Pathological Anxiety: Emotional Processing in Etiology and Treatment

This is an edited volume in honor of Edna Foa whose work on anxiety disorders has been of considerable influence. Foa’s most seminal paper was published twenty years ago and her model of fear structures has been elaborated to include associations among stimulus and response and meaning representations that may persist through cognitive and behavioral avoidance (Foa & Kozak, 1986). The first chapter by Foa, Huppert and Cahill provides us with an overview of the sweeping systematic research program conducted by Foa and her colleagues over the past twenty years. As the authors indicate, this work owes a great deal to Lang’s earlier work on the fear image that underpins any “emotional processing.” Foa’s work has carried this further to indicate that extinction occurs when new learning takes place— that is, disconfirmation (a cognitive part of learning). Part of this learning is the recognition between “thoughts about harm” and “real harm”— a kind of emotional processing and learning that requires the activation of the amygdala. Of specific interest here is the treatment of PTSD. The fear structure must be activated and treatment should involve exposure to the feared stimulus, elicitation of the feared memory, as dissociation, distraction and derealization are minimized.

Although cognitive elements are implicated in the fear structure— and although Foa and her colleagues have found that successful treatment for PTSD results in a reduction of negative cognitive content— her research also shows that exposure treatment is not significantly enhanced by the addition of cognitive restructuring (Foa et al., 2005). Certainly cognitive content and processing are part of the fear structure, as the chapters by Mathews on emotional encoding and Ehlers and Clark on predictors of chronic PTSD demonstrate. As McNally indicates, PTSD is a disorder of memory—one in which the memory is disorganized, has a large number of unrealistic associations and stimulus elements, and—as Ehlers and Clark show—is characterized by the experience of “nowness” (“It’s happening now”). The promising aspect of Ehlers and Clark’s work on the cognitive content that predicts poorer outcome is that one may be able to modify demoralization, negative views of emotion, and the experience of nowness to achieve more compliance with treatment and a better outcome.

Lang, McTeague and Cuthbert provide an update of the seminal work by Lang on emotional processing— which, indeed, began this entire enterprise of research. Lang claims that the “startle response” is the window (or, perhaps, doorway) to the amygdala—the seat of the fear structure. Lang’s intriguing research shows that different anxiety disorders reflect different degrees of the startle response— with specific phobia and social anxiety disorder leading in magnitude of startle response and generalized anxiety showing the lowest level. Not unlike the work by Borkovec and his colleagues on the emotional avoidance nature of GAD, Lang’s work suggests greater “defensiveness” in GAD, which has higher comorbidity— especially for depression. Thus, Lang’s work on the differential responsiveness of anxiety disorders fits nicely into the model that the fear structure needs to be activated—and, if it is not, anxiety and comorbidity will result.

McNally’s chapter is characteristically concise, informative and highly readable. McNally has been a leading critic of the false memory work. McNally reviews the research on “recovered memory”, indicating that those individuals who claim to have “recovered” old memories are also more likely to falsely recall other information in laboratory studies. His
research on individuals claiming to have been abducted by space aliens indicates that these memories are more common among New Age adherents, and among those who score high in Absorption (fantasy proneness), experience sleep paralysis (which occurs in the twilight zone at awakening before the cortical centers kick in), and who are seen by mental health professionals specializing in hypnosis and regression. Of course, one should be cautious in concluding that all recovered memories are false, since it is possible that they may indeed occur. However, McNally’s work shows that intrusion and *higher* memorability of traumatic events is the general rule— not forgetting.

There is a very helpful chapter on assessment of anxiety disorders (Riggs and Keane) and several good chapters on the current status of work on social anxiety, OCD, PTSD and GAD. Of particular interest is the chapter by Behar and Borkovec whose work has been quite influential in integrating behavioral, cognitive and interpersonal elements. Borkovec’s work traces its routes to Mowrer’s two-factor theory of acquisition and maintenance of anxiety (anxiety conservation). Similar to Lang’s and Foa’s earlier models of the fear structure, Borkovec and his colleagues have emphasized the nature of emotional avoidance in the maintenance of worry. Specifically, worry is generally experienced in the abstract and unemotional modality of language, impeding activation and habituation of the underlying fear structure. Of all the chapters here, Behar and Borkovec’s chapter provides specific examples of treatment interventions (such as the use of imagery to activate affect, expectancy free living and focus on the present moment).

In general, this is an excellent introduction to some of the leading work on pathological anxiety. Of course, no single volume can do it all— for example, there is no coverage of the metacognitive model and very little on Beck’s model. It is my view, though, that these models complement the excellent work described in this volume. All serious students of the cognitive behavioral model of anxiety will find this collection to be of considerable value in understanding the nature of persistent anxiety problems and why and how exposure really works.

References


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