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Effect of Childhood Psychological Trauma on Mood and Neurotic Disorders: A Systematic Review

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Abstract: Childhood trauma has been always associated with an increase in the prevalence of mental illnesses. Here, in this paper, we try to investigate and analyse different research papers to understand the relationship between childhood trauma and neurotic and mood disorders. We analysed more than 55 papers from the various sample populations which comprised various age groups. The results showed that childhood sexual and physical abuse is more prevalent in patients with depressive and anxiety disorders. Also, bipolar and neurotic excoriation patients had a history of childhood trauma. This concluded that childhood trauma can increase the risk of developing mood or neurotic disorders. Keywords: Childhood trauma, abuse, neurotic disorder and mood disorder.

I. INTRODUCTION

Childhood plays an important part in forming an individual's personality and character. It also plays an important role in a person's belief system, cognition, etc. Unfortunately, many children around the world do not have a good childhood or parents and have to go through some unfortunate incidents or environments which can have a significant impact on their adulthood, personality, cognition, etc. According to the data given by WHO (World Health Organization, 2020), globally, it is estimated that around one billion children from the age of 2-17 years have experienced physical, sexual, or emotional violence or neglect in the past year. The National Institute of Mental Health (USA) defines childhood trauma as, "The experience of an event by a child that is emotionally painful or distressful, which often results in lasting mental and physical effects." The following things are considered as traumatic experiences by The National Child Traumatic Stress Network:

- 1) Physical, sexual, or psychological abuse and neglect (including trafficking).
- 2) Natural and technological disasters or terrorism.
- 3) Family or community violence.
- 4) Sudden or violent loss of a loved one.
- 5) Substance use disorder (personal or familial).
- 6) Refugee and war experience (including torture).
- 7) Serious accidents or life-threatening illness.

According to Hopkins Medicine, mood disorder is characterized as, "A mood disorder is a mental health class that health professionals use to broadly describe all types of depression and bipolar disorders." It includes disorders like depression, bipolar disorder, and substance-induced mood disorder. According to (American Psychological Association, n.d.) depression as, "Depression is more than just sadness. People with depression may experience a lack of interest and pleasure in daily activities, significant weight loss or gain, insomnia or excessive sleeping, lack of energy, inability to concentrate, feelings of worthlessness or excessive guilt, and recurrent thoughts of death or suicide." According to (American Psychological Association, n.d.) Bipolar disorder is defined as, "Bipolar disorder is a serious mental illness in which common emotions become intensely and often unpredictably magnified. Individuals with bipolar disorder can quickly swing from extremes of happiness, energy, and clarity to sadness, fatigue, and confusion. These shifts can be so devastating that individuals may choose suicide. All people with bipolar disorder have manic episodes - abnormally elevated or irritable moods that last at least a week and impair functioning. But not all become depressed.

Mayo Clinic Mania defines mania as a more severe type of manic episode that causes more noticeable problems at work, school, and social activities, as well as relationship difficulties. Mania may also trigger a break from reality (psychosis) and require hospitalization. Some of the symptoms of manic episodes are as follows:



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- a) Abnormally upbeat, jumpy or wired.
- b) Increased activity, energy, or agitation.
- c) An exaggerated sense of well-being and self-confidence (euphoria).
- *d*) Decreased need for sleep.
- e) Unusual talkativeness.
- *f*) Racing thoughts.
- g) Distractibility.
- *h*) Poor decision-making, for example, going on buying spree, taking sexual risks, or making foolish investments.

According to the American Psychological Association suicide as "Suicide is defined as the act of killing oneself. Suicide is the 10th leading cause of death in the United States, according to the Centres for Disease Control and Prevention. Frequently suicide occurs in the context of a major depressive episode, but it may also occur as a result of substance use or other disorder. It sometimes occurs in the absence of any psychiatric disorder, especially in untenable situations, such as extreme or prolonged bereavement or declining health." According to (American Psychological Association, n.d.) neurosis means, "any one of a variety of mental disorders characterized by significant anxiety or other distressing emotional symptoms, such as persistent and irrational fears, obsessive thoughts, compulsive acts, dissociative states, and somatic and depressive reactions. The symptoms do not involve gross personality disorganization, total lack of insight, or loss of contact with reality." According to the American Psychological Association, n.d.), anxiety disorders are defined as, "Anxiety is characterized by feelings of tension, worried thoughts, and physical changes. Anxiety disorders such as panic disorder and obsessive-compulsive disorder (OCD) cause recurring intrusive thoughts or concerns and physical symptoms such as sweating, trembling, dizziness or a rapid heartbeat." In this paper, we will focus mostly on panic disorders. Also according to a study published by (Mock & Arai, 2010), individuals with a history of childhood trauma are at greater risk for developing chronic health conditions and more chronic conditions in adulthood. Analysing the seriousness of the topic and how it can leave an impact on an individual as they grow up, in the upcoming review paper we are going to understand and write a review on how Childhood Trauma can have an impact on a person in developing a psychological disorder specifically mood disorders and anxiety disorders by analysing papers on the similar topic.

II. REVIEW OF LITERATURE

A. Mood Disorders

It was found that people with childhood family problems are at increased risk of developing persistent mood disorders. (Angst et al., 2011) We have also observed that negative childhood experiences are one of the most critical elements in determining how underlying genetics are related to environmental factors in the development of mood disorders. (JaworskaAndryszewska & Rybakowski, 2019) In adults with mood disorders, there is an association between cumulative exposure to negative experiences in childhood and different functional outcomes. In particular, cumulative exposure to childhood traumatic experiences was associated with a younger age at first hospitalization and the number of recent suicide attempts; Re-victimization of adults and diagnosis of PTSD; harmful behaviour such as having multiple sexual partners and sharing drug needles; Diagnosis of substance use disorder; self-reported health problems and utilization of medical services; and homelessness. (Lu et al., 2008) Early traumatic experiences were reported more frequently in youth with mood disorders than in the general population, confirming previous research. In this way, traumatic childhood experiences seemed to play a role in the development of the disease. (Konradt CE, et al., 2013) Women who have suffered physical or sexual abuse have a higher rate of mental illness than women in general. (Chartier et al., 2007) A higher prevalence of migraines has been linked to a history of childhood sexual abuse in women with menstruation-related mood disorders (MRMD). (Bunevicius Et Al., 2013)

