another person) than normal controls, a pattern that was specific to social events. However, both persons with social anxiety disorder and normal controls took a predominantly field perspective (seeing events as if through one’s own eyes) for memories of nonsocial situations (Wells,

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