Anxiety and Panic – With Love from Dr. G

Anxiety is the most commonly diagnosed problem in this country. It makes sense though, since we are hard-wired for the Fight-Flight-Freeze response, which ensures our survival as animals. Often, panic is one way we know that our anxiety is on the rise. Panic attacks are not a diagnosis, and can actually occur in the context of any mental disorder or no disorder. It’s just what happens when our brain perceives danger, regardless of whether it’s real. By now, hopefully you all read my post on Classical Conditioning, which explains why we begin to perceive danger when there is none (or minimal danger), especially following trauma. So, now let’s talk about PANIC, because there is a lot of fear and misunderstanding around this natural hard-wired response.

Here are the fundamental points on panic:

Is it healthy and adaptive? YES, especially when there is danger. It’s not so helpful when you get triggered walking down the canned food aisle at the grocery store.

How does it happen? Well, without getting into too much detail, essentially the Sympathetic Nervous System is activated, and it tends to be an all-or-nothing system. For this reason, you may experience several panic symptoms at the same time, which can “feel” frightening and can often be interpreted as dangerous in and of itself.

How long does panic last? Not very long, although you may feel anxious or on edge for a lot longer. The sympathetic nervous system releases chemicals (adrenalin and noradrenalin), but eventually the parasympathetic nervous system will kick in to help bring you back down to a more relaxed state. Panic CANNOT continue forever and does not injure us in any way despite our fears that it might itself be dangerous.

What are some common panic responses? Changes in heart rate, blood flow, breathing, sweating, visual perception, muscular tension, and digestion…to name a few. If we are getting ready to fight, flee, or freeze because we have encountered a lion, then our body will begin to increase heart rate so it speeds up blood flow and moves more oxygen to muscle tissues. Blood flow may lessen in extremities such as the hands and feet so that it can be used by larger muscle groups such as the heart, thighs, biceps. Breathing increases, but can cause uncomfortable symptoms such as chest tightness, choking sensations or shortness of breath, or seemingly unrelated symptoms like dizziness, visual changes (pupils widen to scan the environment), confusion, flushing, or derealization (i.e., out of body experience). You may notice feeling hot or sweating more, but also saliva decreases causing dry mouth. At the end of a full-blown panic attack, you’ll likely feel exhausted. Now you know why! Your entire body just responded to a near-death experience with a lion, and all of your organs worked together to save you.

Common MYTHS about panic:

I’m going crazy. NO! You’re not. Your body might be, but YOU are not. Generally, the word “crazy” is used to describe a psychotic disorder, such as Schizophrenia. The psychotic disorders involve delusions (strange beliefs) and hallucinations (auditory and/or visual). Panic may be uncomfortable, but it’s just your body trying to save you. We want it to save us in a true emergency, but not have trauma or triggered reactions everywhere we go and to everything. Again refer to the previous posts on classical conditioning (“How PTSD Develops”).

I’m losing control. NO! You may feel like you are going to lose control, hurt someone inadvertently, or become paralyzed and lose the power to react, but these are all highly unlikely. Our Fight-Flight-Freeze response is designed to get us away from danger, and typically what we really more often experience (regardless of our awareness) is that we are quicker, think faster, and are physically stronger. Think about incredible stories of parents saving their children in life-threatening situations (e.g., lifting cars, swimming/walking incredible distances).

My body is going to completely shut down. NO! You might feel like it could, but remember the fear response is designed to be activated quickly (sympathetic nervous system) and then deactivated quickly (parasympathetic nervous system). We probably don’t want to become adjusted to a higher level of constant anxiety because there can be long-term detrimental impact on all of your organ systems and health in general. But the activation of your emergency response system is not going to wear out your body or nervous system.

I’m having a heart attack. NO! You’re not having a heart attack (unless you actually are), and I have treated many patients over the years who have both panic attacks frequently and also have a history of heart attacks. Even they report to me that the two scenarios feel different. Typical heart rate during a strong panic attack is 120-130 beats/minute. This is much lower than when you exercise, and certain MUCH lower than when you’re having a heart attack. Vigorous physical exercise produces a heart rate of 150-180 beats/minute typically, and heart attacks usually have heart rates of over 180 beats/minute associated with them. Panic attacks are a completely different entity and origin than cardiovascular events (which often have underlying chronic disease associated with them), and panic attacks do not increase your chances of heart problems either.

I’m going to pass out or faint. NO! You’re not likely to pass out unless you have a passing-out problem, or you faint easily, which is rare. Fainting occurs as a result of LOWER blood pressure. When you are panicking, your heart rate and blood pressure are HIGHER. You may feel dizzy or lightheaded, or lose balance, but that is not the same thing as fainting or losing consciousness. Again they are two different responses with two different origins.

I hope this helps all of you out there who are experiencing heightened anxiety and panic symptoms. I know anxiety and panic feel awful, but they don’t hurt us. The goal here is to understand them and work towards changing them by NOT AVOIDING and also by CHALLENGING UNHELPFUL THOUGHTS (that lead to increased anxiety)…Stay tuned….more to come later on the cognitive aspect of recovery.