

# Panic Disorder: Information and Treatment Choices



**P**anic disorder is an anxiety condition that occurs when you mistakenly interpret anxiety symptoms as a sign of danger.

Our bodies have a natural alarm system that signals us when we need to act fast to protect ourselves or others from danger. Sometimes, this alarm goes off at the wrong time or for no obvious reason. Such “false alarms” occur mostly when we have been under stress or when we are going through emotional turmoil. These false alarms are called “panic attacks.” During a panic attack you may have sensations that include difficulty breathing, rapid heartbeat, dizziness, feeling lightheaded, or sick to your stomach.

Some people experience panic attacks frequently and may develop a strong fear of having another attack. This is called “panic disorder.” Some people with panic disorder avoid certain places or situations because

they fear being trapped or helpless if a panic attack occurs. This type of avoidance is called “agoraphobia.”

## What causes panic disorder?

Research shows that panic disorder is caused by a combination of:

- biological factors
- psychological factors such as past experiences or beliefs
- stressful life events

Once panic disorder develops, fear keeps it going. Agoraphobia can make the fear even greater. Keeping away from feared situations can increase the feeling that there is something to be afraid of. Research shows that individuals can overcome panic disorder by exposing themselves to the very situations they fear. A good motto to keep in mind is: “Feel the fear and do it anyway.”

## Treatment options

There are two types of effective treatments for panic disorder (with or without agoraphobia): a type of psychotherapy called cognitive-behavior therapy and medications.

### Cognitive-behavior therapy (CBT)

CBT is a highly effective treatment that can produce long-lasting benefits even after the sessions with your

therapist have ended. CBT is recommended for everyone with panic disorder, regardless of the severity.

The goal of CBT is to overcome or lessen the fear of panic attacks and to help you face feared situations. CBT works by changing the negative patterns of thinking and behavior that are part of panic disorder.

CBT requires your active involvement. There are specific exercises to practice with your therapist and at home to reduce your sensitivity to panic sensations. If agoraphobia is also a problem, CBT will teach you how to face feared situations and help you regain your confidence.

CBT for panic disorder is usually offered in a group format. Here are some reasons for this:

- Groups help people not to feel alone in their struggles.
- Group members feel encouraged by one another.
- Groups focus on learning skills to overcome panic, phobias, and anxiety.

### Medications

Although treating panic disorder with medications can be effective, many people find that the panic symptoms return when the medication is stopped. If you are prescribed medications, you will meet with



## Summary of treatment recommendations

### **Panic disorder with no agoraphobia or only mild agoraphobia**

If you have panic disorder with mild or no agoraphobia, CBT works best alone rather than in combination with medications. Research has shown that the combination of medication and CBT may lead to poorer long term results than CBT by itself. If you choose combination treatment, CBT should be added when you begin to taper off your medications. That way, when panic sensations return, CBT will help you cope with your anxiety and fear about the sensations.

### **Panic disorder with moderate to severe agoraphobia**

You can be treated with CBT alone or with CBT and medications. Medications alone may not work as well. If your condition is severe and you are not doing well at work, at home, or in relationships, your doctor or other medical professional may recommend that you receive both medication and CBT, especially if your symptoms do not improve with CBT alone.

a psychiatrist to monitor your progress. Medications may produce some side effects that are unpleasant or uncomfortable, but these usually decrease over time.

### **Other options**

Some people feel that they need additional therapy to help with problems other than panic disorder. If this is the case, your medical professional may recommend that you attend another therapy group or pursue individual psychotherapy to address these other issues. CBT is the only type of therapy that has been proven to be effective for panic disorder. Other therapies and relaxation training have not been shown to be effective.

As you consider your choices for treatment, you may find that it's helpful to first think about the results that you hope to achieve. Therefore, a good place to start is to carefully consider your treatment goals.

### **Treatment goals**

- Reduce symptoms of panic, feelings of anxiety, and agoraphobia.
- Increase feelings of self-control.
- Improve your ability to cope with situations and events that make you anxious.
- Improve your quality of life.

## Other resources

- Anxiety Disorders Association of America: (301) 231-9350; [www.adaa.org](http://www.adaa.org)
- National Institute of Mental Health: (800) 64 PANIC (647-2642); (301) 443-4513; [www.nimh.nih.gov](http://www.nimh.nih.gov)
- Connect to our Web site at [members.kp.org](http://members.kp.org).
- Check your *Kaiser Permanente Healthwise Handbook*.
- Listen to the Kaiser Permanente Healthphone at 1-800-332-7563. For TTY, call 1-800-777-9059.
- Visit your facility's Health Education Department for books, videos, classes, and additional resources.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other medical professional. If you have persistent health problems, or if you have further questions, please consult your doctor. If you are thinking seriously about suicide or hurting yourself, get help right away. Call your Kaiser Permanente medical professional or go to a Plan hospital. If you think you cannot safely go to a Plan hospital, call 9-1-1 or go to the nearest hospital emergency room.