

Coping with Panic Disorder



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What is panic disorder and what does it look like?

We all feel anxiety sometimes. Whether you are sitting down to take an important exam or you are about to propose to your partner, you are likely to feel some symptoms of anxiety, e.g. sweating, that sensation of butterflies in your stomach or shakiness. An optimum level of anxiety at times is actually a good thing as it motivates us to perform well and even helps to keep us safe. That said, sometimes people may come to feel overly anxious to the point whereby it comes to dictate their lives and impairs their functioning. Panic disorder is a serious anxiety condition that strikes without warning or reason, and where the fear response is out of proportion for the situation. Over time a person with panic disorder may develop a constant fear of having another panic attack, which in turn feeds in the cycle of panic. Other symptoms of panic disorder include: difficulty breathing, pounding heart or chest pain, intense feeling of dread, dizziness or feeling faint, shaking, sweating, chills or hot-flashes, and a fear of losing control or of dying.

As panic attacks are so unpleasant, people naturally go out of their way to steer clear of them wherever possible. Situations that often trigger people's panic symptoms include: crowds, public places, open spaces, enclosed spaces, and places far from home. As a result, they tend to avoid these situations whenever they can. When people avoid these situations, it is referred to as **agoraphobia**. Panic and agoraphobia is therefore when people avoid doing the things that they would like to do because they fear experiencing symptoms of panic. This, of course, can result in people's lifestyle becoming very restricted.

Although the exact cause of panic disorder and agoraphobia is not fully understood, studies have shown that a combination of factors may be involved. These factors include.

- **Family history.** Panic disorder has been shown to sometimes run in families. It may sometimes be passed on to people by one or both parents much like the risk for other complex diseases such as cancer or heart disease.

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- **Abnormalities in the brain.** Panic disorder may be caused by problems in regulating brain areas that control the "fight or flight" response.
- **Substance abuse.** Abuse of drugs and alcohol can contribute to panic disorder.
- **Major life stress.** Stressful events and major life transitions, such as the death of a loved one, can sometimes trigger panic attacks, which can potentially recur and go on to become panic disorder.
- **Unhelpful thinking patterns.** Some people may have a thinking style that lends itself to experiencing symptoms of panic and agoraphobia. More specifically, people who have a tendency to misinterpret symptoms of anxiety and panic as dangerous are more at risk.

Do I have panic disorder? – A checklist for seeking help

Feelings

- Anxious / panicky ()
 Frightened / vulnerable ()
 On edge ()
 Fear/dread ()

Physical Symptoms

- Heart / mind races ()
 Chest becomes tight ()
 Sweat ()
 Tremble / shake ()
 Dizzy / light-headed ()
 Breathless ()
 Butterflies in your stomach ()
 Tense body / muscular pain ()

Thoughts

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- I'm having a heart attack / panic attack ()
 I'm going to faint / choke ()
 I'm going crazy / mad ()
 I must always be in complete control ()
 People can see how anxious I am ()
 I can't cope outside on my own ()

Behaviour Patterns

- Avoid crowds / public places / open spaces ()
 Avoid places that are hard to escape from ()
 Sit near the aisle / exit (e.g. at the cinema) ()
 Drink alcohol to calm you down ()
 Avoid being alone ()
 Sit / lie down when you feel anxious ()

If you have ticked a number of these boxes you may be experiencing symptoms of panic and agoraphobia. However try not to be alarmed, as this is very common and there are things you can do to help.

How is panic disorder treated?

There are a number of options for the treatment of panic disorder. Research has shown that both psychotherapeutic and medication-based solutions have been effective. It is advisable that you make yourself as informed as possible on what your options are.

There are a number of simple things that you can do yourself to help reduce your panic disorder symptoms:

- **Lifestyle Changes.**

There are a number of simple lifestyle changes that you should try to make if you are feeling anxious. These include:

- **Exercise.** Exercise reduces tension and stress and boosts the release of endorphins, the brain's feel-good chemicals. Try to complete some physical exercise every day to reduce your feelings of anxiety.

