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SEVERITY OF SOMATIC MORBIDITY AND ANXIETY: PATHOLOGICAL REALANGST

M. Linden, B. Muschalla

Research Group Psychosomatic Rehabilitation, Charité University Medicine Berlin, Teltow/Berlin, Germany

Background: Pathological anxiety is typically characterized by the absence of a real threat or danger. But, a persistent reason for anxiety, such as a severe life threatening illness, does not prevent the development of additional pathological anxieties, which has been described as „Pathological Realangst“.

The question is to what degree pathological realangst can be explained by the real threat or preexisting anxiety.

Method: 209 patients (37,8% female) of a cardiology inpatient unit were given the State-Trait-Anxiety-Inventory, the Heart-Anxiety-Questionnaire, and the Progression Anxiety Questionnaire. Treating physicians gave a rating on the severity of somatic morbidity including subjective suffering, short and long term prognosis, impairment in daily living, degree of acute and chronic multimorbidity, and objective parameters of the cardiac condition.

Result: Global or specific ratings on the severity of somatic morbidity did not correlate with general or heart related anxiety. Correlation coefficients ranged between .001 and a maximum of .22 (heart anxiety and subjective suffering).

Conclusion: The results speak against the assumption that the threat by the illness is the explanation for the present anxiety. Instead, anxious patients who are suffering from a somatic illness are also afraid of their health status and present this as cause of their anxiety. In spite of the persistent threat this anxiety is pathological i.e. realangst. It should be treated like other anxiety disorders, although it is more difficult to convince the patient and possibly their treating physicians that the present anxiety is not "normal" but pathological and in need of treatment.