PATIENT TEACHING AID

Panic Attacks



Episodes of Intense Anxiety

A panic attack is a period of sudden, intense fear combined with frightening physical symptoms that begin without warning and may end with a visit to an emergency room. Its sufferers can feel the symptoms of an attack so intensely that they believe they are going to die. The intensity of fear during a panic attack is remarkable, especially because attacks can begin for no apparent reason—often without any identifiable trigger—and reach their intensity within minutes, although they are usually over within an hour. This pattern is the basis for frustration on the part of the patient and therapist as they try to determine the cause of the panic attacks in order to avoid future episodes. Often no cause or pattern can be found, which makes the anticipation of the next attack even more intense. Ultimately, it is the fear of future panic attacks, not the attacks themselves, that causes significant and often debilitating lifestyle changes.

Commonly, agoraphobia can accompany panic disorder. Agoraphobia is the fear of going places where a panic attack might occur and help or escape would be impossible. It is this fear that limits the activities of people with panic disorder, often to the point of preventing them from leading a normal life.

The classic symptoms of a panic attack include an intense feeling of loss of control, impending death, detachment, unreality, or "going crazy." Along with these psychological symptoms, the physical symptoms of pounding heart, dizziness, choking, shortness of breath, chest pain, chills, sweating, shaking, numbness or tingling, and nausea are common. The presence of four or more of these symptoms can signal a panic attack. More than one panic attack should lead to an assessment by a clinical psychologist or a therapist who specializes in the treatment of anxiety disorders. Once medical conditions with similar symptoms are ruled out, the diagnosis can be made, and a treatment plan that includes cognitive behavioral therapy along with drug therapy can begin.

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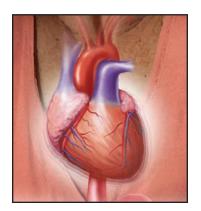
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Stress Can Trigger an Attack, Although the Cause Is Not Always Known

Panic disorder is a well-recognized form of anxiety disorder that is twice as common in women as in men and can be diagnosed in a wide range of age, racial, and socioeconomic groups. It is characterized by repeated panic attacks along with an intense fear of future attacks. Panic disorder can become a disabling condition that interferes with normal life activities unless treatment is sought.



Symptoms of a panic attack can mimic those of a heart attack or nervous breakdown.

Causes: Why Is This Happening to Me?

Although the cause of panic disorder is not thoroughly understood, there is likely a hereditary component. There is an increased risk of developing a panic disorder if another family member has a history of similar attacks, but that is not always the case and a genetic link has not been identified. Panic attacks often begin during early adulthood. The first panic attack can occur during a very stressful period in life, perhaps a time of significant change or after the loss of a family member. Examples of major life stressors that can be associated with an initial panic attack include graduation from college, birth of a child, death of a parent, or job loss. Although many people seek medical attention during or shortly after an initial panic attack, it may take many visits to a variety of health care professionals before the correct diagnosis is made. Medical conditions, such as heart or lung diseases or disorders of the endocrine or nervous system, can cause symptoms similar to those of a panic attack, so a doctor must first rule those out before treatment can begin.

Unfortunately, most panic attacks cannot be linked to a specific trigger, especially early on. In some people, triggers can eventually be identified and avoided. Examples of common triggers that can precipitate a panic attack are thinking about previous attacks, being confined to an environment such as a bus or airplane, or the use of stimulants.

The physical and psychological symptoms of a panic attack can be very frightening, even after the patient understands that these symptoms do not represent a life-threatening condition. Anticipation of future attacks without warning can lead to self-medication with alcohol or drugs. Sufferers of repeated panic attacks may also become depressed or chemically dependent on alcohol or other sedatives.

Treatment: What Are the Options?

With the appropriate treatment, people who suffer from repeated panic attacks can become well again. There are several types of prescription drugs that are very effective in controlling panic attacks, including antidepressant and antianxiety medications. Along with medications, weekly cognitive behavioral therapy sessions over several months can teach people who suffer from panic disorder how to deal with stress, replacing panic with positive self-talk and relaxation techniques. Behavioral therapy is very effective in teaching patients how to deal with their fears. Learning how to deal with situations that elicit fear, such as riding in an airplane, can be part of what is termed *exposure therapy*. In exposure therapy, the patient is exposed, either physically or by bringing up mental images, to fearful situations and taught to relax through them without panic. Gradually, fears can be overcome through these exercises and panic attacks can be controlled.

If you have questions about medications prescribed to treat panic disorder, be sure to ask your pharmacist.