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- **Sleep.** Issues with sleep are common for people with GAD. Improve your sleep by avoiding daytime napping, caffeine products, browsing mobile devices and excitable television late at night. Try to get between 7-9 hours of sleep per night.
- **Nutrition.** Eating well is important for both your physical and mental health. If you experience physical symptoms of anxiety, it is important to keep your blood sugar levels relatively stable, avoid sugary snacks and eat balanced meals regularly. Avoid caffeine and alcohol.
- **Practice Relaxation and breathing techniques.** This can help to reduce your symptoms early before you experience a full-blown panic attack. Please see the following section for more information regarding relaxation and breathing techniques.
- **Learn about your panic.** Simply knowing more about panic can go a long way towards relieving your distress. So read up on anxiety, panic disorder, and the fight-or-flight response experienced during a panic attack. You'll learn that the sensations and feelings you have when you panic are normal and that you aren't going crazy.

The following might be helpful in terms of learning about your panic:

Consider that once panic disorder develops, it is likely that it follows a cyclic pattern. *Figure 1* demonstrates a simplistic example of this cycle. Imagine that you previously had a bad experience whereby you slept through your alarm and were late for work which resulted in you losing your job. This caused you a significant amount of stress. Now imagine that you have a new job and on your first day your alarm clock wakes you up. Hearing your alarm may cause you to feel some threat of being

late for work. This in turn causes you to feel symptoms of anxiety, including physical symptoms such as sweating or

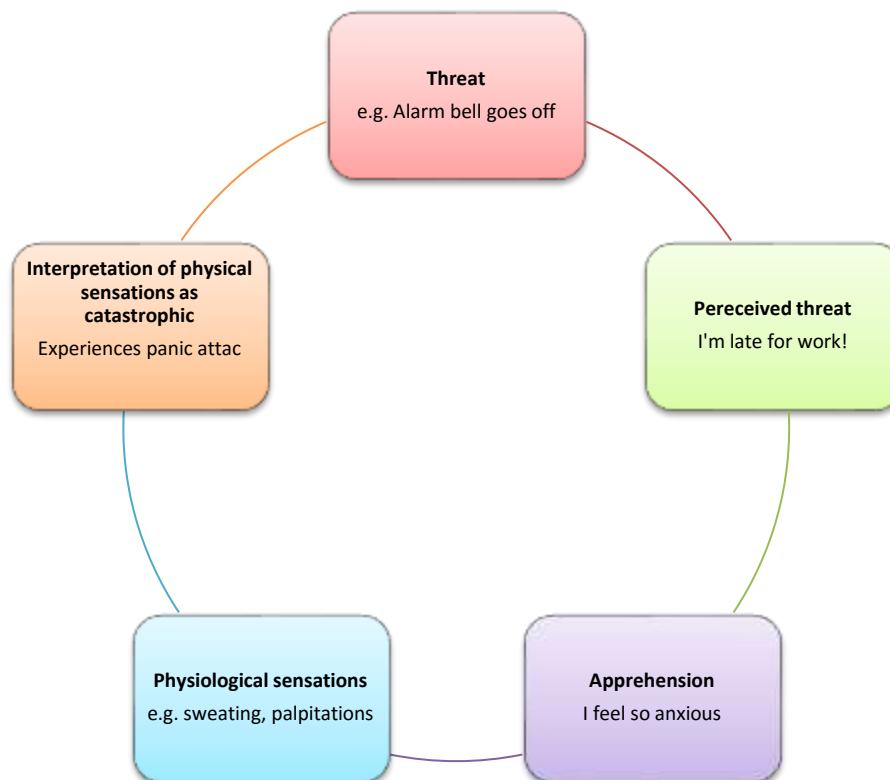


Figure 1: Example of panic attack cycle

palpitations. A person with panic disorder who has experienced previous panic attacks will interpret these physical symptoms as catastrophic and may end up having a panic attack again. And thus the cycle is repeated. Being aware of how this cycle is maintained may help you to identify how your own panic is ongoing.

The panic cycle is maintained through a number of factors including:

Unhelpful thoughts

People's unhelpful thoughts make it more difficult for them to overcome their panic and agoraphobia. For example, because people interpret symptoms of anxiety as dangerous (e.g. a sign of a heart attack or going crazy), they actually make themselves even more anxious. As soon as people think in these catastrophic terms, they make themselves even more anxious and their physical symptoms get stronger. Of course, as their physical symptoms grow stronger, so does their belief that they are going to choke or have a heart attack. This creates a vicious cycle that often leads to a full blown panic

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attack.