1) Bipolar Disorder: Bipolar patients are associated with traumatic childhood experiences, and sexual abuse is more common in bipolar I disorder, while emotional neglect is more common in bipolar II disorder. (D. Janiri et al., 2015) There is a strong association between patients with bipolar disorder and emotional abuse followed by emotional neglect. (M. Aas et al., 2014). The same results can be found in a study by (Etain et al., 2008; Goodman et al., 2003), in which they also found the strongest association with emotional abuse in bipolar patients. There was a significant prevalence of childhood traumatic events and mood disorders, and an association between childhood sexual abuse and bipolar disorder. (Jansen et al., 2016) Maternal neglect in bipolar offspring is also related to the development of an affective disorder. (Doucette et al., 2016). There is a link between the development of mood disorders and offspring who have been subjected to emotional abuse. (Manja A. Koenders et al., 2020) In patients with mental disorders (depression, bipolar disorder, and schizophrenia), childhood trauma is more severe and more common than in healthy people. (Xie et al., 2017) A study by Post et al., (2014) found that experiences of verbal abuse in



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childhood are related to the early onset of bipolar disorder, combined with a poor prognosis and deterioration of the course of illness. However, there is no research showing an association between child abuse and intimate partner violence in Indian women with mood disorders. (P.V. Reddy, et al., 2020).

- 2) Mania and Bipolar Disorder: It was found that bipolar disorder patients with a history of child abuse have an increased risk of developing severe manic, depressive, and psychotic symptoms, the early age of onset of bipolar disorder, the risk of rapid cycling, the number of manic and depressive episodes, and the risk of a suicide attempt. (AgnewBlais and Danese, 2016) A study by Sala, R., Goldstein, BI, Wang, S., and Blanco, C. (2014) showed a high rate of child abuse in patients with bipolar disorder. They found that manic patients were the only ones exposed to repeated incidents of community violence, physical and sexual abuse as children. (Zavaschi et al., 2006) However, there was no evidence of a relationship between childhood trauma or lifelong trauma and symptoms of mania over time. Despite the lack of a link between childhood trauma and mania, childhood trauma has been found to be a common environmental component in the development of the bipolar disorder. (Ventimiglia et al., 2019) Patients who experienced physical neglect in childhood had a higher prevalence of severe mood episodes. (Cakir et al., 2015) It is also shown that verbal abuse in childhood is linked to an increase in the frequency and severity of mania. (Post et al., 2014)
- 3) Depression: Some types of childhood trauma have a long-term association with depression. Childhood emotional abuse and neglect, and childhood physical abuse and neglect, were found to have the strongest weekly associations with depressive symptoms. (Ventimiglia et al., 2019) While child sexual abuse has received significant attention as a crucial life experience, its relationship to depression is not as strong as other types of abuse. (Cong et al., 2012; Cutajar et al., 2010; Musliner and Singer, 2014) There is an association between childhood trauma and depressive disorders, alcohol abuse, and eating disorders. 4,444 (Park et al., 2015) patients with a history of childhood trauma had severe and chronic depression and a higher suicide rate. Kim et al. (2013) It was also found that victims of sexual violence are three times more likely to suffer from depression than the general population. (Mondin TC et al., 2016) A study by Hovens et al. (2010) showed that a history of childhood trauma, particularly emotional physical, and sexual abuse in childhood, is associated with an increased risk of developing depressive disorders, even the loss of parents in childhood is only associated with a greater risk of being depressed Associated disorders when the relationship with the surviving family member is poor. (Luecken L. J., 2000) A study by Hovens et al. (2012) shows that a history of reported childhood trauma is associated with the worst course of depressive disorders. A study by Opel N. et al., (2019) shows that childhood abuse is associated with unfavourable outcomes in major depression. This has been demonstrated by Nelson et al. (2016), who demonstrated that childhood abuse increases the risk of depressive disorders, treatment failures, and the chronic course of the disease. Many studies have shown the relationship between childhood trauma and depression in terms of a cause-and-effect perspective. Some studies have shown what can act as a mediator between factors. In a study by Vieira et al. (2020) resilience can act as a mediator between childhood trauma and depressive symptoms. Also a study by Kim S. Ji. et al., (2017) it was shown that rumination in non-clinical participants can act as a mediator between childhood trauma and depression, and this effect was more common in female participants. The hippocampus, a part of the human brain primarily involved in long-term memory storage, shrinks in people with depression (Sapolsky, 2001). A study by Vythilingam, Heim, Newport, et al., (2002) showed that adult women who suffered from major depression and had a history of severe sexual and/or physical abuse in childhood had lower left hippocampal volume than women with depression without a history of child abuse. A study by Gladstone, Parker, and Mitchell et al., (2004) found that there were no distinguishable characteristics based on the severity of depression between depressed women with a history of childhood sexual abuse and those without a history of childhood sexual abuse, people with a history of childhood sexual abuse depression developed early stage of life.

B. Anxiety

Child physical and sexual abuse is associated with the risk of developing anxiety disorders. (Hovens et al., 2010) A history of childhood trauma can lead to poor outcomes for initial anxiety disorder. (Hovens et al., 2012) A study by Kim S. Ji. et al., (2017) demonstrated that rumination in non-clinical participants can act as a mediator between childhood trauma and anxiety. In another study by Safron et al. (2002) patients with panic disorder had significantly higher rates of past childhood physical or sexual abuse than patients with social phobia. In another study by Lähdepuro et al. in 2019, The effects of several different forms of Early Life Stress on anxiety and found that emotional and physical childhood traumas and low childhood Socioeconomic Status were associated with higher anxiety symptoms in late adulthood. These stressors and parental divorce were also associated with a higher risk of clinically significant anxiety symptoms. In addition, the accumulation of different Early Life Stress types was associated with



higher anxiety symptoms and the risk of clinically significant anxiety. Anxiety and pain were associated with a higher prevalence of emotional abuse and emotional and physical neglect in the community population and with a higher prevalence of emotional and physical abuse and emotional and physical neglect in the clinical population. (Kascakova et al. 2020) Patients reporting greater childhood traumatic experiences had a tendency to use more overall maladaptive cognitive emotion regulation strategies, which mediated the relationship between early-life traumatic experience and current depression/anxiety symptoms. This suggests that using maladaptive cognitive emotion regulation strategies is an important possible mechanism underlying the negative effect of childhood trauma on depression/anxiety symptom severity in adulthood. (Jung Huh et al. 2017)

