

# Panic Disorder – what, who, why and how to help



## What is panic disorder?

Whilst almost all of us feel anxious at some point in our lives, and performing well in some situations can require a certain level of anxiety, some people suffer severe and persisting anxiety symptoms that become disabling.

Anxiety is a feeling of unease, often worry and fear, of an anticipated threat that is unclear. There are number of anxiety disorders, including panic disorder.

When a person has panic disorder they may feel panicky or anxious some of the time. Rather than emotional symptoms, they may experience physical symptoms such as their heart beating fast, trembling, shaking, difficulty in breathing, chest pain or nausea and they may interpret these feelings as having a heart attack, losing control, fainting or "going crazy". These experiences are known as panic attacks, may be mild or severe and may happen suddenly and unexpectedly or in situations that the person fears.

People may often make changes in their life in order to avoid situations that may trigger panic attacks. They may also fear or avoid public places (which is known as agoraphobia and is covered separately in the British Psychological Society information leaflet on phobias in this series). However, some people report that the panic attacks 'come out of the blue' and do not appear to have any apparent external triggers.

## Who can suffer from panic disorder?

Panic disorder is less common than some anxiety disorders, although about 1 in 100 adults in Britain have panic disorder. Unlike some other anxiety disorders, panic disorder is equally likely to occur in men and women.

# What causes panic disorder?

There is no one answer as to why people develop anxiety disorders, including panic disorder, and sometimes there are a combination of

reasons. Whereas in some cases panic disorder appears to run in families, in others it can occur after a life change or event, such as childbirth, recent bereavement or a car accident. It can also be associated with physical illnesses, such as an overactive thyroid gland, or psychological illnesses, such as depression or post traumatic stress disorder. Lacking a social support network and lacking good coping skills are additional reasons which may contribute to the development of panic disorder. Despite these many reasons for the development of panic disorder, individuals do get better and remain better.

### How can panic disorder be treated?

Anxiety disorders, including panic disorder, are often unrecognized and left untreated. However, a range of effective treatments exist to treat anxiety disorders including psychological (talking) therapies, medication and self-help. Your GP or health professional will discuss with you your personal preference when deciding which treatment or treatments you will receive.

**Psychological therapy:** Psychological treatments can help people with panic disorder and a psychologist, or other healthcare professional will usually work with the person to help deal with the panic disorder.

The psychological therapy shown to have the longest lasting effectiveness in anxiety disorders is Cognitive Behavioural Therapy (CBT). This group of therapies focuses on helping people to change unhelpful patterns of thinking and reacting (behaviour) in order to reduce their distress. The aim of CBT in panic disorder is to help people replace their fearful interpretations of sensations and situations with more realistic interpretations of them. Therapeutic techniques involving thinking skills and testing out the person's behaviour in specific situations, are used to achieve this aim, as well as to deal with the person's avoidance if this is also a part of the panic disorder.

**Medication:** Most commonly, anti-depressant medications called Selective serotonin reuptake inhibitors (SSRIs), are prescribed by GPs or other healthcare professionals, to treat panic disorder. They have been found to be effective whilst being taken. In the past, tranquilliser

medication called benzodiazepines were used. However, these are now used much less frequently due to the risk of addiction and withdrawal problems.

**Self-help**: Several self-help strategies can help people with panic disorder. These include bibliotherapy (in this instance written material explaining panic disorder and how to overcome it), information on support groups where available (face-to-face meetings, telephone conference support groups or additional information on all aspects of anxiety disorders), and the benefit of exercise as part of good general health.

There are many self-help books on dealing with panic attacks. We would recommend self-help books that adhere to the cognitive behavioural approach.

Overcoming Panic: A Self-help Guide Using Cognitive Behavioural Techniques, by Derrick Silove and Vijaya Manicavasagar. Published by Robinson in 1997.

When Panic Attacks: The New, Drug-free Anxiety Therapy That Can Change Your Life, by David Burns. Published by Broadway Books in 2007.

#### Where to find out more

National Institute for Health
nd Clinical Excellence (April 2007).
Management of panic disorder and
generalized anxiety disorder in adults www.nice.org.uk
No Panic, a charity, whose aims are
o aid the relief and rehabilitation of
hose people suffering from Panic Disorders tel: 0808 808 0545
(freephone)
www.nopanic.org.uk

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