

# what is panic?



To understand panic, we need to understand fear. You can think of fear as an automatic alarm response that switches on the moment there is danger. Think about what would happen to you if a dangerous animal approached you. For most people it would be panic stations! You, and almost everyone, would go through a whole series of bodily changes, like your heart pumping, breathing faster, sweating, all in order to respond to the danger in front of you. This alarm response would probably lead us to either run for our lives or become sufficiently 'pumped up' to physically defend ourselves. This alarm response is an important survival mechanism called the fight or flight response.

Sometimes, however, it is possible to have this intense fear response when there is no danger – it is a false alarm that seems to happen when you least expect it. It is like someone ringing the fire alarm when there is no fire! Essentially, a panic attack is a false alarm.



Many people experience some mild sensations when they feel anxious about something, but a panic attack is much more intense than usual. A panic attack is usually described as a sudden escalating surge of extreme fear. Some people portray the experience of panic as 'sheer terror'. Let's have a look at some of the symptoms of a panic attack:

## Panic Attack Symptoms

- Skipping, racing or pounding heart
- Sweating
- Trembling or shaking
- Shortness of breath or difficulty breathing
- Choking sensations
- Chest pain, pressure or discomfort
- Nausea, stomach problems or sudden diarrhoea
- Dizziness, lightheadedness, feeling faint
- Tingling or numbness in parts of your body
- Hot flushes or chills
- Feeling things around you are strange, unreal, detached, unfamiliar, or feeling detached from body
- Thoughts of losing control or going crazy
- Fear of dying

As you can see from the list, many of the symptoms are similar to what you might experience if you were in a truly dangerous situation. A panic attack can be very frightening and you may feel a strong desire to escape the situation. Many of the symptoms may appear to indicate some medical condition and some people seek emergency assistance.

## Characteristics of a Panic Attack

- It peaks quickly - between 1 to 10 minutes
- The apex of the panic attack lasts for approximately 5 to 10 minutes (unless constantly rekindled)
- The initial attack is usually described as "coming out of the blue" and not consistently associated with a specific situation, although with time panics can become associated with specific situations
- The attack is not linked to marked physical exertion
- The attacks are recurrent over time
- During an attack the person experiences a strong urge to escape to safety

Many people believe that they may faint whilst having a panic attack. This is highly unlikely because the physiological system producing a panic attack is the opposite of the one that produces fainting.

Sometimes people have panic attacks that occur during the night when they are sleeping. They wake from sleep in a state of panic. These can be very frightening because they occur without an obvious trigger.

Panic attacks in, and of themselves, are not a psychiatric condition. However, panic attacks constitute the key ingredient of Panic Disorder if the person experiences at least 4 symptoms of the list previously described, the attacks peak within about 10 minutes and the person has a persistent fear of having another attack.

## Panic Disorder and Agoraphobia

Someone with panic disorder has a persistent fear of having another attack or worries about the consequences of the attack. Many people change their behaviour to try to prevent panic attacks. Some people are affected so much that they try to avoid any place where it might be difficult to get help or to escape from. When this avoidance is severe it is called Agoraphobia.



Panic Disorder is more common than you think. A recent study reported that 22.7% of people have reported experience with panic attacks in their lifetime. 3.7% have experienced Panic Disorder and 1.1% have experienced Panic Disorder plus Agoraphobia. \* These numbers equate to millions of people world wide. If left untreated, Panic Disorder may become accompanied by depression, other anxiety disorders, dependence on alcohol or drugs and may also lead to significant social and occupational impairment.

\* Archives of General Psychiatry. 2006; 63:415-424

# biology + psychology of panic



Panic attacks (the key feature of Panic Disorder) can be seen as a blend of biological, emotional & psychological reactions. The emotional response is purely fear. The biological & psychological reactions are described in more detail below.

## Biological Reactions 1: Fight or Flight

When there is real danger, or when we believe there is danger, our bodies go through a series of changes called the fight/flight response. Basically, our bodies are designed to physically respond when we believe a threat exists, in case we need to either run away, or stand and fight. Some of these changes are:

- an increase in heart rate and strength of heart beat. This enables blood and oxygen to be pumped around the body faster.
- an increase in the rate and depth of breathing. This allows more oxygen to be taken into the body.
- an increase in sweating. This causes the body to become more slippery, making it harder for a predator to grab, and also cooling the body.
- muscle tension in preparation for fight/flight. This results in subjective feelings of tension, sometimes resulting in aches and pains and trembling and shaking.

