PANIC DISORDER AND PANIC ATTACKS

"Panic attack" is a symptom, rather than a diagnosis; the symptom of "panic attack" can occur with depression, PTSD, substance use, medical conditions, or in the context of *panic disorder*.

Symptoms

- Recurrent, unexpected *panic attacks*
- At least one panic attack has been followed by 1 month (or more) by:
 - Persistent worry about having another panic attack or the consequences of panic attacks
 - Significant maladaptive change in behavior related to panic attacks (e.g., avoidance of certain activities or settings)
- Panic attacks are not due to substance use or a medical condition
- The symptoms are not better explained by another mental health condition, such as social anxiety disorder, OCD, specific phobias, PTSD, etc.

<u>Panic Attack</u>: abrupt surge of intense fear or discomfort that reaches a peak within minutes, with four or more of the following symptoms experienced:

- Heart racing/pounding
- Sweating
- Trembling or shaking
- Feeling short of breath or feeling as if being smothered
- Feelings of choking
- Chest pain, tightness, or discomfort
- Nausea or upset stomach
- Feeling dizzy, light-headed, or faint
- Chills/cold sweats or hot flashes
- Numbness or tingling sensation
- Fear of losing control or "going crazy"
- Fear of dying

Feeling like things are not real, or feeling as if detached from oneself

Things to Consider

Panic attacks can feel terrifying, and many people fear that they are having a heart attack, because some of the symptoms are similar. However, heart attacks are more likely to occur with physical exertion (e.g., shoveling snow), while panic attacks can occur at rest. Panic attacks also subside quickly, while heart attack symptoms will persist and likely worsen. If you experience panic attacks in relation to known triggers (e.g., you tend to have panic symptoms when you enter a crowded store), it is not likely that your increased heart rate when walking into a store is related to a heart attack. It can be helpful to learn strategies for gaining control of panic symptoms so that you will be better able to decipher panic symptoms from symptoms of a heart condition.

Panic attacks can occur in response to an identifiable trigger (e.g., walking into a crowded setting, seeing someone who has previously abused you, etc.) but can also occur seemingly "out of the blue," with no identifiable trigger. When a trigger is not easily identifiable, it is important to consider the possibility of an underlying medication condition when panic seems to occur without a trigger, as some medical conditions trigger a racing heart, which can often lead to other panic symptoms. When there is not medical cause for panic symptoms that occur out of the blue, it is important to consider what you had been *thinking* at the time of the panic attack, as thoughts can be triggers for panic. Recognizing triggers for panic attacks is an important step in gaining control of panic and reducing, possibly eliminating, attacks. Even when triggers cannot be identified, there are steps one can take to gain control of panic in that moment, reducing the intensity and duration of the attack.

Treatment

There are effective treatments for panic attacks and panic disorder. While medication is sometimes used to treat panic, therapy should be included in the first line of treatment. Therapy, especially cognitive behavioral therapy (CBT) has been found to be more effective than medication in

reducing panic attacks, and the benefits of CBT last longer than the benefits of medication; panic attacks are likely to return once medication is discontinued.

Medications used to treat depression can offer some benefit in relation to panic symptoms. However, other medications used to manage panic symptoms bring significant risks that should be discussed with your prescribing physician. Benzodiazepines, such as Xanax or Klonopin, can give immediate relief from panic symptoms, but they come with significant risks including becoming dependent (psychologically or physically), having rebound panic attacks, and even experiencing withdrawal symptoms.

Appropriate talk therapy should be a part of every treatment plan for panic attacks and panic disorder. Unfortunately, this often does not occur due to limited access to services, believing that a more immediate 'fix' is the best way to go, or having anxious avoidance of the therapy process. Yes, therapy for panic can be challenging at first, but the results are worth it.

If you struggle with panic attacks, please know that there is hope. If available, talk to your physician, contact your local community mental health clinic, or seek a therapist; if you do not have access to these things, continue seeking information from reliable sources on the internet or via books on Amazon or from your local library. The good news is that there are many strategies you can learn to use simply through access mental health education.

If you are experiencing suicidal ideations, DIAL 988 (the National Suicide Prevention Lifeline) to call, text, or chat with a trained counselor.