Panic Disorder: In a study by De Venter et al., 2017 they found a link between childhood trauma, particularly emotional neglect, and psychological abuse in the development of a social phobia. In the study by De Venter et al. (2017), there is no significant association between the persistence of panic disorder. It was found that women with a history of childhood sexual abuse were more likely to be diagnosed with lifetime panic disorder than women without a history of childhood sexual abuse. (Gladstone, Parker y Mitchell, et al., 2004). Childhood trauma seems to be a common factor in Psychiatric outpatients however these events don't appear to be a unique risk factor for psychiatric disorders like Panic Disorder. (Friedman et al. 2000) The study by R. D. Goodwin et al. (2005) confirms the results of previous research that has suggested that exposure to childhood physical abuse, childhood sexual abuse, or inter-parental violence is associated with increased risks of panic attacks and panic disorder but we also found that traumatic life events may have a triggering function, but are not a necessary condition to explain the development of the panic disorder. (Bandelow et al. 2002) The influence of childhood trauma as a specific environmental factor on the development of adult psychopathology is far from being elucidated. (Lochner et al. 2010)

C. Neuroticism

Significant positive correlations were found between neuroticism scores and CTQ subscale scores for emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect; significant correlations were also found between neuroticism scores and CTQ subscale scores for emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect. Childhood trauma can also be a factor in neuroticism, which can predispose to mental health problems. (Roy., 2002) Patients who experienced child sexual abuse scored significantly higher on the NEO Neuroticism Scale (Test) than those who did not. (Lysaker et al. 2001) Childhood trauma can influence the development of psychiatric problems in adults in a number of ways. Family dysfunction, cognitive attribution style, and low self-esteem have been identified as psychosocial factors that may influence the association. Traumatized people are more likely to have disadvantaged lives due to their trauma, with more frequent teenage pregnancies, divorces, and worse financial situations. (Weiss et al. 1999). Neurotic excoriation is more common in women and middle-aged people, and childhood traumatic events play an important role in the self-infliction seen in patients with neurotic excoriation from scratching and pulling. (Yalçın et al., 2015).

III.AIM

The relationship between childhood traumatic events and their role in the development of the onset of the course of neurotic and mood disorders in patients with mental illness has not been widely reported. The main aim of this systematic review is to gain an understanding and explore how the traumatic events that a child goes through in childhood can influence the prevalence, onset, course, and difficulty in developing a neurotic and mood disorder and how they are connected.

IV.OBJECTIVE

To analyse and investigate different research papers to understand the relationship between childhood trauma and neurotic and mood disorders.

V. METHODOLOGY

The following review will be mostly focused on the literature which was published after the year 2008 although some papers which are important for our review may go till 2000 as well based on the significance of it. The research papers which will include will be found through Google Scholar, Scinapse, The Lancet Psychiatry, and Academia. The target age group of this study would be 16-30 years. The articles will be selected based on their aim, the purpose of the study, age range, and their results. The search will be started by searching with relevant keywords such as Childhood psychological trauma, neurotic disorders, PTSD, anxiety disorders, panic disorders, childhood trauma, and mood disorders.

VI.ETHICAL CONSIDERATION

All the reporting research papers are registered studies in which the consent and approval of the participant were taken. All the necessary citations are given for the respective studies.



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VII. RESULTS AND FINDINGS ETHICAL CONSIDERATION

Sr. no.	Author	Year	Topic	Journal Name	Main Variables	Place of Publication	Findings
1	Aas, M., Aminoff, S. R., Lagerberg, T. V., Etain, B., Agartz, I., Andreassen, O. A., & Melle, I	201 4	Affective lability in patients with bipolar disorders is associated with high levels of childhood trauma		Childhood Trauma Questionnaire (CTQ) Affective Lability Scale (ALS) Bipolar disorders	Ireland	A multivariate regression version indicated a courting among early life trauma rankings and variations in affective lability among sufferers and controls.
2	Agnew-Blais, J., & Danese, A.		Childhood maltreatment and unfavorable clinical outcomes in bipolar disorder: a systematic review and meta- analysis		Childhood maltreatment, Bipolar disorder	London, UK	Childhood maltreatment predicts adverse medical functions and direction of contamination in sufferers with bipolar disorder.
3	Angst, J., Gamma, A., Rossler, W., Ajdacic, V., & Klein, D.		Childhood adversity and chronicity of mood disorders	archives of psychiatr y and	Chronicity Mood disorders Childhood adversity Coping Self- esteem Personality	USA	Childhood's own circle of relatives troubles are sturdy chance elements for the chronicity of temper disorders. The chance can be mediated in part with the aid of using disturbing persona traits, negative coping and occasional self- esteem.
4	Baryshnikov.	201 7	Relationships between self-reported childhood traumatic experiences, attachment style, neuroticism and features of borderline personality disorders in patients with mood disorders	Journal of		Finland	Moderately sturdy correlations among self- mentioned BPD capabilities and concurrent excessive neuroticism have been found, mentioning youth annoying stories and Attachment Anxiety additionally amongst sufferers with temper disorders. Independent predictors for BPD capabilities consist of younger age, frequency of youth annoying stories and excessive neuroticism. Insecure attachment may also in part mediate the connection among youth annoying stories and borderline capabilities amongst temper disease sufferers.
5	Borwin Bandelow; Corinna Späth; Gabriel Álvarez Tichauer; Andreas Broocks; Göran Hajak; Eckart Rüther		Early traumatic life events, parental attitudes, family history, and birth risk factors in patients with panic disorder	Compreh ensive	Traumatic Life Events, Parental Attitudes, Family History, Birth Risk Factors, Panic Disorder		Traumatic activities at some point of adolescence or unfavourable parental attitudes can be related to later improvement of tension disorders. Although intense annoying activities had been drastically extra common withinside the affected person group, this nevertheless leaves one 1/3 of panic sufferers who did now no longer file any intense annoying activities at all.