When we become anxious and afraid in situations where there is no real danger, our body sets off an automatic biological "alarm". However, in this case it has set off a "false alarm", because there is no danger to 'fight' or run from.

## Biological Reactions 2: Hyperventilation & Anxious Breathing

When we breathe in we take in oxygen that is used by the body, and we breathe out carbon dioxide. In order for the body to run efficiently, there needs to be a balance between oxygen and carbon dioxide. When we are anxious, this balance is disrupted because we begin to overbreathe. When the body detects that there is an imbalance, it responds with a number of chemical changes. These changes produce symptoms such as dizziness, light-headedness, confusion, breathlessness, blurred vision, increase in heart rate, numbness and tingling in the extremities, clammy hands and muscle stiffness. For people with panic, these physiological sensations can be quite distressing, as they may be perceived as being a sign of an oncoming attack, or something dangerous such as a heart attack. However these are largely related to overbreathing and not to physical problems.



## Psychological Reactions 1: Thinking Associated with Panic

We've described the physical symptoms of panic. People who panic are very good at noticing these symptoms. They constantly scan their bodies for these symptoms. This scanning for internal sensations becomes an automatic habit. Once they have noticed the symptoms they are often interpreted as signs of danger. This can result in people thinking that there is something wrong with them, that they must be going crazy or losing control or that they are going to die.

There are a number of types of thinking that often occur during panic, including:

- Catastrophic thoughts about normal or anxious physical sensations (eg "My heart skipped a beat - I must be having a heart attack!")
- Over-estimating the chance that they will have a panic attack (eg "I'll definitely have a panic attack if I catch the bus to work")
- Over-estimating the cost of having a panic attack: thinking that the consequences of having a panic attack will be very serious or very negative.

## Psychological Reactions 2: Behaviours that Keep Panic Going

When we feel anxious or expect to feel anxious, we often act in some way to control our anxiety. One way you may do this is by keeping away from situations where you might panic. This is called avoidance, and can include:



- Situations where you've had panic attacks in the past
- Situations from which it is difficult to escape, or where it might be difficult to get help, such as public transport, shopping centres, driving in peak hour traffic
- Situations or activities which might result in similar sensations, such as physical activity, drinking coffee, having sex, emotional activities such as getting angry

A second response may be to behave differently, or to use "safety behaviours". The following are examples of these; you might make sure you are near an escape route, carry medication with you, or ensure that you are next to a wall to lean on. Or you may use other more subtle methods like trying to distract yourself from your anxiety by seeking reassurance, reading something, or bringing music to listen to. Although this may not seem harmful to begin with, if you become dependent on these behaviours you can become even more distressed if one day it's not possible to use them.



# physical symptoms & panic



## Panic Maintained

Some of the factors that are an important part of why panic is maintained are:

⇒ **Thinking styles**, such as catastrophic thinking. Panic sensations are interpreted as signalling something terrible, such as a medical emergency.

⇒ **Focus on bodily sensations**. Monitoring your body for symptoms of panic means that you are especially sensitive to the sensations, even when those changes are normal.

⇒ **Avoidance**. As a result of this fear of experiencing a panic attack, you avoid certain situations and sensations similar to panic.

It does seem natural to try to avoid the sensations that are similar to panic attacks. It might also seem natural to scan for the possibility of physical alarms, as this might help you to avoid them. However, if you don't experience these sensations, you won't give yourself any real evidence about one important thing:

**Panic sensations are not harmful.**

Only by facing your "fears" about panic attacks and related physiological sensations will you have enough evidence to challenge your beliefs about physical alarms. One way to do this is to experience the physical sensations that you are afraid of, or "exposure to internal sensations".



## Exposure to Internal Sensations

Exposure helps by providing you with evidence that panic attacks are not harmful. It works by challenging three factors to break the cycle of panic and anxiety:

⇒ **Thinking styles**. Through physiological sensations exposure, you will have direct evidence that such sensations are not catastrophic.

⇒ **Focus on bodily sensations**. If you do notice normal changes in your physiological sensations, exposure tasks will give you direct evidence that physiological sensations are not catastrophic, and this will reduce your fear of them. Further, if you are not afraid of these sensations, then there will be less reason to monitor your body for them.

⇒ **Avoidance**. Exposing yourself to physiological sensations is incompatible with avoiding them. By repeatedly exposing yourself to such sensations, you will become used to them and you will be less likely to react with anxiety when you notice these sensations. By doing it over and over again, it becomes easier to do.

