



# ANXIETY TREATMENT DECISION AID

A guide to choosing the proper anxiety treatment option for your child.

This information reflects the best available research studies. It was prepared by Mayo Clinic researchers without funding from makers of depression medicines.

# Reduction in Anxiety Symptoms

**CBT** 



**SNRI** 



**SSRI** 



**CBT + SSRI**  



# Improvement in Day-to-Day Function

**CBT** 



**SNRI** 



**SSRI** 



**CBT + SSRI**  + 



# Treatment

## CBT

14 Sessions 60-90 mins each - followed by 2-4 sessions (60 mins) per year for next 5 years.

## SNRI

Daily pill and 8 appointments for 12 weeks - followed by daily pill and 2 appointments/year for 5 years.

## SSRI

Daily pill and 8 appointments for 12 weeks - followed by daily pill and 2 appointments/year for 5 years.

## CBT + SSRI +

14 Sessions 60-90 mins each - followed by 2-4 sessions (60 mins) per year for next 5 years AND daily pill and 8 appointments for 12 weeks - followed by daily pill and 2 appointments/year for 5 years.

# Side Effects

## CBT

None

## SNRI

- Sleepy/Fatigue
- Stomach Problems/Appetite
- Agitation
- Weight changes

## SSRI

- Stomach Problems/Appetite
- Difficulties sleeping
- Agitation
- Weight changes

## CBT + SSRI +

- Stomach Problems/Appetite
- Difficulties sleeping
- Agitation
- Weight changes

# Cost

**CBT** 



**\$65 per month for 5 years\***

**SNRI** 



**\$88 per month for 5 years\***

**SSRI** 



**\$68 per month for 5 years\***

**CBT + SSRI** 



**\$133 per month for 5 years\***

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\* Cost will vary based on insurance coverage, cost in the first year will be the highest and decreases over the following years.

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The information in this document is intended to help health care decision makers—patients and clinicians, health system leaders, and policymakers, among others—make well-informed decisions and thereby improve the quality of health care services. This is not intended to be a substitute for the application of clinical judgment. Anyone who makes decisions concerning the provision of clinical care should consider this report in the same way as any medical reference and in conjunction with all other pertinent information, i.e., in the context of available resources and circumstances presented by individual patients. AHRQ or U.S. Department of Health and Human Services endorsement of any derivative products that may be developed from this document, such as clinical practice guidelines, other quality enhancement tools, or reimbursement or coverage policies, may not be stated or implied.