Ohio Chapter
INCORPORATED IN OHIO
American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

DIFFERENTIAL DIAGNOSIS OF ANXIETY IN TEENAGED CHILDREN

SEPARATION ANXIETY DISORDER

Developmentally inappropriate and excessive fear or anxiety concerning separation from those to whom the individual is attached, as evidenced by at least three of the following:

- Recurrent excessive distress when **anticipating or experiencing separation from home** or from major attachment figures.
- Persistent and excessive **worry about losing major attachment figures** or about possible harm to them, such as illness, injury, disasters, or death.
- Persistent and excessive **worry about experiencing an untoward event** (e.g., getting lost, being kidnapped, having an accident, becoming ill) that causes separation from a major attachment figure.
- Persistent **reluctance or refusal to go out,** away from home, to school, to work, or elsewhere because of fear of separation.
- Persistent and excessive **fear of or reluctance about being alone** or without major attachment figures at home or in other settings.
- Persistent reluctance or **refusal to sleep away from home** or to go to sleep without being near a major attachment figure.
- **Repeated nightmares** involving the theme of separation.
- Repeated **complaints of physical symptoms** (such as headaches, stomachaches, nausea, or vomiting) when separation from major attachment figures occurs or is anticipated.
- **Causes significant distress** for at least four weeks.

GENERALIZED ANXIETY DISORDER

- Excessive anxiety and worry, occurring more days than not for at least six months, concerning a number of events.
- The individual finds it difficult to control the worry.
- The anxiety and worry are associated with at least one of the following six symptoms:
  - Restlessness, feeling keyed up or on edge
  - Being easily fatigued
  - Difficulty concentrating
  - Irritability
  - Muscle tension
  - Sleep disturbance

SOCIAL ANXIETY DISORDER

- A persistent fear (six or more months) of one or more social or performance situations in which the person is exposed to unfamiliar people or to possible scrutiny by others. The individual fears that he or she will act in a way (or show anxiety symptoms) that will be embarrassing and humiliating.
- Exposure to the feared situation almost invariably provokes anxiety, which may take the form of a situationally bound or situationally pre-disposed panic attack.
- The person recognizes that this fear is unreasonable or excessive.
- The feared situations are avoided or else are endured with intense anxiety and distress.

ADHD VS. ANXIETY

ADHD	ANXIETY
Distractibility/inattention for no reason	Distractibility/inattention because worrying or nervous
No physical complaints when not on stimulants	Physical complaints
Difficulty sleeping due to hyperarousal	Difficulty sleeping due to anxious preoccupation
Stimulants decrease difficulties	Stimulants may worsen difficulties
More in boys	Children: Boys = Girls Adolescents: Girls > Boys

For more information, please visit:
https://tinyurl.com/29ta2dhr