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6	Bunevicius et.al.,.	The Association of Migraine with Menstrually Related Mood Disorders and Childhood Sexual Abuse	AL OF WOMEN	Sexual Abuse,	North Carolina.	Women with MRMD can be liable to the improvement of MA, and a record of CSA in ladies with a MRMD seems to show that vulnerability. MRMDs and MA have to be blanketed amongst different bad intellectual and bodily fitness results of abuse records. Routine screening for abuse histories would probably enhance the identity of ladies with expanded danger of experiencing abuse- associated disorders.
7	Cakir, S., Durak, R. T., Ozyildirim, I., Ince, E., & Sar, V.	Childhood Trauma and Treatment Outcome in Bipolar Disorder		Bipolar disorder, childhood trauma, treatment outcome. comorbidity, dissociation, Childhood trauma questionnaire, posttraumatic stress disorder	Istanbul, Turkey	Lifetime prognosis of PTSD is related to terrible reaction to lithium remedy, Childhood Trauma is likewise not unusual place and related to worse scientific final results and terrible reaction to renovation remedy with anticonvulsants Additionally; Blood Pressure with records of CT is related to intense scientific displays and comorbid lifetime psychiatric conditions.
8	Cambell et.al.,.	neuropsychological functioning in the	Social and Integrativ	child abuse; first episode; trauma; schizophrenia	UK	Participants with a record of youth trauma had a substantially better pre- morbid IQ than the no youth trauma institution and experienced a widespread decline in IQ whilst premorbid IQ estimates had been as compared to contemporary IQ estimates. After controlling for premorbid IQ on all domains, the youth trauma institution had a substantially poorer overall performance on responsibilities of semantic fluency, behind schedule visible recall, and visuospatial operating memory. Childhood trauma might also additionally make a contribution to precise neurocognitive deficits and might expect a decrease in the degree of functioning relative to premorbid ability. The strongest link between the categories was
9	Carr et.al.,.	The Role of Early Life Stress in Adult Psychiatric Disorders A Systematic Review According to Childhood Trauma Subtypes	Journal of nervous and	Early life stress, child abuse, maltreatment, psychiatric disorders, violence	Brazil	physical neglect. The development of psychopathology in adults can be predicted by ELS subtypes in childhood and adolescence. ELS initiates, aggravates, perpetuates, and promotes the recurrence of psychiatric diseases, according to scientific research. These findings highlight the need of gaining a better knowledge of the consequences of ELS subtypes, particularly for mental health professionals.



10		200 7			population;	Canada	Multiple health problems, poor or fair self-rated health, pain that interferes with activities, impairment owing to physical health problems, and frequent emergency department and health professional visits were found to have a moderate strength connection, but not frequent general practitioner visits. Females and younger respondents were more affected by these factors.
11			Childhood trauma, family history, and their association with mood disorders in early adulthood	Psychiatr ica	bipolar disorder; depression; childhood trauma; early life trauma	Brazil	In a population-based sample of young adults, this study found more evidence of a link between childhood trauma and mood disorders, with sexual abuse being notably connected to bipolar disorder. The idea that childhood trauma would act as a partial mediator between a family history of mood disorder and grownup mood disorder was also confirmed.
12	Cong et al., E.	201 2	Childhood sexual abuse and the risk for recurrent major depression in Chinese women	-	Childhood sexual abuse, co-morbidity, major depression.	UK	Childhood sexual abuse is strongly linked to Mood Disorders in Chinese women, and this link is stronger as the intensity of the abuse increases. Women who have experienced childhood sexual abuse are more likely to develop depression at a younger age, have longer depressive episodes, and have a higher rate of co-morbidity with General Anxiety Disorder and dysthymia. Although reporting biases cannot be ruled out, our findings support the idea that, as in Western nations, childhood sexual abuse raises the incidence of Mood Disorders significantly in China.
13	Danese, A., & Baldwin, J. R.		Hidden Wounds? Inflammatory Links Between Childhood Trauma and Psychopathology	review of	childhood trauma, maltreatment, psychopatholo gy, psychiatric disorders, inflammation, immunity	UK	Early incidence, childhood psychological trauma may alter immune system development, encouraging chronic activation and hyperreactivity of the inflammatory response throughout childhood into adulthood.
14	Doucette et al., S.		Early parent-child relationships and risk of mood disorder in a Canadian sample of offspring of a parent with bipolar disorder: findings from a 16- year prospective cohort study	Early Interventi on in	mood	Canada	Neglect from a mother is a strong early predictor of mood disorders in offspring with a family history of bipolar disorder, and it may increase emotional sensitivity. Early adversity, maternal neglect, and the risk of eventual mood disorders in offspring could all be reduced with psychosocial support and treatments for high- risk families.



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15	Etain et al., B.		Beyond genetics: childhood affective trauma in bipolar disorder.	Bipolar disorder	affective dimension, bipolar disorder, childhood trauma, emotional abuse , genetic	France	Bipolar disorder and its clinical manifestations are linked to childhood trauma, which may interact with genetic risk factors. The links between childhood trauma and bipolar disease need to be studied further, even if they aren't totally understood. Several recommendations are made for additional research into this environmental component and its interplay with susceptibility genes.
16	Gladstone,, G. L., Parker, G. B., Mitchell, P. B., Malhi, G. S., Wilhem, K., & Austin, MP.	n.d.	Abuse to Deliberate	America n journal of	Childhood Trauma, Depression, Sexual Abuse	n.d.	Sexual abuse as a child is a significant risk factor in the development of depression in women. Depressed women with a history of childhood sexual abuse are a category of patients who may require specialised treatment to prevent recurrence of depression as well as damaging and self-defeating coping techniques.
17	GOODWIN, RENEE D.; FERGUSSON, DAVID M.; JOHN HORWOOD, L.		Childhood abuse and familial violence and the risk of panic attacks and panic disorder in young adulthood	Psycholo gical Medicine		UK	Even after accounting for prospectively measured confounding factors, childhood sexual and physical abuse was linked to an elevated risk of subsequent panic attack/disorder. However, childhood exposure to interparental violence was not linked to an increased incidence of panic attacks or disorder following adjustment. These findings show that clinicians should be mindful that patients who have experienced physical or sexual abuse as a child may be more vulnerable to panic attacks as adults.
18	Hailes, H. P., Yu, R., Danese, A., & Fazel, S.		Long-term outcomes of childhood sexual abuse: an umbrella review		Childhood sexual abuse	UK	Although childhood sexual abuse was linked to a variety of psychosocial and health consequences, only two psychiatric diseases (post-traumatic stress disorder and schizophrenia) and one psychosocial outcome (substance abuse) had high-quality systematic reviews. Further research is needed to determine if services should prioritise therapies that reduce the risk of acquiring certain psychiatric disorders as a result of childhood trauma. More empirical investigations on the developmental pathways from childhood sexual abuse to later results are needed, as well as higher-quality meta-analyses for specific outcomes.



