

Correlation between Bad Mood and Cognitive Impairment in Patients with Anxiety Disorder

Siyu Zhou

Qingdao Pegasus California School, Qingdao, 264000 China

Abstract

To comprehensively analyze and study the correlation between adverse emotion and cognitive impairment in patients with anxiety disorder. Method;60 patients with anxiety disorder treated in our hospital from February 2020 to February 2021 and 40 patients undergoing routine examination in our hospital in the same period were selected as the research goal. 60 patients with anxiety disorder were set as the research group and 40 community health personnel as the reference group, and then the adverse emotions of the research group and the reference group, such as anxiety depression and cognitive function were compared and analyzed. Result;After comparative analysis, compared with the reference group, the patients in the study group had more serious bad emotions, and the difference was statistically significant ($P < 0.05$). At the same time, the more serious the bad mood was in the study group, the more serious the cognitive impairment was, and the two syndromes were positively correlated. Conclusion;Bad emotions are directly related to the impairment of cognitive function in patients with anxiety disorder. We should pay close attention to the patients' bad emotions in treatment.

Keywords

Anxiety Patients; Bad Mood; Cognitive Impairment; Correlation.

1. Introduction

Anxiety disorder is a common neurosis dominated by anxiety. Anxiety disorder has brain dysfunction of persistent anxiety, persistent fear, tension and autonomic nerve activity disorder, often accompanied by physical discomfort and motor anxiety. China's incidence rate of anxiety disorder is about 2%, of which incidence rate of situational anxiety disorder is 33%, and incidence rate of generalized anxiety is 41%. At least one third of patients with mental disorders are covered by some form of anxiety. At the same time, with the increasingly fierce social competition and more and more stress factors in life, anxiety like psychological maladjustment will inevitably increase. The ability of human brain to process information, namely neurocognitive function, also known as cognitive function, includes integrating information and processing information at the same time. Based on this, it forms a comprehensive ability to complete tasks and solve problems. This paper selects 60 anxiety patients treated in our hospital and 40 community health personnel as the research goal, and makes a comprehensive and in-depth study on the correlation between adverse emotions and cognitive impairment of anxiety patients, so as to provide reference for clinical diagnosis and treatment.

2. Data and Methods

2.1. General Information

A total of 60 patients with anxiety disorder were selected in this study, belonging to the patients received by our hospital from February 2020 to February 2021 as the research group. In the same period, 40 patients who underwent routine physical examination in our hospital were selected as the reference group. See Table 1 for details.

Table 1. Basic Information of Study Group and Reference Group Personnel

Group	n	Male	Female	Age	Average Age
Study Group	60	37	23	23-64	36.18±1.59
Reference Group	40	27	13	25-59	34.82±1.28

Compare the above data, $P > 0.05$.

2.2. Method

The anxiety and depression scores of the two groups should be evaluated in the study. At the same time, its cognitive function should be evaluated. The degree of anxiety was assessed with HAMA scale and the degree of depression was assessed with HAMD scale. Cognitive function was assessed with the Montreal cognitive scale.

2.3. Statistical Method

In the study, the data related to the two groups were processed with the help of SPSS19.0. The mean \pm standard deviation expressed the measurement data. T test, $P < 0.05$, the difference was statistically significant.

3. Result

According to statistics, the anxiety score of the study group was (19.28±2.39), the reference group was (6.29±1.66), comparison $P=0.001$, $t=9.083$. In terms of depression score, the study group was (21.31±2.01), the reference group was (6.11±1.38), comparison $P=0.001$, $t=12.002$. In terms of cognitive function score, the study group was (24.21±2.47), the reference group was (28.02±2.32), comparison $P=0.001$, $t=15.839$. The degree of anxiety and depression in the study group was divided into mild anxiety and depression (< 10 points), and the score of cognitive function was (26.82±2.14), The cognitive function score of patients with moderate and severe anxiety and depression (> 10 points) was (24.38±2.55). The comparison shows that the more serious the degree of anxiety and depression in the study group, the more serious the cognitive impairment, and the two maintain a positive correlation, $r=1.928$, $P=0.002$.

4. Discussion

Scholars have different opinions on the causes of anxiety disorder. Although somatic diseases or biological dysfunction are not the main causes of anxiety disorders, in some rare cases, patients' anxiety disorders can be caused by the body, such as hyperthyroidism and adrenal tumors. Scholars' research shows that when patients are in an anxiety state, the levels of NE or Na and serotonin in the patient's brain change sharply, but the corresponding results are not clear, that is, these changes are the cause of anxiety disorder.

In the formation of anxiety symptoms, cognitive process or thinking plays a key role. According to the research of scholars, it is not difficult to find that compared with ordinary people, patients with adverse emotions such as anxiety and depression are more likely to think that failure is

waiting for them, that bad things will fall on them, that they are more likely to underestimate their control over negative events, and that ambiguous and even benign events are interpreted as precursors of crisis. The predisposing factor of anxiety disorder is stress events. At present, the pathogenesis of anxiety disorder has not been fully described, which is closely related to body quality and environment.

