

## Social anxiety disorder in 300 patients hospitalized for alcoholism in Brazil: high prevalence and undertreatment

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### Abstract

**Background:** Although the frequency of social phobia is high among alcoholic patients, this anxiety disorder is often neglected because treatment tends to be focused exclusively on alcohol dependence.

**Methods:** A total of 300 hospitalized alcoholic patients were interviewed using Structured Clinical Interview for the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*, and Liebowitz Social Anxiety Scale as well a questionnaire to check the use of medication for social phobia among alcoholics and the relationship between social phobia and alcohol use.

**Results:** A prevalence of 30.6% was found for specific phobia, 24.7% for social phobia, 22.2% for anxiety disorder induced by alcohol, 19.3% for generalized anxiety disorder, 5% for obsessive-compulsive disorder, 4.6% for posttraumatic stress disorder, and 2% for panic disorder with agoraphobia. Social phobia preceded alcohol dependence in 90.2% of the patients. The frequency of the use of medication for social phobia among social phobic alcoholics was 20.3%.

**Conclusions:** The study confirms the high prevalence of anxiety disorders among alcoholics, particularly of social phobia. It also suggests that social phobia precedes alcohol dependence but shows that the use of medication for social phobia is still infrequent. Further studies are required to check if the failure to identify this comorbidity can make the recovery of alcoholics even more difficult.

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### 1. Introduction

The occurrence of anxiety disorders and disorders because of alcohol abuse or dependence in one same patient, characterizing a comorbidity, has been the object of many studies. Earlier works found an increased frequency of this comorbidity among specific populations in therapeutic settings for the treatment of drug dependence, mental disorders, or in other healthcare settings [1–3]. Later, with the performance of larger epidemiological studies, including the above-mentioned groups as well as in large community samples, it has been shown that such increased frequency was not confined to those environments, rather extending in a general way [4,5].

Several studies have reported that patients who are dependent on psychoactive substances have a higher prevalence of anxiety disorders than expected, and, on the other hand, patients with anxiety disorders have a higher prevalence of abuse or dependence on alcohol and other drugs than expected [3,4]. Nevertheless, these comorbidities are often ignored in alcoholic patients, and the focus of therapeutic attention is limited to the alcohol dependence.

Among anxiety disorders, social phobia is specially important because it is a frequent, disabling, and treatable condition. Patients with social phobia often report that they consider alcohol to be useful in fearful situations and that they drink to minimize anticipatory anxiety [2]. Hence, patients with social phobia develop alcohol-related problems, and patients with alcohol abuse or dependence have a high risk for social phobia, resulting in one of the most frequent comorbid conditions found in clinical practice [1,4].

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Lepine and Pelissolo [6] reviewed investigations on the prevalence of social phobic disorder in alcoholic populations and of alcoholism in groups of social phobic patients. The prevalence of social phobia ranged from 2.4% to 57% (mean 21%) in alcoholic samples. Reciprocally, the diagnosis of alcoholism in samples of social phobic patients ranged from 14.3% to 43.3% (mean 26.5%). Among community epidemiological studies, the National Comorbidity Survey found similar results: the prevalence of lifetime social phobia to be 10.8% in males and 24.1% in females with a history of alcohol abuse. Among those with alcohol dependence, the percentage was 19.8% in males and 30.3% in females [5]. From the data of the Epidemiologic Catchment Area, a lifetime prevalence of 27.6% of alcohol abuse or dependence was found among social phobics [7]. The data from the Epidemiologic Catchment Area and National Comorbidity Survey point to a 2- or 3-fold greater risk for the development of alcohol abuse or dependence among social phobics as compared with non-social phobics, with an odds ratio between 2.2 and 3.5 [6].

Since the 1980s, social phobia has been considered a neglected anxiety disorder in the medical literature despite its social and personal damages [8]. Although at present this disorder is the focus of many studies, it is still underdiagnosed in spite of its high prevalence [9–11].