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23	Janiri et al., D.		Childhood traumatic experiences of patients with bipolar disorder type I and type II		Childhood trauma, Bipolar disorders, Suicide	Italy	Childhood trauma assessment, which is important in clinical practise because of its significant relation to suicidality, can reveal minor differences between BD subtypes and Healthy Controls.
22	Janiri, D., Kotzalidis, G. D., Chiara, L. D., Koukopoulos, A. E., Aas, M., & Sani, G		Emotional Reactivity, and Mixed States in Mood Disorders	Psychiatr ic clinics	Mood disorders	Rome, Italy	
21	Huh, Hyu Jung; Kim, Kyung Hee; Lee, Hee-Kyung; Chae, Jeong-Ho	201 7	The relationship between childhood trauma and the severity of adulthood depression and anxiety symptoms in a clinical sample: The mediating role of cognitive emotion regulation strategies	of	Emotion regulation; Childhood trauma; Depression; Anxiety	Korea	In clinical samples, childhood trauma is linked to grownup depression/anxiety symptoms, which is mediated through emotion management techniques. These findings imply that cognitive emotion dysregulation is a significant component in the development of depression and anxiety symptoms in patients who have experienced childhood trauma.
20	Hovens, J. G. F. M., Giltay, E. J., Wiersma, J. E., Spinhoven, P., Penninx, B. W. J. H., & Zitman, F. G.	201 2	Impact of childhood life events and trauma on the course of depressive and anxiety disorders	Psychiatr	childhood life events; childhood trauma; depressive disorders; anxiety disorders	Netherland s	In adults with anxiety and/or depressive disorders, childhood trauma, but not childhood life experiences, was linked to higher comorbidity and chronicity. The association between childhood trauma and a worsening course of depression and anxiety disorders is mediated by more unfavourable clinical features at baseline.
19	Hovens, J., Wiersma, J. E., Giltay, E. J., Oppen, P. v., Spinhoven, P., Penninx, B. W., & Zitman, F. G.	201 0		Psychiatr ica	anxiety; comorbidity; depression; trauma	Netherland s	Anxiety and depression disorders are linked to childhood trauma rather than childhood life events. Childhood trauma appears to play a role in the severity of psychopathology, based on the high connections with the comorbid group. Our findings highlight the need of being aware of the possibility of childhood trauma, particularly in adult patients with comorbid anxiety and depression.



24	Jaworska-Andryszewska, P., & Rybakowski, J. K.			Pharmac ological Reports	Childhood trauma, Depression, Bipolar disorder, Gene- environment interaction	Poland	Negative childhood events can affect the central nervous system, causing structural and functional alterations in the brain, particularly the hippocampus and amygdala, which are linked to the development of bipolar and depressive disorders. Neurobiological effects can also include epigenetic mechanisms like DNA methylation, which can have a long-term impact on brain function. Disturbances in the stress axis, immunological inflammatory processes, and metabolic abnormalities are all somatic sequelae of childhood trauma. Negative childhood experiences may have ramifications for mood disorders therapy.
25	Kang et al., H. J.	201 3	BDNF promoter methylation and suicidal behavior in depressive patients	of Affective	Treatment	Korea	The methylation status of brain-derived neurotrophic factor (BDNF) could be a proxy marker for previous suicidal attempts and a clinical biomarker for poor treatment results in depression patients with suicidal ideation.
26	Karatzias, T., Shevlin, M. ,., Fyvie, C., Hyland,, P., Efthymiadou,, E., Wilson, D., Roberts, N., Bisson,, J. I., Brewin, C. R., & Cloitre, M.		Evidence of Distinct Profiles of Posttraumatic Stress Disorder (PTSD) and Complex Posttraumatic Stress Disorder (CPTSD) based on the New ICD-11 Trauma Questionnaire (ICD- TQ)		ICD-11, Posttraumatic Stress Disorder (PTSD) and Complex Posttraumatic Stress Disorder (CPTSD), ICD-11 Trauma Questionnaire (ICD-TQ)	UK	Complex PTSD was linked to a higher frequency and accumulation of various types of childhood traumatic experiences, as well as lower functional impairment.
27	Kascakova, Natalia; Furstova, Jana; Hasto, Jozef; Madarasova Geckova, Andrea; Tavel, Peter		The Unholy Trinity: Childhood Trauma, Adulthood Anxiety, and Long-Term Pain	nal Journal of Environ mental Research	childhood trauma; adulthood anxiety; chronic pain condition; anxiety disorder; community sample; clinical sample	Slovakia	In both the general and clinical populations, childhood trauma has been identified as a possible contributor to anxiety with associated pain disorders in adulthood.



			functioning, and mood disorder development in	Clinical Psycholo	Mood disorder, Family,		In bipolar children, emotional maltreatment is linked to the development of mood disorders. Surprisingly, the link between emotional maltreatment and the emergence of mood disorders was not reflected in parent-reported family functioning (e.g., support and communication, openness or involvement). Possible possibilities are discussed, and more
	Koenders et.al.,. Konradt, C., Jansen, K., Silva Magalhães, P. V. D., Pinheiro, R., Kapczinski, F., Azevedo da Silva, R., & Desouza, L. D. M.	201	-	gy Archives of Clinical Psycholo gy	Trauma Early trauma, traumatic experience, mood disorders, bipolar disorder, major depression.	UK Brasil	research is required. Young people with mood problems reported more early traumatic events than the general population, validating previous research. Traumatic childhood experiences appeared to play a role in the development of the illness in this way.
	Lähdepuro, Anna; Savolainen, Katri; Lahti- Pulkkinen, Marius; Eriksson, Johan G .; Lahti, Jari; Tuovinen, Soile; Kajantie, Eero; Pesonen, Anu- Katriina; Heinonen, Kati; Räikkönen, Katri		The Impact of Early Life Stress is Anxiety Symptoms in Late Adulthood		Anxiety, Late adulthood, Early Life Stressors	Finland.	Early life stress was also linked to higher levels of late adulthood anxiety symptoms and a higher probability of clinically significant anxiety. Screening senior populations for potentially stressful childhood experiences may aid in identifying people with higher anxiety symptoms and designing preventive and therapeutic measures for those who have been exposed to Early Life Stressors.
	Lochner, C; Seedat, S; Allgulander, C; Kidd, M; Stein, D; Gerdner, A	201 1	Childhood trauma in adults with social anxiety disorder and panic disorder: a cross-national study.	Journal of Psychiatr	Childhood trauma; Social anxiety disorder; Panic disorder; Cross-national	South Africa	In terms of childhood trauma, anxiety disorder patients may differ by country. Certain sorts of childhood abuse may put children at a higher risk of developing psychopathology. Longitudinal research should look into the progression of SAD/PD in people who have experienced childhood emotional trauma.
	Lu, W., Mueser, K. T., Rosenberg, S. D., & Jankowski,, M. K.		Correlates of adverse Childhood Experiences among adults with severe mood disorders		Childhood trauma, Mood disorders	Lebanon, New Hampshire	The findings go beyond what has been found in the general population, implying that unfavourable childhood experiences are linked to poor mental and physical health and functional outcomes in adults with severe mood disorders.
33	Luecken, L. J.		Attachment and loss experiences during childhood are associated with adult hostility, depression, and social support.	Psychom	nSocial	USA	Only when the quality of the surviving Family Relationship is poor is parental loss connected with health-damaging psychosocial features in adulthood.



