



Cognitive behavioral therapy in treatment of patients with anxiety

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ABOUT THE STUDY

Anxiety disorders are among the most common mental disorders and have a major societal impact. Cognitive-Behavioral therapy (CBT) is one of the most well-studied and effective therapies for anxiety disorders. CBT is a set of therapies and procedures that encourage better adaptive thinking and behaviors in an attempt to alleviate distressing emotional experiences. CBT is distinct from other therapy approaches in that it is highly regimented and frequently manualized.

With good reason, Cognitive Behavioural Therapy (CBT) has become the most widely used treatment for anxiety. According to research, CBT can be an effective treatment for anxiety after as few as 8 sessions, with or without medication. Because of the significant incidence of anxiety disorders (18% of individuals in the United States satisfy criteria for an anxiety disorder over a one-year period), it's important to understand best practices for their treatment. CBT works by identifying and treating the interactions between a person's thoughts and behaviors that cause anxiety. Therapists assist clients in recognizing how harmful thought patterns influence feelings and behaviors. Here's an illustration of how two people's reactions to a scenario can change dependent on their thoughts. CBT sessions are typically held weekly for a set period of time (e.g., 12-16 weeks), with a small number of booster sessions offered later to emphasize independent application of skills. Identification of problematic thinking processes, uncomfortable sensations or physiological experiences, and unproductive behaviors is part of a cognitive-behavioral view of anxiety disorders. When each of these three components interact and mutually reinforce one another, distressing and debilitating levels of anxiety can be maintained over time.

CBT for anxiety disorders employs a number of behavioral methods, the most important of which is exposure therapy. Learning theory is used in exposure

approaches to explain how extended fear is sustained over time. Anxiety and fear, in particular, cause people to avoid situations, activities, and thoughts that they believe will result in disastrous outcomes. The continued avoidance of fearful stimuli and events contributes to the persistence of anxiety. Exposure exercises are designed to urge a patient to confront a scary scenario without participating in avoidance or subtle safety behaviors, which is consistent with the premises behind extinction learning (i.e., doing something to make an anxiety-inducing situation less distressing). After repeated exposures to a feared situation (for example, heights) without engaging in avoidance or safety behaviors (for example, closing one's eyes to avoid looking down), the patient will learn that such a situation is less likely to result in disastrous outcomes, and new experiences of safety will be reinforced. Exposure exercises, like the behavioral studies mentioned in the cognitive intervention section above, allow patients to test their negative beliefs about the possibility of a terrible outcome by exposing themselves to whatever scenarios they have been avoiding.

Over the last several decades, there has been a profusion of CBT techniques that have been tailored to distinct anxiety problem presentations (e.g., panic disorder, specific phobias, and social anxiety disorder). Each disorder-specific treatment manual is written with specific uses of CBT methods for the presenting issue in mind. However, there has been a growing interest in examining Tran's diagnostic approaches to the treatment of anxiety and related illnesses in recent years.

CBT is a proven treatment for anxiety and stress-related disorders. CBT employs specialized approaches to target anxiety-inducing thoughts, feelings, and actions. CBT can be used alone, in conjunction with traditional drugs for the treatment of anxiety disorders (e.g., selective serotonin reuptake inhibitors), or in combination with innovative therapies (e.g., mindfulness). Furthermore, this treatment is adaptable in terms of who it can help. Overall,

whenever a patient is experiencing some form of emotional psychopathology (e.g., an anxiety or depression disorder) or distressing emotions that do not meet disorder threshold but cause distress or

interference in daily activities, a referral to a CBT provider is indicated to pursue a course of treatment to actively address the emotional psychopathology.