The overlap of psychiatric disorders is also one of the factors contributing to general clinicians' and psychiatrists' negligence concerning social phobia. This is clearly observed in the low frequency of adequate treatment of this disorder [8,10,11]. In the case of a patient with phobic anxiety who is prone to an addictive behavior, the more apparent problem of drug abuse often becomes the focus of

Table 1  
Social demographic characteristics of the sample of alcoholic patients on treatment from Porto Alegre, Brazil (N = 300)

	Total	Social phobics	Non-social phobics
Gender			
Male	275 (91.7)	65 (87.8)	210 (92.9)
Female	25 (8.3)	9 (12.2)	16 (7.1)
Marital status			
Single	79 (26.3)	19 (25.7)	60 (26.8)
Married	129 (43)	33 (44.6)	96 (42.5)
Divorced/Separated	87 (29)	22 (29.7)	65 (28.8)
Widowed	5 (1.7)	0 (0)	5 (2.2)
Highest level of schooling (complete or incomplete)			
Elementary school	159 (53)	43 (58.1)	116 (51.3)
High school	92 (30.6)	26 (35.1)	66 (29.2)
College	49 (16.3)	5 (6.7)	44 (19.5)
			$\chi^2 = 19.91$ ; $df = 5$ ; $P = .0013$
Age (y, mean $\pm$ SD)			
Total	41.5 $\pm$ 8.6		
Phobics	40.5 $\pm$ 8.3		
Nonphobics	41.9 $\pm$ 8.7		

Values are presented as number (percentage).

Table 2  
Types of psychoactive drugs used by alcoholic patients (N = 300)

Drug	Total	Social phobics	Non-social phobics
Alcohol	211 (70.4)	48 (64.8)	163 (72.1)
Alcohol + cocaine	39 (13)	10 (13.5)	29 (12.8)
Alcohol + cocaine + marijuana	22 (7.3)	6 (8.1)	16 (7.1)
Alcohol + marijuana	18 (6)	7 (9.4)	11 (4.8)
Alcohol + benzodiazepines	3 (1)	0 (0)	3 (1.3)
Alcohol + other	7 (2.3)	3 (4.1)	4 (1.8)

Values are presented as number (percentage).

attention, and the basic state of anxiety is neglected and, as a consequence, the patient is inadequately treated [12].

Patients with social phobia have significantly more comorbid disorders than patients suffering from other psychiatric disorders, and social phobia usually precedes other diagnoses [6,10,13,14]. The evaluation of the chronological order of appearance of social phobia and alcoholism can help the investigation of the self-medication hypothesis for the initial use of alcohol and dependence. According to the self-medication hypothesis, social phobia would precede the development of any problem with alcohol use. Alcohol would be initially used to reduce anxiety [15,16].

The observation that alcohol mitigates anxiety dates back to antiquity. Kushner et al [15] quote Hippocrates' saying that "drinking wine as much as water wards off anxiety and the terrors." The same author ascribes to Westphal the observation, made in 1871, that "the use of beer or wine enables an agoraphobic patient to go through feared places comfortably." Until today, the anxiolytic effects of alcohol as a form of self-medication promoting abuse and dependence are under investigation.

On the other hand, the view that alcohol-related disorders induce anxiety disorders in the long-term has been object of several studies. Kushner et al [15] report that drinking can increase the response to stress and exacerbate anxiety states, suggesting that an anxiolytic effect in the short term may develop into anxiogenic ones in the long term, producing a spiraling vicious circle of alcohol use and anxiety symptoms.

The aims of this study are (a) to evaluate the frequency of anxiety disorders, especially social phobia, in a sample of alcoholic patients; (b) to check the use of medication for social phobia among social phobic alcoholics; (c) to identify the chronological order of the appearance of social phobia and drinking-related disorders; and (d) to assess the effect of alcohol use in the clinical condition of social phobia.

## 2. Methods

Three hundred alcoholic patients who were hospitalized in any of the 2 drug dependence treatment wards of psychiatric hospitals or in a specialized center in the treatment

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