Avoidance

People tend to avoid or escape situations that they believe will trigger a panic attack. Although this is a very understandable way of coping, it is actually one of the main reasons that people find it hard to overcome their difficulties. This is because by avoiding these situations, people prevent themselves from having the opportunity to prove that they can cope in them better than they think. Furthermore, the longer someone has been afraid of a situation and avoided it, the more daunting it becomes and it is increasingly difficult to face. Not only this, but when people avoid one situation, they begin to doubt they will cope in similar situations and start avoiding more and more. Soon their fear generalises to the point that their lifestyle is extremely restricted.

Using safety behaviours

A safety behaviour is anything people do to try and make it easier for them to cope with their fears (only going into town if you are with someone you trust) Although such safety behaviours help people cope with symptoms of panic and agoraphobia in the short term, they are actually unhelpful in the longer term. This is because, like avoidance, safety behaviours stop people from having the opportunity to prove to themselves that they can cope with their fears, without putting such precautions into place. Instead they may put their successes down to other factors (e.g. "I only coped because I had my friend with me") and their fears remain in place. Before long people become reliant on their safety behaviours and avoid going places when they are unable to use them.

Increased self-focus

Another factor that helps keep people's panic and agoraphobia going is their tendency to be hypervigilant. This means that they study their body for any sign of physical changes that may suggest a panic attack is on its way. Although they do this, hoping to be reassured that everything feels normal, this strategy actually makes things worse. This is because they tend to notice small physical changes that would have otherwise gone unnoticed (e.g. feeling hot). The more they focus on a change, the more anxious they become and a vicious cycle begins that can lead to a panic attack.

• **Medication**

Medication has been shown to be effective for some people in the treatment of panic. There are typically two types of medication prescribed for panic disorder: Benzodiazepines and Antidepressants. Medication is often only prescribed as a temporary measure to relieve symptoms of anxiety at the beginning of the treatment process. It is important to remember however that medication does not get to the root of the problem and instead just treats the symptoms. Some people experience some side-effects when taking medication. If you have any questions or concerns regarding medication, you should seek advice from your doctor or a medical professional.

• **Psychotherapy**

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- **Cognitive Behavior Therapy (CBT).** CBT focuses on identifying, understanding, and changing thinking and behavior patterns, such as those mentioned above. In this type of therapy the patient is actively involved in his or her own recovery, has a sense of control, and learns skills that are useful throughout life.
- **Exposure Therapy (ET).** Exposure therapy is based on the idea of fear "extinction." Its origins are based on studies that show that the human brain habituates to stimuli when they fail to produce the expected reaction. When forced to confront a fear for a long enough period of time, the mind essentially adapts to the stimulus that causes that fear to the point where it stops finding it stressful altogether.
- **Acceptance-Commitment Therapy (ACT).** The core message of ACT is to accept what is out of your personal control and commit to action that improves and enriches an individual's life. This is done through the teaching of mindfulness skills to deal with painful thoughts and feelings effectively and by helping an individual identify their values to motivate change.

Some self-help skills for treating panic disorder:

- **Challenging Negative Automatic Thoughts (NATs)**

As mentioned earlier, the way that we think about things can impact on our anxiety levels and increase the likelihood of someone experiencing a panic attack. Our thoughts can feed into our behaviours, our feelings and how we feel physically, and so it is important to remember that they are just thoughts, and not fact. If thoughts are not facts, then they can be challenged. Negative Automatic Thoughts (NATs) are common in panic disorder and other disorders and recognizing them is the first step in learning to change them. By becoming aware of these thoughts and the effect that they

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are having on us, we are working towards breaking the panic cycle. Below are some common NATs:

- **Predicting the Future:** When we are feeling anxious, it is common for us to spend a lot of time thinking about the future and predicting what could go wrong, rather than just letting things be. In the end most of our predictions don't happen and we have wasted time and energy being worried and upset about them. e.g. Assuming you will perform poorly at your job interview.
- **Mind Reading:** This means that you make assumptions about others' beliefs without having any real evidence to support them. e.g. My boss thinks I'm stupid.
- **Catastrophising:** People commonly 'catastrophise' when they are anxious, which basically means that they often blow things out of proportion. e.g. They assume that something that has happened is far worse than it really is (e.g. that their friend is going to dislike them because they cancelled a night out).
- **Focusing on the Negatives:** Anxious people often have a tendency to focus on the negatives which keeps their anxiety going. e.g. They focus on the one person at work who doesn't like them, ignoring that they are very popular with the rest of their colleagues.
- **Should Statements:** People often imagine how they would like things to be or how they 'should be' rather than accepting how things really are. Unfortunately when we do this, we are simply applying extra pressure to ourselves that can result in anxiety. Instead it can sometimes help to accept that things can't always be perfect. e.g. I should never be anxious.