Scholars believe that anxiety patients are accompanied by increased sympathetic nerve activity and increased alertness, suggesting increased NE or NA activity. In their research on animals, scholars have shown that serotonin also plays a key role in the rise and fall of anxiety, γ -Aminobutyric acid is resistant to anxiety. Lactate is one of the factors causing panic, which can cause anxiety disorder to a certain extent. Anxiety patients show anxiety and fear. They are very worried about things in real life or what will happen in the future. When it is serious, there is no definite worry goal. Anxiety patients also have other symptoms, such as autonomic hyperfunction, muscle tension and so on.

The general name of the process of understanding and knowing things, that is, cognition. Cognition is a unique high-level function of the human brain. In the process of understanding objective things, the process of acquiring, coding, manipulating, extracting and using sensory input information also refers to cognition. Cognition includes many aspects: 1. Attention; 2. Perception; 3 Thinking; 4. Memory; 5. Implementation, etc. The left and right hemispheres process different types of information. Brain injury causes abnormal manifestations of the brain based on the basic functions of information intake, storage, reorganization and processing, including: 1. Poor judgment; 2. Memory impairment; 3. Obstacles to implementation capacity; 4. Attention disorder; 5. Decreased reasoning ability; Communication difficulties, etc. Montreal cognitive assessment method is an important assessment method, which has high sensitivity, contains relatively complete cognitive fields, and can early detect the characteristics of patients such as mild cognitive impairment.

Anxiety disorder is the most common mental disorder at present. The factors inducing it exist in many levels and have a great negative impact on patients' health and daily life. Some patients are ambiguous and hesitant in their daily life, and even extreme in the process of thinking about things. They interpret good things as crisis things, and subconsciously think that bad things will happen to themselves at any time. They have a great sense of loss and frustration in their daily life and lack confidence in life. In addition, combined with the current clinical reception, it can be seen that these patients are accompanied by varying degrees of cognitive impairment, such as slow response and reduced enthusiasm for external things, which will directly affect the normal life of patients.

In the process of actual treatment, in order to ensure the pertinence and effectiveness of all aspects of treatment, it is more necessary to clarify the relationship between the severity of patients' anxiety and depression and the impairment of patients' cognitive function, so as to provide patients with a more comprehensive treatment plan and help patients recover their cognitive function while improving their emotional state.

In this study, our hospital focused on the relationship between the severity of anxiety and depression and cognitive function impairment of anxiety patients. Combined with the analysis, it can be seen that the more serious the patient's anxiety and depression, the more serious the corresponding cognitive function impairment, and the two maintain a positive correlation. It can be seen that the key to improve the cognitive function of this part of patients is still to alleviate the anxiety and depression of patients.

5. Conclusion

In a word, the severity of bad emotions such as anxiety and depression in anxiety patients is closely related to the impairment of cognitive function. Therefore, in the process of treating

anxiety patients, we must pay close attention to the correlation between bad emotions and cognitive impairment.

References

- [1] Luo Wei. Characteristics of Cognitive Impairment in Anxiety Disorder and Its Relationship with Thyroid Function [J]. Practical Journal of Clinical Medicine, 2018, 015(002):157-160.
- [2] Zhou Jingjing, Yang Jian, Zhou Jia, etc. Correlation between Depression, Anxiety Symptoms and Cognitive Impairment in The Elderly in Beijing Community [J]. Journal of Neuroscience and Mental Health, 2018, 18(8):23.
- [3] Qi Hui, Wang Min, Jiang Yan. Study on the Incidence and Influencing Factors of Depression and Anxiety in HIV / AIDS Patients [J]. Journal of Chinese Physician, 2018, 020(006):839-843.
- [4] Lu Meijuan. Effect of Emotional Intelligence Group Health Education on Adult Patients with Anxiety Disorder [J]. Health Research, 2019, 039(001):37-39.
- [5] Gong Jianbing, Wu Chuandong, Zhou Jun. Effect of Emotion on Cognitive Function in Patients with Anxiety Disorder [J]. China Journal of Modern Medicine, 2016, 26(8):114-117.
- [6] Yu Zhonghai, Dong Zhenhua, Liu Yinfeng, etc. Correlation between TCM Syndrome Elements and Syndrome Types of Mild Cognitive Impairment and Montreal Cognitive Assessment Scale [J]. Chinese General Practice, 2016, 19(21):2562-2566.
- [7] Li Haixia, Bai Chunming, Wang Rongxiu, etc. Correlation between Bad Mood and Cognitive Impairment in Patients with Anxiety Disorder [J]. Journal of International Psychiatry, 2017, 44 (1); 68 -71.
- [8] Li Ran. Study on the Current Situation, Influencing Factors and Relationship between Depression, Anxiety and Cognitive Function in The Elderly [J]. China Health Industry, 2015, 12(15):139-14.