

Panic Attacks

What is a panic attack?

You may have had a panic attack if you experienced four or more of the symptoms listed below coming on abruptly and peaking in about 10 minutes.

Panic Symptoms

- Pounding heart
- Sweating
- Trembling or shaking
- Shortness of breath
- Feeling of choking
- Chest pain
- Nausea or abdominal distress
- Feeling dizzy, unsteady, lightheaded, or faint
- Feelings of unreality or being detached from yourself
- Fear of losing control or going crazy
- Fear of dying
- Numbness or tingling
- Chills or hot flashes

Panic attacks are sometimes accompanied by avoidance of certain places or situations. These are often situations that would be difficult to escape from or in which help might not be available. Examples might include crowded shopping malls, public transportation, restaurants, or driving.

Why do panic attacks occur?

Panic attacks are the body's alarm system gone awry. All of us have a built-in alarm system, powered by adrenaline, which increases our heart rate, breathing, and blood flow in response to danger. Ordinarily, this 'danger response system' works well. In some people, however, the response is either out of proportion to whatever stress is going on, or may come out of the blue without any stress at all.

For example, if you are walking in the woods and see a bear coming your way, a variety of changes occur in your body to prepare you to either fight the danger or flee from the situation. Your heart rate will increase to get more blood flow around your body, your breathing rate will quicken so that more oxygen is available, and your muscles will tighten in order to be ready to fight or run. You may feel nauseated as blood flow leaves your stomach area and moves into your limbs. These bodily changes are all essential to helping you survive the dangerous situation.

After the danger has passed, your body functions will begin to go back to normal. This is because your body also has a system for "recovering" by bringing your body back down to a normal state when the danger is over.

As you can see, the emergency response system is adaptive when there is, in fact, a "true" or "real" danger (e.g., bear). However, sometimes people find that their emergency response

system is triggered in “everyday” situations where there really is no true physical danger (e.g., in a meeting, in the grocery store, while driving in normal traffic, etc.).

What triggers a panic attack?

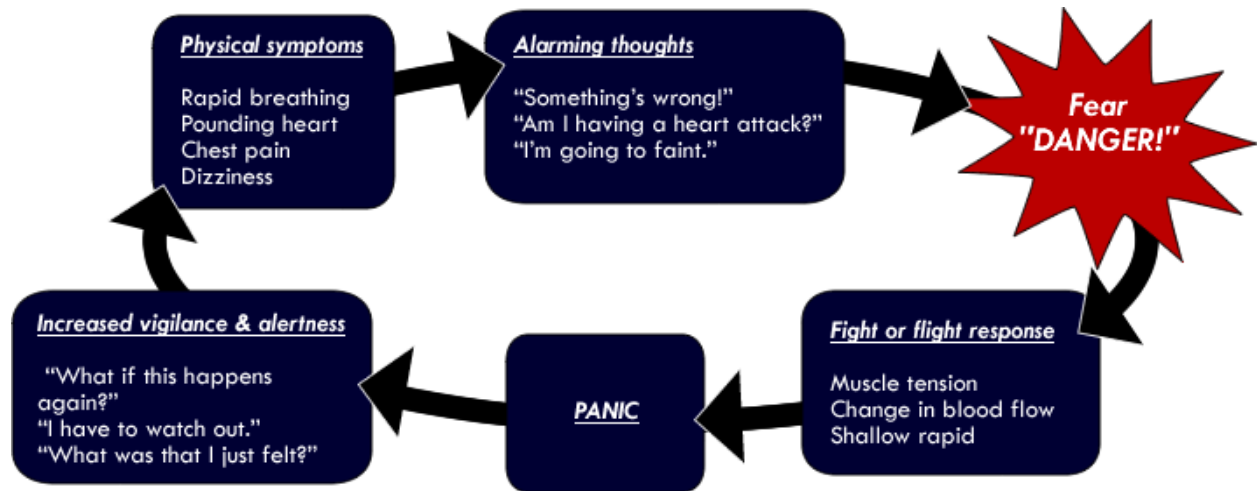
Sometimes particularly stressful situations can trigger a panic attack. For example, an argument with your spouse or stressors at work can cause a stress response (activating the emergency response system) because you perceive it as threatening or overwhelming, even if there is no direct risk to your survival.

Sometimes panic attacks don't seem to be triggered by anything in particular – they may “come out of the blue.” Somehow, the natural “fight or flight” emergency response system has gotten activated when there is no real danger. Why does the body go into “emergency mode” when there is no real danger?

Often, people with panic attacks are frightened or alarmed by the physical sensations of the emergency response system. First, unexpected physical sensations are experienced (tightness in your chest or some shortness of breath). This then leads to feeling fearful or alarmed by these symptoms (“Something’s wrong!”, “Am I having a heart attack?”, “Am I going to faint?”) The mind perceives that there is a danger even though no real danger exists. This, in turn, activates the emergency response system (“fight or flight”), leading to a “full blown” panic attack. In summary, panic attacks occur when we misinterpret physical symptoms as signs of impending death, craziness, loss of control, embarrassment, or fear of fear. Sometimes you may be aware of thoughts of danger that activate the emergency response system (for example, thinking “I’m having a heart attack” when you feel chest pressure or increased heart rate). At other times, however, you may not be aware of such thoughts. After several incidences of being afraid of physical sensations, anxiety and panic can occur in response to the initial sensations without conscious thoughts of danger. Instead, you just feel afraid or alarmed. In other words, the panic or fear may seem to occur “automatically” without you consciously telling yourself anything.

