Social Anxiety Disorder

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This month's issue of CNS Spectrums is devoted to the topic of social anxiety disorder (also known as social phobia). Social anxiety disorder has gone from being an orphan disorder—one where little research was ongoing, few treatments were available, and professional and public awareness was low—to one that has begun to attract much attention on all fronts. What has resulted in this sea of change?

People seem to be interested in social anxiety disorder because they see so much of themselves and of people they know in its description. Particularly when the dimension of the disorder related to shyness is emphasized, people can relate. Either they were shy as children, or their children now are shy, or they have friends who are shy. Is social phobia, then, merely shyness or a severe form of shyness? Dr. Denise Chavira and I discuss this possibility in our paper titled “The Shyness Spectrum.”

What do we know about the pathophysiology of social anxiety disorder? In truth, precious little. But, over the past 15 years, researchers have begun to study both the psychological and biological underpinnings of this disorder and interesting findings are beginning to emerge. In their paper, Ms. Karen Rowa and her colleagues review the literature on cognition in social anxiety disorder. They remind us that although persons with social phobia process certain aspects of information differently than persons without the disorder, we are not yet at a point where we can say that these processes cause the disorder itself. Rather, the evidence is stronger that certain cognitive processes lead to the maintenance of the disorder once it is established; hence, the important role for cognitive interventions as part of treatment. Drs. Joseph Bechchuk and Manuel Tancer provide an overview of the biology of social phobia, a field that is still in its infancy. They, like Ms. Rowa and colleagues in their review of cognitive features of social phobia, point to the need for further research.

Although our understanding of what causes social anxiety disorder is not yet well developed, a cadre of new treatments has nonetheless emerged, which we are able to offer to our patients. Drs. Carrie Masia and Franklin Schneier provide a very useful summary of some of the most promising psychosocial treatments for social anxiety disorder, and Dr. Michael Van Ameringen and colleagues do likewise for pharmacologic treatments. There is much to shout about here. Randomized controlled trials support the efficacy of a variety of these therapies, and we are hopeful that they will gain increasing use in clinics around the world. Lest we become complacent, though, we should remember that many patients fail to respond to our treatments, or respond only partially. Moreover, some of these treatments—particularly the cognitive and behavioral approaches—have not been tested outside rarified research settings; hence, the need for better treatments and for more extensive testing of these treatments in “real world” settings.

Each of these papers can be considered an authoritative treatise on its particular topic, complete with current citations to the relevant literature. I thank the authors of these papers for their contributions to this issue.