



Panic Attack Reset: How to Ride the Wave

An explainer, wallet card, and panic log · Created by Simar Gill Lowther, MACP, RP (CRPO)
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At a glance

- A panic attack is your alarm system firing at full volume when there is no real danger.
- Panic peaks and passes, usually within about 10 minutes, even though it feels endless.
- Fighting panic tends to feed it. Riding the wave teaches your brain it is safe.

What is actually happening

During a panic attack, your body releases adrenaline and shifts into fight-or-flight. Your heart pounds, breathing speeds up, and you may feel dizzy, shaky, sweaty, or detached. These sensations are intense, but they are the same ones your body produces when you sprint up a flight of stairs.

The scariest part is often the thoughts that come with them: "I'm having a heart attack," "I'm going to faint," "I'm losing control." Those thoughts make the alarm louder, which makes the sensations stronger. This is called the panic cycle.

The panic cycle

Step	What happens
1	You notice a body sensation (racing heart, tight chest, light-headedness).
2	Your mind interprets it as dangerous ("Something is wrong!").
3	Fear increases, releasing more adrenaline.
4	The sensations get stronger, which seems to "prove" the danger.
5	The cycle loops until the body naturally settles, often within minutes.

Breaking the cycle doesn't mean stopping the sensations. It means changing how you respond to them.

Panic myths and facts

Myth	Fact
"I'm going to faint."	Panic raises blood pressure, which makes fainting unlikely (an exception is people with a blood or needle phobia).
"I'm going crazy or losing control."	Panic feels overwhelming, but it does not cause loss of sanity or control.
"I need to escape right now."	Leaving brings short-term relief but teaches your brain the situation was dangerous, which makes future panic more likely.
"Deep gulps of air will help."	Over-breathing can worsen dizziness. Slow, gentle breathing with a longer exhale helps more.

Important: If you have chest pain, shortness of breath, or symptoms you have never had before, seek medical care. Once a doctor has ruled out medical causes, these tools can help.

What the research says

Cognitive models show panic is maintained by catastrophic interpretations of normal body sensations (Clark, 1986).

CBT for panic, which includes learning to face feared sensations, is one of the best-supported treatments in mental health (Craske & Barlow, 2007).

Slow breathing practices with longer exhales are associated with reduced physiological arousal (Balban et al., 2023).

Tool: My Panic Reset Wallet Card

Cut this out or save a photo of it on your phone. Read it slowly during a panic attack.

RIDE THE WAVE (cut out and keep)

- 1. Name it:** *"This is panic. It is uncomfortable, not dangerous."*
- 2. Stay:** Don't run. Let the wave rise. It will peak and fall.
- 3. Breathe low and slow:** In for 4 through your nose, out for 6 through your lips.
- 4. Ground:** Feel your feet. Name 5 things you see.
- 5. Allow:** *"I can let my body do this. It will pass."*
- 6. Return:** When it eases, continue what you were doing.

My Panic Log

Tracking panic helps you see patterns and notice that every attack has passed.

Date	Where / what was happening	Peak (0-10)	Scary thought	How long it lasted

Strategies to try

- **Practise when calm.** Rehearse slow breathing daily so it feels familiar during panic.
- **Stop safety behaviours slowly.** Notice things you do to "stay safe," like carrying water or sitting near exits, and gradually try without them.
- **Practise the sensations.** With guidance, people safely bring on mild panic-like sensations, like spinning in a chair, to teach the brain they are harmless.
- **Limit caffeine.** Caffeine can trigger sensations that feel like panic.
- **Keep living.** Avoiding places after panic tends to shrink your world. Return to them gradually.

Strategies you may not have heard of

These less common, evidence-informed techniques go beyond the usual advice. Try one at a time and notice what works for you.

- **Invite it in.** Instead of fighting panic, try saying, "Okay, show me what you've got." This paradoxical approach removes the fight that feeds the alarm.
- **Make a "symptom menu."** When calm, practise bringing on panic-like sensations on purpose: breathe through a thin straw for 60 seconds, spin in a chair for 30 seconds, or run on the spot. Rate how similar each feels to panic. Repeating the most similar one teaches your body these sensations are safe.
- **Delay the escape.** If you feel the urge to leave, tell yourself, "I can leave, but not for five more minutes." Most of the time, the wave peaks and falls within that window.
- **Be a weather reporter.** Describe sensations neutrally, as if reporting the weather: "Heart is fast. Hands are warm. Breath is short." Neutral language reduces catastrophic interpretation.

Journal prompts

Take your time with these. Write freely; there are no right answers.

What does my mind usually tell me during panic? What actually happened afterward?

Which places or activities have I started avoiding because of panic?

If I weren't afraid of panic, what would I do more of?

What would I say to a friend going through the same thing?

When to reach out for support

If panic attacks happen often, or fear of the next one is shaping your life, CBT for panic is highly effective. Many people see real improvement within a few months. Insightful Journey Inc. offers therapy in person in Oshawa and virtually across Ontario, in English, Hindi, Punjabi, and Urdu. Direct billing available.

[Book a free consultation](#) · 647-982-2527 (call, text, or WhatsApp)

In crisis? Call or text 9-8-8, or call 911.

This resource is for education and self-reflection. It is not a diagnostic tool and is not a substitute for professional assessment or care.

References

Balban, M. Y., et al. (2023). Brief structured respiration practices enhance mood and reduce physiological arousal. *Cell Reports Medicine*, 4(1), 100895.

Clark, D. M. (1986). A cognitive approach to panic. *Behaviour Research and Therapy*, 24(4), 461–470.

Craske, M. G., & Barlow, D. H. (2007). *Mastery of your anxiety and panic: Therapist guide* (4th ed.). Oxford University Press.

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