

U02-01

UPDATE ON PHARMACOLOGICAL TREATMENT OF ANXIETY DISORDERS: WHERE IS THE GREATEST ROOM FOR IMPROVEMENT?

D. Baldwin, D. Meron, N. Tiwari

University Department of Psychiatry, University of Southampton School of Medicine, Southampton, UK

The ideal anxiolytic drug would be effective in all anxiety disorders, with a rapid onset of action, across all symptom domains and the spectrum of severity, in achieving remission and minimising disability, in preventing relapse, and in treating comorbid depression. Ideally, the drug would be suitable for once-daily dosage, would have minimal adverse effects or cause minimal interference with everyday life, not lead to the development of tolerance, have no discontinuation symptoms, be suitable in physically ill patients and free from interactions, and be safe in overdose.

But there are no ideal anxiolytic drugs. Response rates to initial treatment can be disappointing, it is not possible to reliably predict likelihood of response; a substantial proportion of patients experience unwanted effects; many will relapse despite treatment adherence; comparatively little is known about further management after initial non-response; and discontinuation symptoms can be troublesome.

Hence there is much room for improvement in identifying those patients who are most likely to benefit from treatment; in choosing between drug and psychological treatments; in choosing the right drug for the right patient groups; in optimising medication dosage to achieve maximum effectiveness whilst minimising adverse effects; in combining drug treatments to enhance efficacy; and in treating over the long term to prevent relapse and recurrence.