# Generalized Anxiety Disorder Treatment-Resistant Algorithm

**Has the patient tried 3 SSRIs or SNRIs as outlined in GAD Treatment Algorithm?**

No →

**Go to GAD Treatment Algorithm**

Yes →

**Add Pregabalin to Primary SSRI/SNRI**

Psychotherapy is strongly advised with treatment-resistant GAD

▸ See Treatment of GAD with Psychotherapy

**Steps for adjunctive medications:**

1. Replace pregabalin for buspirone.
2. Replace buspirone for quetiapine ER, diazepam or lorazepam. Refer patient to specialist.

Note: understand how to talk to your patient about deprescribing benzodiazepines.

← Not tolerated

**Titrate to target dose**

Titrate dose up every week (≥ 2 weeks in older adults) Follow up in 4 weeks

**Starting dose (target dose):**

▸ Pregabalin 50 mg TID (150-600 mg/d)
▸ Buspirone 5 mg BID-TID (20-60 mg/d)
▸ Quetiapine ER 50 mg Qday (50-200 mg/d)
▸ Diazepam 2-4 mg/d (consult specialist)
▸ Lorazepam 0.5-1 mg/d (consult specialist)

No ↑

**Is there a clinically meaningful improvement in symptoms and function?**

**Do not increase dose more than:**

▸ Pregabalin 150 mg/d weekly
▸ Buspirone 5 mg/d every 3 days
▸ Quetiapine ER 50 mg/d weekly
▸ Benzodiazepines: consult specialist

Yes →

**Continue adjunctive medication for at least 6-12 months, and do not discontinue more than one medication at a time, and only after almost all symptoms are gone.**

Note: Treatment discontinuation following more than 6 months of continuous use should be gradual while monitoring for withdrawal syndromes and return of GAD symptoms. Tapering Benzodiazepines should be slow and individualized.