- **Over Generalising:** Based on one isolated incident you assume that all others will follow a similar pattern in the future. For e.g. When enrolling on a college course, you meet a future classmate who you find irritating. As a result, you worry that everyone in the class will be the same and you won't make any friends.
- **What If Statements:** Have you ever wondered "what if" something bad happens? This type of thought can often make us avoid going places or doing the things that we would like. e.g. What if I have a panic attack at the party?
- **Labelling:** Do you find that you attach negative labels to yourself? e.g. I'm weak. Labels like these really influence how we see ourselves and can heighten our anxiety levels.

If some of these thought processes resonate with how you think about things, it might be useful to try to challenge your NATs. Below is a helpful template to track your challenging thoughts:

Where were you?	Emotion or feeling	Negative automatic thought	Evidence that supports that thought	Evidence that does not support that thought	Alternative thought	Emotion or feeling following alternative thought

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- **Coping statements.**

When we are anxious or panicky, it is easy to forget what you have just learned (e.g. that it is not dangerous and cannot harm us). It can therefore be helpful to have 'coping statements' that you can refer to. These are basically statements that you can use to remind yourself about the facts of anxiety and panic, whenever you begin experiencing them. Reminding yourself about these facts can help to prevent cycles of panic occurring.

- Anxiety is normal
- Panic is simply high levels of anxiety
- Everyone experiences anxiety and panic at times
- Anxiety and panic are not dangerous
- Anxiety is designed to protect us and is not harmful
- By remembering these symptoms are nothing more than anxiety, I can prevent a cycle of panic occurring
- I can tolerate the symptoms of anxiety and panic without them getting out of control
- Slowing my breathing down can help me to control my anxiety and panic
- My anxiety and panic will pass naturally given time ♦ it doesn't last forever
- I can continue without using escape, avoidance or safety behaviours
- I don't always have to feel in complete control
- I've never fainted, choked, gone mad, or had a heart attack before
- People can't tell how anxious I feel

Include your own statements here:

- **Relaxation techniques.**

Panic is more than just a feeling. It's the body's physical "fight or flight" reaction to a perceived threat. Your heart pounds, you breathe

faster, your muscles tense up, and you feel light-headed. When you're relaxed, the complete opposite happens. Since it's impossible to be anxious and relaxed at the same time, strengthening your body's relaxation response is a powerful anxiety-relieving tactic.

Progressive muscle relaxation, deep breathing, and meditation can help you to relax. These are skills that might take some practice initially.

The following are a set of links to further information about these relaxation techniques.

Progressive muscle relaxation can help you release muscle tension and take a "time out" from your worries. The technique involves systematically tensing and then releasing different muscle groups in your body. As your body relaxes, your mind will follow.

<http://www.cci.health.wa.gov.au/docs/ACF3C67.pdf>

<http://www.anxietybc.com/sites/default/files/MuscleRelaxation.pdf>

Deep breathing. When you're anxious, you breathe faster. This hyperventilation causes symptoms such as dizziness, breathlessness, lightheadedness, and tingly hands and feet. These physical symptoms are frightening, leading to further anxiety and panic. But by breathing deeply from the diaphragm, you can reverse these symptoms and calm yourself down.

