Separation Anxiety Disorder
According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), separation anxiety disorder (code 309.21/F93.0) is a fairly common anxiety disorder, occurring in youth younger than 18 years (persistent and lasting for at least 4 wk) and in adults (typically requiring a duration of 6 mo or more). Separation anxiety disorder can also be associated with panic attacks that can occur with comorbid panic disorder. Separation anxiety disorder consists of persistent and excessive anxiety beyond that expected for the child's developmental level related to separation or impending separation from the attachment figure (e.g., primary caretaker, close family member) as evidenced by at least 3 of the following criteria:
- Recurrent excessive distress when anticipating or experiencing separation from home or from major attachment figures
- Persistent and excessive worry about losing major attachment figures or about possible harm to them, such as illness, injury, disasters, or death
- Persistent and excessive worry about experiencing an untoward event (e.g., getting lost, being kidnapped, having an accident, becoming ill) that causes separation from a major attachment figure
- Persistent reluctance or refusal to go out, away from home, to school, to work, or elsewhere because of fear of separation
- Persistent and excessive fear of or reluctance about being alone or without major attachment figures at home or in other settings
- Persistent reluctance or refusal to sleep away from home or to go to sleep without being near a major attachment figure
- Repeated nightmares involving the theme of separation
- Repeated complaints of physical symptoms (e.g., headaches, stomachaches, nausea, vomiting) when separation from major attachment figures occurs or is anticipated
Separation anxiety is often the precursor to school refusal, which occurs in approximately three fourths of children who present with separation anxiety disorder. It is important to screen for selective mutism because some children may have school refusal as a symptom of selective mutism. The diagnosis of selective mutism involves a comprehensive evaluation, including ruling in or out comorbid conditions such as expressive and receptive language delays and other communication disorders.