

Panic Disorder

You've stopped going out on weekend nights – too many people – but Sunday nights are usually quiet. There are only a few other people in the restaurant, two at the sushi bar and a couple at a table in the other corner. This is hard for you, but you and your loved one have always enjoyed sushi together and sushi ought to be enjoyed minutes from the chef's knife, not from take-out and certainly not from the grocery store. He smiles at you and touches your hand on the table. It doesn't work.

You feel hot for a second and then your face flushes, feels on fire. Your heart races and pounds, gasping for breath, trying to escape from your chest. Your hands sweat as they clutch the table cloth. You need to get out of this place as much as you would need to escape the tiger's cage or the burning building.

The waiter notices and comes over to help as if maybe you are in terror from a half-eaten tataki. But you aren't alone, so calms the waiter and takes you outside to the car. The cats will be happy to see you come home early and the restaurant will package the sushi as take-out. Why can't something so normal ever be easy?

Six million Americans have panic attacks just like this one, a condition called Panic Disorder. Women are more than twice as likely as men to suffer from this disorder. At least initially, sufferers of panic disorder aren't afraid of anything that can be easily expressed. Reassurances that no harm will come to them in the sushi restaurant don't help anything. However, as more panic attacks happen, a sufferer of panic disorder becomes afraid of the panic attacks themselves. If one happened the last time the sufferer went to a sushi restaurant, there really is something to be afraid of in the sushi restaurant – chest pains, breathlessness and the humiliation of not being able to enjoy a relaxed meal out.

Left untreated, panic disorder can be debilitating. About one-third of panic disorder sufferers ultimately become housebound, not able to drive, go grocery shopping, even walk to the mailbox. Panic disorder that has progressed this far is called agoraphobia. Agoraphobia sufferers have difficulty being employed, having nearly any social interactions, and may have poor health because of their inability to seek medical and psychological care. Depression, drug abuse, and alcoholism are very common results of agoraphobia.

Unfortunately, panic disorder sufferers may need to spend considerable effort to get treated for panic disorder. The symptoms of panic disorder can also be symptoms of medical problems, in particular cardiac problems, that need to be ruled out. One recent study found that people with panic disorder saw on average 10 health care professionals before they were finally diagnosed with panic disorder.

The good news is that panic disorder is a very treatable condition and most sufferers can lead lives either cured or unaffected if they seek proper treatment probably including

medication and psychotherapy, especially Cognitive Behavior Therapy (CBT). One recent study found that panic disorder sufferers undergoing CBT all noticed significant improvements after 10 sessions. Indeed, CBT was more effective than medication, but the combination of CBT and medication can be almost completely effective at eliminating symptoms of panic disorder.

The hallmark of panic disorder is panic attacks which are characterized by overwhelming fear with no obvious reason that usually subsides in a few minutes. Symptoms include:

- racing heartbeat
- difficulty breathing, feeling as though you 'can't get enough air'
- terror that is almost paralyzing
- dizziness, lightheadedness or nausea
- trembling, sweating, shaking
- choking, chest pains
- hot flashes, or sudden chills
- tingling in fingers or toes ('pins and needles')
- fear that you're going to go crazy or are about to die

Besides the effects listed above, recent studies have found that sufferers of panic disorder:

- are more prone to alcohol and other drug abuse
- have greater risk of attempting suicide
- spend more time in hospital emergency rooms
- spend less time on hobbies, sports and other satisfying activities
- tend to be financially dependent on others
- report feeling emotionally and physically less healthy than non-sufferers.
- are afraid of driving more than a few miles away from home

Cognitive behavior therapy for panic disorder is not easy. Therapy focuses on uncovering the cognitive processes that lead to panic attacks and then cooperatively working through “cognitive restructuring” to replace these processes with benign ones. Therapy provides a controlled setting for working through these processes (which are almost certainly frightening). A skilled therapist can keep these sessions from eliciting panic attacks while still making progress in uncovering the cognitive process that lead to the attacks. In between sessions, CBT requires homework identifying and perhaps even writing down cognitive processes that lead to panic attacks or fear of attacks.

The behavioral component of CBT for panic disorder focuses on “interoceptive exposure” which is about understanding the physical symptoms of panic attacks (hot flashes, heart racing, sweating) and teaching that these do not have to lead to full-blown attacks. Relaxation techniques can be taught that respond to those symptoms and allow sufferers to “flow-through” a panic attack.

Therapy for panic disorder is hard work (you will absolutely feel tired after each session and to get optimal results you will need to do homework), but the results can be life-changing. There is no reason to suffer from panic attacks when relatively brief therapy can be so effective. If you suffer from panic disorder, I can offer you the best possible news – your life is waiting for you.