



## **UNDERWRITING 201: MOOD AND ANXIETY DISORDERS**

Mood and anxiety disorders are common, and the mortality risk is due primarily to suicide, cardiovascular disease and substance abuse. Risk is highest early in the course of the disorder or within 2 years of hospitalization.

### **TYPES OF MOOD DISORDERS:**

**Mood disorders** are divided into **Depressive Disorders** (*unipolar*) and **Bipolar Disorders** (*manic depressive*). **Dysthymia** is chronic low-grade depression that does not meet the criteria of Major Depression. Criteria for **Major Depression** require a history of depressed mood for at least 2 weeks plus 4 or more of the following;

- 1) Weight Change
- 2) Sleep Disturbance
- 3) Psychomotor Agitation or Retardation
- 4) Feelings of Worthlessness or Guilt
- 5) Difficulty Concentrating
- 6) Suicidal Ideation

To meet the criteria of **Bipolar Disorder**, there must be a history of at least one episode of mania (*abnormal elevated/irritable mood*) in addition to the **Major Depression** criteria.

### **TYPES OF ANXIETY DISORDERS:**

**Anxiety disorders** include **panic disorders, agoraphobia, social phobia, social anxiety disorder (SAD), simple phobia, generalized anxiety disorder (GAD), obsessive-compulsive disorder (OCD) and post-traumatic stress disorder (PTSD)**. Symptoms include worry and nervousness, racing heart, breathlessness, dizziness, sweats, headache, insomnia and other vague complaints. Depressive disorders often overlap with anxiety disorders and in the long term, many patients continue to have symptoms. Recurrences are common for both mood and anxiety disorders.

### **THERAPY:**

Drug therapy (*with or without counseling*) is effective in treating most individuals. The mainstay of therapy for both anxiety and mood disorders is antidepressant drugs. For more severe cases, electroconvulsive therapy (ECT) or anti-psychotic agents may be required. If anxiety is present, treatment may include benzodiazepines and Buspirone. Benzodiazepines are addicting and underwriting caution is necessary, especially in those individuals prone to substance abuse. Bipolar disorder (*manic depression*) is usually treated with Lithium.

**UNDERWRITING CONSIDERATIONS FOR ADULTS WITH MOOD AND ANXIETY DISORDERS**

<b>Mild</b>	No suicidal ideation for 1 year, able to perform normal activities with minimal symptoms. On 0 to 2 medications ( <i>no antipsychotic agents</i> ), rare anxiety attacks, no ECT for more than 19 years, no hospitalization / suicide attempts / disability for more than 9 years.	Non Rated (Standard)
<b>Moderate</b>	No suicidal ideation for 6 months, able to perform normal activities with minimal-moderate symptoms. On 0 to 3 medications ( <i>no antipsychotic agent</i> ), single episode of disability ( <i>of short duration</i> ) no hospitalization / ECT / suicide attempts for more than 9 years.	Table B
<b>Severe</b>	Significant symptoms, requires antipsychotic medication, ECT / hospitalization(s) long episode(s) of disability, single suicide attempt.	Declined within first year of recovery. <ul style="list-style-type: none"> <li>• 2<sup>nd</sup> to 3<sup>rd</sup> Yr. Table D to F</li> <li>• 4<sup>th</sup> to 5<sup>th</sup> Yr. Table B to D</li> <li>• 6<sup>th</sup> to 9<sup>th</sup> Yr. Table B to C</li> </ul> Higher rating for those with multiple severe episodes.

**Applicants under the age of 18 with a history of drug or alcohol abuse, psychotic conditions, with multiple suicide attempts, or frequent panic attacks will be given individual consideration.**

To get an idea how your client with Mood and Anxiety Disorders would likely be viewed in the underwriting process, [CLICK HERE](#) and download our depression questionnaire. Ask your client the questions; record the answers and SEND IT TO US. We will evaluate the information and get back to you right away.

Thank you for your business!



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