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			Childhood sexual		Childhood		
34	Lysaker, P. H.	200 1	Childhood sexual trauma and psychosocial functioning in adults with schizophrenia.		sexual trauma, psychosocial functioning, schizophrenia	USA	In adults with schizophrenia, sexual abuse as a kid is linked to lower psychosocial functioning.
35	Malarbi, S., Abu-Rayya, H.M., Muscara, F., & Stargatt, R.		Neuropsychological functioning of childhood trauma and post-traumatic stress disorder: A meta- analysis.	Biobehav ioral	maltreatment,	Australia	Children with and without PTSD who have been exposed to familial trauma have poorer cognition. The most severe cognitive deficits are linked to a diagnosis of PTSD. There is a scarcity of research on children who have experienced non-familial trauma.
36	Marusak, H. A., Martin, K. R., Etkin, A., & Thomason, M. E.	201 5	Childhood Trauma Exposure Disrupts the Automatic Regulation of Emotional Processing	chophar	Automatic emotional regulation, Childhood trauma	USA	Childhood trauma predicts emotion regulation deficits that last decades, and trauma-exposed youth were less able to regulate emotional conflict because they were unable to dampen dorsolateral prefrontal cortex activity and engage amygdala pregenual cingulate inhibitory circuitry during the regulation of emotional conflict. Furthermore, trauma-exposed children had higher conflict-related amygdala activation, which was linked to lower levels of trait reward sensitivity. These findings hint to a trauma- related impairment in automatic modulation of emotional processing, as well as an increase in sensitivity to emotional conflict in threat- detection brain networks.
37	Mock, S. E., & Arai, S. M.		Childhood Trauma and Chronic Illness in Adulthood: Mental Health and Socioeconomic Status as Explanatory Factors and Buffers		childhood trauma, chronic illness, mental health, socioeconomi c status, cumulative disadvantage	USA	Childhood trauma and chronic illness in adulthood are linked in part by mental health and socioeconomic position, with mental health having a stronger effect. Furthermore, an examination of the interactions found that having a higher socioeconomic position may be a protective factor for people who have experienced trauma. The findings also show that cumulative disadvantage following trauma may lead to chronic illness, and that public health expenditures on resources like counselling and economic supports are needed to prevent or mitigate psychological harm and chronic illness caused by traumatic events.
20	Mandia at al		population-based	& Saúde	Sexual violence, Sexual abuse, Mood disorders,	Dencil	There is a substantial link between a history of sexual assault and the prevalence of mental disorders, particularly when it comes to mixed episodes. Furthermore, reports of sexual violence were strongly linked to lifetime suicide risk as well as some socio-demographic
58	Mondin et.al.,.	6	study.	Coletiva	Depression	Brasil	characteristics.



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39	Musliner, K. L., & Singer, J. B.		Child abuse & neglect	Childhood sexual abuse, Emotional support, Depression, Parents, Friend	USA	Adult emotional support from friends and parents is linked to a lower risk of adult depression among survivors of childhood sexual abuse, but only when the abuse was performed by someone other than a parent or caregiver.
40	Nelson, J.		journal	Childhood Maltreatment, adulthood	UK	Childhood maltreatment, particularly emotional abuse and neglect, is linked to severe, early- onset, treatment-resistant depression that lasts a long time.
41	Nemeroff, C. B.	Neurobiological Consequences of Childhood Trauma	Journal of Clinical Psychiatr y	Neurobiologic al perspective, Childhood trauma	Atlanta	Early-life stressors cause neurobiological alterations in both children and adults, increasing the risk of psychopathology. The discovery of the neurological substrates that are influenced by bad childhood experiences should lead to the development of more effective treatments for these conditions.
42	O'Connora, D. B., Greena, J. A., Fergusonb, E., O'Carroll, R. E., & O'Connor, R. C.			Chronic stress, Adversity, HPA axis, Suicide, Depression, Allostatic load	UK	These findings suggest that childhood trauma is linked to a reduction in HPA axis activity in vulnerable adults. The challenge for researchers is to figure out the exact causal processes that link trauma, cortisol, and suicide risk, as well as to see if the effects of childhood trauma on cortisol levels can be changed through psychological intervention.
43	Opel et.al.,.	Mediation of the influence of childhood maltreatment on depression relapse by cortical structure: a 2- year longitudinal observational study.		cortical structure, longitudinal, Childhood maltreatment, depression	Germany	Stress in early life has a negative impact on brain structure, which raises the chance of unfavourable illness outcomes in major depression. Childhood abuse should be investigated in clinical and translational research as a possible cause of a clinically and biologically unique subtype of major depressive illness.
44	Park et al., K. H.	stress, and social	Medicati on	Medical student, empathy, social support, stress	Korea	All of the students' stress and social support were strong predictors of empathy. Medical educators should provide tools to help students build resilience against stress or reduce stress, as well as improve social support, in order to grow or sustain empathy over time. Stress management should also be emphasised, especially among female and first-year students.