<http://www.anxietybc.com/sites/default/files/CalmBreathing.pdf>

<http://www.cci.health.wa.gov.au/docs/ACF3C8B.pdf>

Meditation. Research shows that mindfulness meditation can actually change your brain. With regular practice, meditation boosts activity on the left side of the prefrontal cortex, the area of the brain responsible for feelings of serenity and joy.

http://www.cci.health.wa.gov.au/resources/minipax.cfm?mini_ID=21

<http://cdn.franticworld.com/wp-content/uploads/2012/02/Mindfulness-Of-Body-And-Breath-from-book-Mindfulness-Finding-Peace-in-a-Frantic-World-128k.mp3>

- **Self-soothing**

Self-soothing is a simple skill that people with panic can use to calm and soothe themselves when they feel themselves becoming anxious. Self-soothing involves using one or more of the senses: vision, hearing, smell, taste and touch (or movement) to relax oneself. For example:

- **Vision.** Go to a place that you find visually calming, look a picture of place that you have fond memories of, watch a pleasant film, go to an art museum.
- **Hearing.** Listen to the calming music, sing a familiar song, speak with a friend, enjoy the sounds of nature.
- **Smell.** Smell your favourite perfume, light some scented candles/incense, smell flowers in the garden, do some cooking/baking.
- **Taste.** Eat your favourite treats and savour the taste mindfully, have a cup of tea, go for a fine meal.
- **Touch.** Rub a pet, squeeze a stress ball, get a massage, have a shower/bath.
- **Movement.** Go for a run/walk, dance around, do some stretches.

These self-soothing techniques are extremely simple and will vary depending on the individual. Some people might find it useful to develop their own 'Self-Soothing Box'. This can be a box of some sort (e.g. an old

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shoe box) that you can fill with items that you find self-soothing (e.g. your favourite chocolate bar, your favourite photos, a cd of calming music, some scented oils) and turn to when you feel your anxiety symptoms increasing.

- **Breathing techniques**

People who experience panic attacks often have a tendency to 'over breath' when they are anxious. This basically means that they take deeper breaths than normal (which they are sometimes unaware of). This usually has the effect of making them feel short of breath and as though they are going to choke. As a result of these sensations, they take deeper breaths to try and correct this which actually just makes the sensations worse (this pattern is often referred to as hyperventilation). Before long a cycle of panic can develop.

By learning 'controlled breathing' exercises, you can learn how to slow your breathing down to a better rate. This helps to fend off the uncomfortable physical feelings such as dizziness, light-headedness, chest pains, and shortness of breath. By doing so you can stop the cycle of panic and the feelings will soon pass.

The following steps will take you through a 'controlled breathing' exercise.

Step 1

Try to get into a slower and stable breathing rhythm. A good rhythm is to breathe in for three seconds, hold this breathe for two seconds, and then breathe out for three seconds. Make sure you don't take too big 'gulps' of air whilst doing so.

Step 2

It can be helpful to count to yourself as you do this (e.g. in - two - three - hold for two - out - two - three - hold for two).

Step 3

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As you breathe, try to make sure that your stomach expands as you take each breathe. This helps you to stop breathing from the chest which tends to result in short and shallow breaths that can add to the problem.

Step 4

Repeat this action for a few minutes. You should soon begin to feel the uncomfortable sensations pass.

- **Removing avoidance and safety behaviours**

As already highlighted, avoidance and safety behaviours are common ways of dealing with panic but do not actually fix the problem and often make things worse. It might be helpful to consider confronting anxiety provoking situations in order to decrease the impact that they have on you and ultimately work towards eliminating your panic symptoms. This is done as part of exposure therapy but you could consider developing your own exposure hierarchy to work off of by following these steps:

1. Generate ideas
2. Put them in order of easiest to most difficult
3. Start to confront items in order of easiest to hardest. Remember to challenge yourself but be careful not to be overly ambitious. Also remember that is ok to take a step back on you hierarchy if you feel that you need to. Be conscious of the panic cycle and use breathing and relaxing techniques if you need to.
4. Repeat the exposure exercise as necessary.

Exposure Plan

Make a list of all the things that you avoid or make you anxious. Use a scale from 'not anxious' (0) to 'extremely anxious' (100) to describe how difficult you think each situation might be. Then you can put them into an order to work on.

Hierarchy items	Predicted anxiety	Exposure Hierarchy	
		1	
		2	
		3	
		4	
		5	
		6	
		7	
		8	
		9	
		10	
		11	
		12	

Anxiety rated 0-100

Some useful links for further reading:

The Panic Centre: resources and information on panic disorder

<http://www.paniccenter.net/>

Canadian Mental Health Association

http://www.cmha.ca/mental_health/phobias-and-panic-disorders/#.Vh8RSDZdHIU

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