After having had one or more panic attacks, you may also become more focused on what is going on inside your body. You may scan your body and be more vigilant about noticing any symptoms that might signal the start of a panic attack. This makes it easier for panic attacks to happen again because you pick up on sensations you might otherwise not have noticed, and misinterpret them as something dangerous. A panic attack may then result.

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How do I cope with panic attacks?

An important part of overcoming panic attacks involves re-interpreting your body's physical reactions and teaching yourself ways to decrease the physical arousal. This can be done through practicing the cognitive and behavioral interventions below.

Behavioral Interventions

1. Breathing Retraining

Research has found that over half of people who have panic attacks show some signs of hyperventilation or overbreathing. This can produce initial sensations that alarm you and lead to a panic attack. Overbreathing can also develop as part of the panic attack and make the symptoms worse. When people hyperventilate, certain blood vessels in the body become narrower. In particular, the brain may get slightly less oxygen. This can lead to the symptoms of dizziness, confusion, and lightheadedness that often occur during panic attacks. Other parts of the body may also get a bit less oxygen, which may lead to numbness or tingling in the hands or feet or the sensation of cold, clammy hands. It also may lead the heart to pump harder. Although these symptoms may be frightening and feel unpleasant, it is important to remember that hyperventilating is not dangerous. However, you can help overcome the unpleasantness of overbreathing by practicing Breathing Retraining.

Practice this basic technique three times a day, every day:

- **Inhale.** With your shoulders relaxed, inhale as slowly and deeply as you can while you count to six. If you can, use your diaphragm to fill your lungs with air.
- **Hold.** Keep the air in your lungs as you slowly count to four.
- **Exhale.** Slowly breath out as you count to six.
- **Repeat.** Do the inhale-hold-exhale cycle several times. Each time you do it, exhale for longer counts.

Like any new skill, Breathing Retraining requires practice. Try practicing this skill twice a day for several minutes. Initially, do not try this technique in specific situations or when you become frightened or have a panic attack. Begin by practicing in a quiet environment to build up your skill level so that you can later use it in time of “emergency.”

2. Decreasing Avoidance

Regardless of whether you can identify why you began having panic attacks or whether they seemed to come out of the blue, the places where you began having panic attacks often can become triggers themselves. It is not uncommon for individuals to begin to avoid the places where they have had panic attacks. Over time, the individual may begin to avoid more and more places, thereby decreasing their activities and often negatively impacting their quality of life. To break the cycle of avoidance, it is important to first identify the places or situations that are being avoided, and then to do some “relearning.”

To begin this intervention, first create a list of locations or situations that you tend to avoid. Then choose an avoided location or situation that you would like to target first. Now develop an “exposure hierarchy” for this situation or location. An “exposure hierarchy” is a list of actions that make you feel anxious in this situation. Order these actions from least to most anxiety-producing. It is often helpful to have the first item on your hierarchy involve thinking or imagining part of the feared/avoided situation.

Here is an example of an exposure hierarchy for decreasing avoidance of the grocery store. Note how it is ordered from the least amount of anxiety (at the top) to the most anxiety (at the bottom):

- Think about going to the grocery store alone.
- Go to the grocery store with a friend or family member.
- Go to the grocery store alone to pick up a few small items (5-10 minutes in the store).
- Shopping for 10-20 minutes in the store alone.
- Doing the shopping for the week by myself (20-30 minutes in the store).

Your homework is to “expose” yourself to the lowest item on your hierarchy and use your breathing relaxation and coping statements (see below) to help you remain in the situation. Practice this several times during the upcoming week. Once you have mastered each item with minimal anxiety, move on to the next higher action on your list.

Cognitive Interventions

1. Identify your negative self-talk

Anxious thoughts can increase anxiety symptoms and panic. The first step in changing anxious thinking is to identify your own negative, alarming self-talk. Some common alarming thoughts:

- I’m having a heart attack.
- I must be going crazy.
- I think I’m dying.
- People will think I’m crazy.
- I’m going to pass out.
- Oh no – here it comes.
- I can’t stand this.
- I’ve got to get out of here!

2. Use positive coping statements

Changing or disrupting a pattern of anxious thoughts by replacing them with more calming or supportive statements can help to divert a panic attack. Some common helpful coping statements:

- This is not an emergency.
- I don’t like feeling this way, but I can accept it.
- I can feel like this and still be okay.
- This has happened before, and I was okay. I’ll be okay this time, too.
- I can be anxious and still deal with this situation.
- I can handle these symptoms or sensations.

Suggested Readings

- Barlow, D., & Craske, M. (2006). *Mastery of your anxiety and panic workbook*, 4th Edition. New York: Oxford University Press.
- Bourne, E. (2000). *The Anxiety and phobia workbook*, 3rd Edition. Oakland, CA: New Harbinger Publication.