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„Systematic Information Processing in Patients Experiencing Pathological Worry. The Role of Loss Avoidance and Inhibitory Control”.

Summary

Aim of the study. This work discusses the problems of connection of the intensification of pathological worrying with symptoms of anxiety, generalized anxiety, the use of systematic information processing and heuristics. An attempt was made to examine the connection of these variables with selected neuropsychological indicators: the effectiveness of decision making under conditions of uncertainty (in this case - avoidance of loss) and inhibition control.

Material and methods. The first phase of the study covered N = 251 subjects, a survey containing test items of the Penn State Worry Questionnaire scale (PSWQ), questions about the frequency of consultations with the GP and the symptoms of generalized anxiety disorder were used.

In the second phase of the research, N = 220 people participated. In this phase, STAI State-Trait Anxiety Inventory, PSWQ questionnaire and experimental tasks for measuring algorithmic and heuristic thinking were used (in two types of conditions: with emotionally neutral stimulus material and with anxiety-related connotations).

In the third phase of the study, subjects (N = 60) selected from previous research phases were examined and additionally included (N = 8) on the basis of inclusion and exclusion criteria. In this group, the Iowa Gambling Task and the Stroop B task, implemented in the Psytoolkit software environment, were additionally applied.

Results. 4.7% of respondents met the GAD criteria at the time of the study. 61% of people declaring high levels of worries declared experiencing GAD symptoms during their lifetime. These people visited the GP much more often. There were significant correlation connections between mood and worrying as well as anxiety and mood and style of information processing. There was also a significant correlation connection between the results of the Iowa Gambling Task test and worrying in group of women.
**Conclusions.** The obtained results suggest a high role of worrying as a factor explaining the formation of GAD, but also increasing the number of appointments to the GP. Anxiety and mood have significantly modified the style of information processing in conditions of uncertainty. Among the subjects meeting the GAD criteria, there were more women, and among women, the intensity of worrying was related to the decision-making style oriented on loss avoidance, which is most likely culturally conditioned. An attempt was made to formulate the consequences of the conclusions obtained for prevention and treatment.