	Parlar, M., Frewen, P., Nazarov, A., Oremus, C., MacQueen, G., Lanius, R., & McKinnon, M.	201 4	Alterations in empathic responding among women with posttraumatic stress disorder associated with childhood trauma	Brain and	Adult survivors of child abuse, empathy, posttraumatic, stress disorders.	Canada	Changes in multiple dimensions of empathic functioning were described by women with PTSD linked to childhood trauma, which could be linked to low levels of paternalism
46	Post et.al.,.		Verbal abuse, like physical and sexual abuse, in childhood, is associated with an earlier onset and more difficult course of bipolar disorder.		Early onset bipolar disorder – substance abuse	USA	The link between childhood verbal abuse and ar earlier start of bipolar disorder, other bac prognosis characteristics, and a worsening course of illness suggests that it has a long-term negative influence. In comparative groups without physical or sexual abuse, verbal abuse is a typical issue. The influence of verbal abuse on the progression of bipolar disease appears to be a relevant therapeutic target and deserving of primary and secondary prophylactic attempts Psychoeducation, improved intra-family communication, and coping skills may be particularly beneficial in family-based therapy.
	Reddy, P., Tansa, K.A., Raj, A., Jangam, K., & Muralidharan, K.		Childhood abuse and intimate partner violence among women with mood disorders	Journal of Affective	Childhood abuse, Intimate partner violence, Mood disorders, Depression, Bipolar disorder, Predictive	India	Childhood abuse and intimate partner violence have an additive effect that may lead to the manifestation of serious mental diseases such as Mood Disorders. These factors may also have an impact on the course and outcome of mood disorders, although more research is needed.
	Rivera-Vélez, G. M., González-Viruet, M., Martínez-Taboas, A., & Pérez-Mojica, D.	201	Latina Victims of		child sexual abuse, females, memory, attention, executive functions, dissociation, post-traumatic		The link between child sexual abuse and memory and executive functioning abnormalities supports the theory that people with traumatic experiences and elevated post- traumatic stress disorder and dissociation symptoms may have cognitive changes.
49	Roy, A.	200 2	Childhood trauma and neuroticism as an adult: possible implication for the development of the common psychiatric disorders and suicidal behavior.	Psycholo	neuroticism, suicidal behaviour, Childhood trauma	USA	Childhood trauma may play a role in the development of neuroticism. Childhood traum may play a role in the development o psychiatric diseases in this way. There is a need for large-scale demographic investigations.



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Volume 9 Issue XII Dec 2021- Available at www.ijraset.com childhood Rumination as а trauma, Mediator between rumination, In non-clinical subjects, rumination moderates Childhood Trauma mood, the impact of childhood trauma on the Adulthood Frontiers mediation, and development of mood disorders. Childhood Depression/Anxiety structural in trauma appears to be a key factor in the 201 in Non-clinical Psycholo equation South development of depression and anxiety Participants. modeling Korea disorders. 7 gy Patients with exhibited panic disorder considerably greater rates of prior childhood physical or sexual abuse than patients with social phobia, regardless of the existence of OF HISTORY comorbid anxiety disorders or depression. CHILDHOOD Patients with generalised anxiety disorder ABUSE IN PANIC The reported rates of past physical or sexual abuse DISORDER. Journal that were similar to those in the other two

C M C	SAFREN, STEVEN A.; GERSHUNY, BETH S.; MARZOL, PATRICIA; OTTO, MICHAEL W.; POLLACK, MARK H		SOCIAL PHOBIA, AND GENERALIZED ANXIETY DISORDER	of Nervous and Mental Disease	Childhood Abuse, Panic Disorder, Panic Disorder	USA	diagnosis groups. Patients with anxiety disorders who had experienced childhood maltreatment were also more likely to have concomitant severe depression than those who
N C	MARZOL, PATRICIA; OTTO, MICHAEL W.;		GENERALIZED ANXIETY	and Mental	Disorder, Panic		maltreatment were also more likely to have concomitant severe depression than those who
C	OTTO, MICHAEL W.;		ANXIETY	Mental	Panic	TIC A	concomitant severe depression than those who
							-
51 P	POLLACK, MARK H	2	DISORDER	Disease	Disorder	TICA	
						USA	had not.
52 5	Sala, R.		adults: epidemiologic	of affective	Bipolar disorder, Childhood maltreatment, Dose- response, Course, Epidemiology	UV	The amount of different types of childhood maltreatment correlates with developmental disparities in the course of bipolar disorders, with a worse course and result. To improve the course and outcome of people with bipolar illnesses, early detection and treatment of childhood maltreatment is required.
32 3	Sala, K.	4	response effects.	disorders	Epidemiology	UK	cintanood manteatment is required.
53 S	Sapolsky, R. M.	200 1	the shrinking hippocampus.	United States of	Depression, antidepressant s, hippocampus	USA	Neuronal metabolism and function, as well as cell proliferation, are reduced in a primate model of stress-induced "depression." Furthermore, the fact that there was just a trend toward decreasing hippocampus volume can easily be explained as a result of the stressor's short duration; human studies imply that hippocampal atrophy is visible only after years of significant depression. Finally, the researchers demonstrate that antidepressant therapy inhibits these neurological changes.
54 8	Schofield et.al.,		Traumatic brain injury is highly associated with self- reported childhood trauma within a juvenile offender cohort.	Brain Injury	Traumatic brain injury; offending; childhood trauma	Australia	Early life trauma should be taken into account as a possible antecedent to both childhood TBI and offending, which could explain some of the previously found links between mild TBI and eventual criminal conduct.



			<u> </u>				
55	Soares Vieira et.al.,.		Resilience as a mediator factor in the relationship between childhood trauma and mood disorder: A community sample of young adults	Journal of Affective	Bipolar disorder, Psychological trauma, Depression, Mood disorders, Resilience psychological	Brazil	The findings back with the clinical theory that resilient people are partially insulated from the negative long-term effects of childhood trauma. This study adds to our understanding of the links between early trauma, resilience, and mood disorders.
56	en Friedman; Lisa Smith; Dov Fogel; Cheryl Paradis; Ramaswamy Viswanathan; Robert Ackerman; Brian Trappler	200 2	comparison with other psychiatric	Anxiety	Panic disorder, Childhood sexual abuse, physical abuse		Patients with panic disorder who had experienced physical abuse as a kid were more likely to develop comorbid depression, have more Axis I illnesses, score higher on symptom checklists, and have a history of suicide attempts.
57	Venter, M. D., Eede, F. V. D., Pattyn, T., Wouters, K., Veltman, D. J., Penninx, B.W.J.H., & Sabbe, B.G.	201 7	Impact of childhood trauma on the course of panic disorder: contribution of clinical and personality characteristics.	Acta Psychiatr ica	childhood trauma; panic disorder; course; anxiety disorder; longitudinal	Belgium.	Childhood trauma is linked to the persistence of anxiety symptoms and the development of social phobia after two years, rather than the persistence of panic disorder. The duration and severity of anxiety and depressive symptoms, as well as neuroticism and extraversion, all play a role in these connections.
58	Ventimiglia, I., Van der Watt, A.S.J., Kidd, M., & Seedat, S.		Association between trauma exposure and mood trajectories in patients with mood disorders	of Affective	Childhood trauma, Lifetime trauma, Mood disorders, Mood trajectories	South Africa	Trauma can have a long-term impact on depression trajectories and symptom intensity, therefore identifying a history of childhood abuse and neglect as well as lifelong traumatic event exposure is critical in the assessment and therapy of individuals with mood disorders.
59	Vythilingam, M., Heim, C., Newport, J., Miller, A. H., Anderson,, E., Bronen, R., Brummer, M., Staib, L., Vermetten, E., Charney, D. S., Nemeroff, C. B., & Bremner, J. D.	200 2	Smaller Hippocampal Volume in Women With Major	America n journal of	Hippocampal volume, women, brain, Childhood trauma	n.d.	Adult women with major depressive illness exhibited a decreased hippocampus volume only if they had experienced severe and protracted physical and/or sexual abuse as children. Inconsistencies in hippocampus volume findings in previous studies in major depressive disorder could be explained in part by an unreported history of childhood abuse in depressed participants.
60	Xie et.al.,.	201 8	disorder, and schizophrenia in	Journal of	Childhood trauma; Suicidal ideation; Social support; Depression; Bipolar disorder; Schizophrenia	China	Childhood trauma is more severe and common among patients with mental disorders (depression, bipolar disorder, and schizophrenia) in southern China than in healthy persons. Suicidal ideation is linked to childhood trauma and a lack of social support among individuals with mental illnesses in southern China.