## Preparing for Internal Exposure

Before you start, it is important to consider two things:

- 1) You must be in a healthy physical state before completing these exercises. If you have health issues that might be complicated by physical strain, you should not continue. Check the list of physiological exercises to your doctor to determine whether you can proceed.
- 2) If you are finding the tasks particularly difficult, or are concerned about progress, please see a mental health practitioner who can guide you through the process.

## Tasks to Try Out



With a stopwatch, try each of these tasks, designed to produce particular physiological sensations:

- **Hyperventilation** Breathe deeply & quickly through the mouth using as much force as you can for 1 minute
- **Shaking head**. Shake your head from side to side while keeping your eyes open. Be careful with your neck. After 30 seconds, look straight ahead.
- **Head between legs**. While sitting in a chair, place your head between your legs. After 30 seconds, stand upright quickly.
- **Running in place/run up steps**. Run/Step up and down quickly, maintaining a quick pace
- **Maintain muscle tension**. While sitting in a chair tense/tighten all of your muscles for 1 min.
- **Hold your breath**. Take a deep breath and hold it for 30 sec or as long as you can.
- **Spinning**. Use a swivel chair to spin around as quickly as possible for 1 min.
- **Breathe through a straw**. Use a narrow straw to breathe, whilst holding your nose closed, for 1 min.
- **Chest breathing**. Take a deep breath until your chest is "puffed up", then take short, sharp breaths, breathing just from your chest.
- **Stare at a spot**. Stare at spot on a blank wall, or at a mirror, without shifting your gaze, for 1.5 min.

Decide which tasks are most relevant to your experience of panic, and practice them using the *Internal Sensations Exercises* worksheet. And remember:

- Try not to stop the task early, use distraction, or avoid doing the task properly
- Pay attention to physical sensations that occur during the exercise as well as those which occur shortly after
- Dispute unhelpful thoughts during the exercise
- Use thought diaries, social support, and scheduling to maximise your continued commitment to working through the exposure exercises.

# Situational exposure

One of the ways that people avoid feeling anxiety in certain situations is to avoid those situations wherever possible. However, by not exposing yourself to those situations you don't get the chance to disconfirm your fears, which in turn can make those fears even stronger. If being in those situations is important to you, you will need to face your fears in a real situation and begin to turn social activity into a positive experience. This information sheet is designed to show you how you can begin to do that.

## Graded Exposure

Some people might encourage you to tackle your biggest fear first – to “jump in the deep end” and get it over and done with. However, many people prefer to take it “step-by-step”, what some people call “**graded exposure**”. By using graded exposure you start with situations that are easier for you to handle, then work your way up to more challenging tasks. This allows you to build your confidence slowly, to use other skills you have learned, to get used to the situations, and to challenge your fears about each situational exposure exercise. By doing this in a structured and repeated way, you have a good chance of reducing your anxiety about those situations.

## Situations That You Avoid

The first thing to do is to think about the situations that you fear and try to avoid. For example, some people might fear and avoid going to social places, or being assertive with others. Make a list of these situations.

Once you have made the list, indicate how much distress you feel in those situations by giving them each a rating on a scale of 0 to 100.

**0** – You are perfectly relaxed

**25-49** – *Mild*: You can still cope with the situation

**50-64** – *Moderate*: You are distracted by the anxiety, but are still aware of what's happening

**65-84** – *High*: Difficult to concentrate, thinking about how to escape

**85-100** – *Extreme*: The anxiety is overwhelming and you just want to escape from the situation

## Planning Your Goals

Now you can start to turn the situations you avoid into goals that you'd like to achieve. For example, a situation that you avoid might be “Going to pubs”, which has a distress rating of 75. A goal for this might be “To go out to a pub on a weekend night with friends and stay there for at least 2 hours”. When you are developing a goal, it helps to make them SMART:

**Specific**: It needs to be as clear (eg compare “To eat in public” with “To eat lunch in a local restaurant on my own.”)

**Measurable**: It needs to be easily assessed (eg compare “Being friendly” with “Staying for 2 hrs” - what does ‘friendly’ mean?)

**Achievable**: It needs to be possible and probable to achieve

**Relevant**: It needs to be important to you

**Timebound**: It needs to have an end date for completion

## Building Steps Towards Your Goal

Now that you have a personal, realistic, achievable, measurable, and specific goal that you'd like to achieve, you can plan your “graded exposure” program. This involves breaking the goal down so that you can work step-by-step towards your major goal. Of course, goals with high distress (eg a rating of 80+) will need more steps than a medium distress goal (eg a rating of 40+). You can break your goal into smaller steps by changing WHO is there, WHAT you do, WHEN you do it, WHERE you do it, and HOW long you do it for. Follow the SMART criteria for developing each step. Here's an example.



