

# Special Health Matters

## Depression and Anxiety

### ♥ What is the significance of Depression and Anxiety in children and youth?

In the U.S. today, one in ten children suffer from a mental disorder severe enough to cause some level of impairment. All children feel sad, blue, irritable or nervous on occasion. However, when those emotions continue for an extended period or interfere with activities of daily living, the medical home should screen and consider interventions to improve the child's functioning and success in life. Increasingly, the responsibility for providing mental health care falls to primary care providers. Because normal behaviors vary from one childhood stage to another, it can be difficult to tell whether a child is just going through a temporary "phase" or is suffering from depression.

Anxiety is common in children and adolescents and has a comparable rate of occurrence to many physical disorders such as asthma. Since anxiety is developmentally appropriate during certain periods of life, the medical home should have the tools available to distinguish between normal anxiety and clinical anxiety. Prevalence rates vary according to the study but ranges between 5-9% of school age children meeting the criteria for one of the anxiety disorders.

### ♥ What are the symptoms of anxiety and depression in children and youth?

The behavior of depressed children and teenagers may differ from the behavior of depressed adults. Only in the past two decades has depression in children been taken very seriously. The depressed child may pretend to be sick, refuse to go to school, cling to a parent, or worry that the parent may die. Older children may sulk, get into trouble at school, be negative, grouchy, and feel misunderstood.

Anxious children are often overly tense or uptight. Some may seek a lot of reassurance, and their worries may interfere with activities. Anxious children may also be quiet, compliant and eager to please, therefore their difficulties may be missed. **Talk to the child's primary care physician if there are concerns in the following areas:**

- **Personal or family history of Bipolar disorder**
- **Suicidal or suicidal thoughts**
- **Refusal to go to school**
- **Grades have dropped**
- **Not functioning with friends**
- **Major changes in eating and sleeping**
- **Depressed or irritable moods**
- **Difficulty concentrating**
- **Anger, Fatigue, restlessness**
- **Sleep problems**
- **Feelings of worthlessness**
- **Appetite problems**
- **Social withdrawal, change of friends**
- **Decreased interest or pleasure in activities**
- **Complaints of physical symptoms**
- **Hopelessness**

Symptoms of Anxiety include:

- **Constant thoughts and intense fears about the safety of parents and caretakers**
- **Refusing to go to school**
- **Frequent stomach aches and other physical complaints**
- **Extreme worries about sleeping away from home**
- **Being overly "clingy"**
- **Panic or tantrums at times of separation from parents**
- **Trouble sleeping and/or nightmares**
- **Extreme fear about a specific thing or situation**
- **The fears cause significant distress and interfere with usual activities**
- **Avoidance of social situations**
- **Few friends outside the family**
- **Worrying about things before they happen**
- **Constant worries or concerns about family, school, friends, or activities.**

### ♥ Resources

**Medical Home Newsletter June 2006** [http://www.medhomeportal.org/file.cfm?file\\_id=675&](http://www.medhomeportal.org/file.cfm?file_id=675&) (source)

**Anxiety among Kids with LD: Three Clinical Psychologists Discuss Causes and Symptoms**  
<http://www.schwablearning.org/articles.aspx?r=848>