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E., YI SAVRU	I, M., TELLİOĞLU LDIRIM, D. U. N, B. M., ÖZMEN YDEMİR, E. H.	201	Arch	excoriation, skin picking, childhood trauma, psychodermat ology	Turkey	believe that early treatments by dermatologists and psychiatrists, particularly a thorough assessment of childhood traumatic events through therapeutic partnership, are critical, and that psychotherapy interventions can improve treatment outcomes in many patients.
Menegas Pires,	, M., Graeff, M. si, M., Mardini, V. D., Carvalho, R. ., & Eizirik, C.	200	de psiquiatri		Brazil	In a developing country, there is a link between childhood violence and adult mood disorders, particularly in manic patients.

VIII. DISCUSSION

The primary purpose of this review was to examine the effect of childhood trauma on the course of mood and neurotic disorders later in life. In the results, it was seen that women with childhood sexual abuse have an early onset depressive disorders. These women require tailored interventions to tackle depression. It was observed that a wide range of mental illness like PTSD (Posttraumatic Stress Disorder) is associated with childhood sexual abuse victims and also with poor psychosocial functioning in adults. In addition to that, a strong association was revealed between childhood sexual abuse victims and presence of mood disorders and which also affects memory and executive functioning. It was also seen that the odds of developing depression reduces in childhood sexual abuse victims if received emotional support from adulthood from friends and families. Findings also suggest, childhood trauma is more severe and prevalent in patients with mental disorders. It was also seen that childhood trauma instead of life events lead to depressive disorders and it also increases the comorbidity with anxiety. Results reported that there was greater prevalence of panic disorders in victims of childhood physical abuse. Physical abuse and violence also had associations with development of psychopathology in adults. A strong association between mood disorders and violence was found. Results also revealed that childhood trauma is a possible factor for development of anxiety in both clinical and general populations. It can be further stated that accumulation of early life stress increases the prevalence of anxiety symptoms in adulthood. Childhood trauma is also associated with chronicity of anxiety symptoms and occurrence of social phobia. Many studies have shown that childhood sexual abuse increases the prevalence of depression and anxiety co-morbidity. It was further noticed that anxiety disorders have higher prevalence to be comorbid if there is even a chance of depression. Childhood trauma increased the persistence of comorbidity in adults with anxiety and depressive disorder while other tragic events that happened in childhood didn't seem to have as much impact. It's course outcome depended on the unfavourable number of clinical characteristics observed, the more characteristics the poorer the course. It was also observed that cognitive emotional dysregulation is an important factor affecting anxiety or depression symptoms in patients with childhood trauma. Results have also shown that childhood maltreatment predicts unfavourable outcomes for patients suffering from bipolar disorder. It's seen that many types of childhood trauma and maltreatment lead to the development of bipolar disorder especially sexual, verbal and neglect from mother. People with bipolar disorders also reported attachment anxiety and the predictors of this were insecure attachment, frequency of childhood trauma and young age of the patient. To tackle the prevalence of developing depressive or mood disorders, many studies found that building resilience could help to lower the risk or at least improve the course of the illness, emotional support from friends and families reduced the odds developing mental illness in childhood sexual abuse victims. Overall, many of the papers had reported that childhood sexual abuse and physical abuse increased the risk of developing many disorders running from depressive to anxiety. The findings here, will help to understand how Childhood trauma can cause issues related to a person's mental health as it is a common factor in the history of patients suffering from depressive and anxiety disorders. It could also be applied to parenting styles which could reduce the risk of developing mental illnesses during adulthood in the general population.



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IX.CONCLUSION

In this present review, we investigated childhood trauma and how it affects the course of anxiety and mood disorders. We found that some types of traumas have a long-term association with mood disorders, especially anxiety and depressive disorders. It was seen that victims of childhood sexual abuse are three times more likely to develop depression than the general population (Kim et al., 2013). Also, childhood sexual and physical abuse victims are more likely to develop anxiety disorders. It was also seen that women and middle-aged people with a history of childhood traumatic events are more likely to develop neurotic excoriation. In addition to that, victims of childhood maltreatment have unfavourable clinical features and course of illness with bipolar disorder. There was also some research that showed that childhood abuse and traumas can alter structural changes in the brain. Also, patients with panic disorder reported childhood physical abuse and were also more likely to have comorbid depression. Taking all this together, this paper offers a novel perspective on how childhood trauma and abuse can change the course of mood and anxiety disorders, especially depression, anxiety, and bipolar disorder. Future research may extend this work to study the effects of childhood trauma and abuse on psychotic disorders and substance abuse in the young population.

X. LIMITATIONS

The limitation of this study is that the population it covers is mostly from the western countries and there are only a handful of studies that are done in the eastern countries with no study done in the Middle East, and Indian region. This is because there isn't much funding available for these types of research in these regions and the general population in the eastern countries isn't much aware of such topics. The second limitation is that most of the research present in this study measures the behavioural and emotional aspects of the effects and only a little research focuses on the brain and biological aspects of childhood trauma. This is because the equipment that is required to do such studies as the MRI is very expensive and only a few universities and research institutes have them. Future research can focus more on the neurobiological aspects of this topic.

XI.IMPLICATIONS

The finding of this paper offers a novel perspective on the relationship between physical and sexual abuse and how it can have a serious impact on the course of mood disorders such as depression and bipolar disorder and anxiety disorders. Depression and anxiety have been the primary interest of many researchers for decades and our paper pushes this interest further. Our findings point towards a new approach to dealing with children while they are still young and more care and support should be given to children who are still young.

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