

SOCIAL PHOBIA AMONG THE ELDERLY

Akademisk avhandling

som för avläggande av medicine doktorexamen vid Sahlgrenska Akademin
vid Göteborgs universitet kommer att offentligen försvaras i lokal Tore
Ahnhoff, Medicinargatan 16 fredagen den 24 maj 2013 kl. 13.00

Av

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Avhandlingen baseras på följande delarbeten:

- I. Karlsson B, Klenfeldt IF, Sigstrom R, Waern M, Ostling S, Gustafson D, Skoog I. *Prevalence of social phobia in non-demented elderly from a Swedish population study*. American Journal of Geriatric Psychiatry 2009, 17:127-135.
- II. Karlsson B, Sigstrom R, Waern M, Ostling S, Gustafson D, Skoog I. *The prognosis and incidence of social phobia in an elderly population. A 5-year follow-up*. Acta Psychiatrica Scandinavica. 2010 Jul;122(1):4-10.
- III. Karlsson B, Ostling S, Waern M, Skoog I. *The prevalence of social phobia and depression and its relation to personality traits in 75- and 85-year olds without dementia*. (Manuscript)
- IV. Karlsson B, Johansson B, Ostling S, Waern M, Skoog I. *Social phobia in relation to cognitive functioning in 75- and 85-year olds without dementia*. (Manuscript).



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Background: Social phobia is common and often associated with impairment in daily activities and reduced quality of life. Comorbidity with depression and other anxiety disorders is not unusual in social phobia. Few studies have examined social phobia in elderly populations.

Methods: The study samples were derived from the Prospective Population Study of Women (PPSW) and from the H70, the H75 and the H85 birth cohort studies in Gothenburg, Sweden. All study samples comprised a general population sample of non-demented elderly, above age 70. The procedures were identical with a semi-structured psychiatric examination including the Comprehensive Psychopathological Rating Scale (CPRS), and the Mini International Neuropsychiatric Interview (MINI-D). Social phobia was diagnosed according to the DSM-IV criteria. Personality traits were assessed with the Eysenck Personality Inventory (EPI). Cognitive function was measured with the Mini-Mental State Examination (MMSE), and a battery of eight different psychometric tests.

Results: The prevalence of social phobia in 70-95 year-olds varied between 1.9% and 3.5% depending on how the DSM-IV diagnostic components were applied. Almost half of those diagnosed with social phobia at baseline had no longer social fears at 5-year follow-up. Individuals with social phobia more often had minor or major depression, and scored higher on neuroticism and lower on extraversion compared to individuals without symptoms of social phobia. Comorbidity between social phobia and depression was associated with higher neuroticism and lower extraversion. Individuals with social phobia more often reported concentration difficulties and indecisiveness compared to individuals with no symptoms of social phobia.

Conclusion: Our results indicate that the DSM-IV criteria might exclude a large group of individuals with clinically significant social phobia, and that social phobia has a good prognosis of spontaneous recovery. Neuroticism and extraversion may be important etiological factors for social phobia in old age. Furthermore, these personality characteristics may be one reason for the high comorbidity between social phobia and depression among the elderly. We found that those with social phobia more often had subjective cognitive complaints and poorer interviewer-rated memory. On the other hand, the association between social phobia and cognitive test performance was relatively minor.

Keywords: Social phobia, epidemiology, elderly

ISBN: 978-91-628-8700-1