

Panic disorder

What is panic disorder?

Most people experience anxiety from time to time, and some experience it more often than others. Anxiety often feels unpleasant and can be extremely distressing, but anxiety itself is not dangerous. A panic attack differs from other anxiety in that it begins suddenly and unexpectedly and is very intense. Panic disorder manifests itself in recurring panic attacks with fear that they will happen again. The panic attack reaches its peak within a few minutes.

Symptoms of panic disorder

If you have experienced at least four of the following symptoms at the same time, you have had a panic attack:

- palpitations or a racing heart
- sweating
- trembling or shaking
- shortness of breath
- a feeling of choking
- chest pain or discomfort
- nausea or stomach discomfort
- dizziness, feelings of unsteadiness or faintness
- chills or hot flashes
- numbness or tingling
- feelings of unreality or feeling detached from yourself
- fear of losing control or “going crazy”
- fear of dying.

For it to be defined as panic disorder, the panic attacks must lead to worry about them happening again. It can also involve changed behaviour linked to the panic attacks, such as avoiding an activity for fear of another panic attack.

Why do I have panic attacks?

Panic disorder is sometimes described as a phobia of bodily sensations. This means you develop a fear of having another panic attack, which leads to increased attention to any signs in your body that a panic attack might be starting. This means that you develop a fear of having another panic attack. When you focus on these signs, they often feel worse or stronger than they actually are. The brain interprets the symptoms as threats and triggers the fight-or-flight response. When symptoms of anxiety arise, the body activates the fight-or-flight response.

The fight-or-flight response exists to help you react and respond to potential threats in your environment. The body responds by triggering several reactions to protect you:

- The heart beats faster to pump more oxygen-rich blood to your muscles, which can cause palpitations. You may experience heart palpitations.
- You start breathing faster to supply oxygen to the muscles.
- The muscles tense so that you are ready to run, jump away, or strike to defend yourself against a threat.
- Digestion slows down because the body prioritises functions that are less critical for immediate survival. This can cause you to get a stomach ache, feel sick or need to go to the toilet.

All of these reactions are natural and serve a purpose. The problem is that the body not only reacts to real dangers but also to imagined dangers. The brain simply has difficulty distinguishing between real and perceived threats.

Avoidance behaviours

When you feel discomfort or anxiety, it is natural to have the feeling of wanting to escape the situation. With panic disorder, it is common to avoid situations and places that may trigger a panic attack. It is also common to try to avoid bodily sensations that could indicate that a panic attack is coming. An example might be avoiding walking quickly to prevent an increased heart rate and sweating, as these sensations remind you of panic attack symptoms.

Avoiding a situation works the same way as fleeing from it—you escape the discomfort and anxiety the situation would cause. But when you flee or avoid a situation, you don't learn to cope with frightening situations. You also don't find out whether the situation is actually dangerous. This gives temporary relief, but in the long run, you never learn to manage your discomfort or notice that it decreases.

Panic disorder and agoraphobia

With panic disorder, it is common to also experience agoraphobia, often referred to as fear of open spaces. Agoraphobia is an intense fear of being in places or situations associated with a previous panic attack. It can also involve situations or places where you think there is a risk of having a panic attack. For example, if you haven't flown in several years and have developed panic disorder, you might be afraid of having a panic attack on a plane. Places where agoraphobia often occurs are areas that can feel confined. Examples include public transport, grocery stores, classrooms, and shopping centres.

Learn to manage a panic attack

Allow the symptoms to occur and manage them in a way that helps your brain learn they are not dangerous. There are several common strategies typically recommended for coping with panic attacks.

Don't fight the panic attack

Breathe slowly and deeply, and repeat to yourself that the panic attack will pass. Breathe in through your nose, deeply into your stomach, while counting to four. Exhale slowly and try to count all the way to eight. Repeat for three to five minutes.

Remind yourself that there is nothing wrong with you.

What you are experiencing is a natural reaction to something difficult or challenging. Keep in mind that having a panic attack is not dangerous. The symptoms are unpleasant but they will go away on their own. Being in a state of panic is stressful and exhausting for the body, and it cannot sustain it indefinitely. Like a car, the body eventually runs out of fuel. A panic attack usually peaks within ten minutes.

Stay in the moment and try to act normally

Remain calm and stay seated; it's important to stay where you are until the attack passes. Try to focus on what is happening around you while breathing slowly.

Intense exercise can be effective for stubborn anxiety

After an intense workout, you force your body to relax – you simply become physically exhausted. Intense exercise is also a useful way to help the brain get used to anxiety symptoms. Exercise can help reduce the perception that symptoms are dangerous. You experience similar symptoms during a panic attack as you do during high-intensity exercise: high heart rate, sweating, shortness of breath, and trembling.

Treatment for panic disorder

One effective treatment for panic disorder is called interoceptive exposure. Exposure involves deliberately facing situations or sensations that cause discomfort.

Interoceptive exposure focuses on deliberately facing, or exposing yourself to, your internal bodily sensations that typically trigger or increase your anxiety. This can include feeling dizzy, having difficulty breathing, or a racing heart.

In the treatment, you intentionally provoke these symptoms with your therapist, for example by hyperventilating or spinning in circles. Through exposure, you teach your brain that these symptoms are normal and harmless reactions. Over time, the symptoms that previously triggered anxiety attacks are no longer experienced as unpleasant.