<b>GOAL:</b> To go out to a pub on a weekend night with friends and stay there for at least 2 hours	DISTRESS 0-100  <b>80</b>
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STEP		DISTRESS 0-100
1	Go to the local pub on a <u>weekday afternoon</u> (with a friend who knows about the problem), buy a soft drink and stay for 10min	35
2	Go to the local pub on a <u>weekday afternoon</u> (with a friend who knows about the problem), buy a soft drink and stay for 30min	45
3	Go to the local pub on a <u>weeknight</u> (with a friend who knows about the problem), staying from 7pm to 8pm	55
4	Go to the local pub on a <u>weekend night</u> (with a friend who knows about the problem), and stay for 30 minutes	65
5	Go to the local pub on a <u>weekday night</u> (with a friend who knows about the problem), staying from 8pm to 10pm	70
6	Go to the local pub on a <u>weekend night</u> (some of the friends don't know about the problem), staying from 8pm to 10pm	80



# Situational exposure

## Climbing Steps Towards Your Goal

Once you have developed the steps that you can take towards your main goal, you can make an appointment with yourself to start on your first step. Here are a few tips for how you can progress through your situational exposure steps.

### before the first step

- 1) **Coping with anxiety.** Before you start on a situational exposure exercise, it is useful to have developed ways of coping with the distress you might feel in the situation. Using well practised breathing techniques can help to reduce the physical response to anxiety. Reducing your general level of anxiety through muscle relaxation techniques can also help to prepare you for entering the situation.
- 2) **Challenging negative thoughts.** Another way to prepare yourself is to challenge negative thoughts that you might have about yourself or the situation. If you spend time working through these thoughts you can come up with some helpful ways of thinking about the situation.

**These strategies are discussed in other information sheets in this series.**

### completing a step

- 1) **Expect some anxiety.** When you enter the situation – at any step – remember that you'll probably experience some anxiety or discomfort. That's why it's important to start small, and work your way up.
- 2) **Use your skills.** Just as used your coping skills to prepare for the situation, use them while you are in the situation. Use your breathing to reduce your physical anxiety response and challenge negative thoughts that you might have.
- 3) **Stay in the situation.** While it might be tempting to leave if you feel uncomfortable, try to stay in the situation until the anxiety goes down. In this way you can see that, as frightening as the feelings are, they are not dangerous, and they do subside.
- 4) **Stay involved.** 'Staying away' can happen in many different ways, such as sitting away from others, or avoiding eye contact. Stay involved in the situation by noticing what is happening and really experiencing the situation. Really taking part in these situations is the only way to make sure you get used to the anxiety.
- 5) **Stay sober.** Staying involved means being fully aware of what is happening. This means not taking alcohol or drugs to try to "mentally escape" the situation.



### climbing the steps

- 1) **One step at a time.** Climbing a stepladder is not about taking one giant leap, it's about taking one small step at a time. You begin with the least difficult step and gradually work your way up the step ladder getting used to the anxiety you feel at each step. Your primary aim at each step is to complete that step and that step alone.
- 2) **Over and over again.** Do a step frequently and repeatedly, and try to do them in close succession to make sure you are comfortable with the situation before you move onto the next step. This might take 3 or 4 times.
- 3) **Use your skills.** Work through any unhelpful thoughts about the situation after you have completed each step, or repeated a step. Allow yourself to unwind with a relaxation session.
- 4) **Acknowledge the steps you've made.** When you are comfortable with a particular step, admit to your successes and acknowledge the steps that you've made so far.
- 5) **Stepbacks.** We all have our up and down days, and sometimes you might think you've taken a 'step-back' because the situational exposure exercise didn't go as well as you hoped. If you are having difficulties with a particular step then it might be useful to take a "step back" and work on the previous step again or design an "in between" step between the one you've completed and the difficult one. That's why doing a step over and over is so helpful. Remember – take it one step at a time.

### use a diary to record your progress

A diary can help you to keep track of the steps you've completed, and how you can cope with any difficulties you've had. You could use the following columns

- **Situation:** Describe the step and the situation
- **Expected Distress:** Indicate the distress level you expected (0-100)
- **Actual Distress:** Indicate the level of distress you *actually* experienced
- **Outcome:** Indicate whether you completed the step and the skills you used that were helpful, OR, if you had difficulties, describe how you can prepare for the next time.

**If you're having difficulties with situational exposure tasks, talk to a professional so that they can guide you through the process.**