

PANIC DISORDER

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OCD

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**“I don’t want
their pity or them
to feel bad for me.
I want them to just
be there for me,
let me vent,
let me cry
and just don’t,
give up on me.”**

Ashley C

What is Panic disorder?

Panic Disorder can be described as experiencing intense fear unexpectedly, or “out of the blue”. These experiences are called panic attacks. When someone has a panic attack, along with intense fear they feel a range of physical symptoms which may include:

- Chest pain
- Nausea
- Dizziness
- Difficulty breathing
- Racing heart beat
- Sweating
- Shaking

While many people experience some of these sensations at times, a person with Panic Disorder will experience several of these symptoms all at once, and these symptoms will become extremely intense very quickly, peaking within minutes, and for no obvious reason. Sometimes a person with Panic Disorder will wake up having a panic attack. A common belief when having a panic attack is that it is a heart attack or that they are “losing their mind”. This then leads them to feel even more anxiety and so the panic attack becomes more intense. Underlying Panic Disorder are beliefs that the physical feelings of anxiety are dangerous or negative, and so when these feelings are experienced, anxiety about them quickly increases.

People who experience Panic Disorder will often avoid places where they fear having a panic attack. When this avoidance becomes severe and interferes with their day to day life, it is called Agoraphobia.

Common places and situations that people with Panic Disorder may want to avoid include:

- Shopping centres
- Taking public transport
- Movie cinemas
- Being in a car
- Being far from home
- Crossing bridges

Causes

Genetics and temperament

A family history of anxiety disorders is linked to an increased chance of developing Panic Disorder. This may be linked to the genes a child inherits, as well as through children observing and learning anxious behaviours and thinking styles from family members. Some people appear to be particularly sensitive to the feelings of anxiety, which may be linked to genes, and these people appear to be more at risk of developing Panic Disorder.

Parental factors

Children of parents who worry about feelings of anxiety, or think of anxiety as dangerous, have an increased chance of developing Panic Disorder.

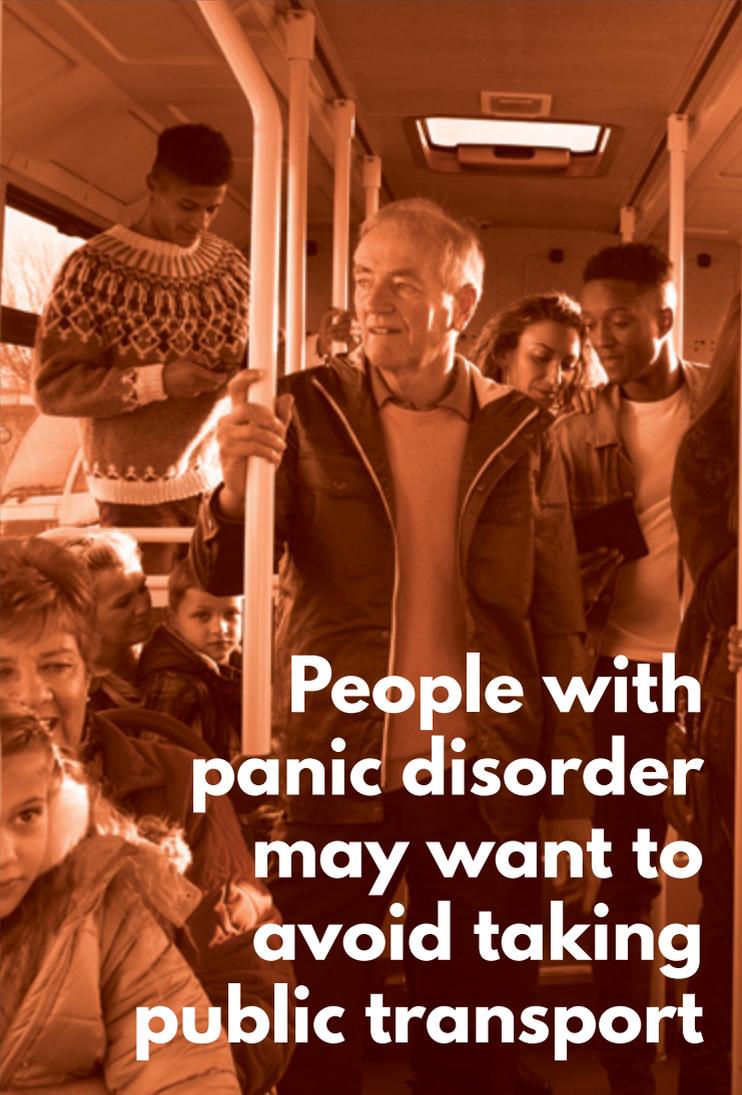
Parenting styles that are controlling and restrictive, and that offer less love and care (also known as a punitive parenting style) have been linked to Panic Disorder.

Thinking (cognitive) style

Certain styles of thinking have been linked with Panic Disorder. A “looming” cognitive (or thinking) style is a tendency to think about and pay attention to thoughts about upcoming dangers and risks. This thinking style has been linked to Panic Disorder. In addition, people with Panic Disorder often think that having a panic attack will result in far worse consequences than it actually does, and tend to overestimate the chances of having a panic attack in a particular situation.

Learning experiences and negative life events

Traumatic life events such as the death of a parent, experiencing a severe childhood illness, and violence in the family appear to be linked to developing Panic Disorder.



**People with
panic disorder
may want to
avoid taking
public transport**

Seeking help

If you experience high anxiety and worry which is significantly interfering in your day to day life, there are effective treatments available. You can seek help at:

- Your GP. Your GP can refer you to a mental health professional, such as a psychologist or psychiatrist. Your GP is the best person to start with when looking for effective treatment for Panic Disorder.

Like all anxiety disorders, Panic Disorder is highly treatable.

Treatment

Psychological therapies

Cognitive behaviour therapy (CBT) is a recommended psychological treatment for Panic Disorder. CBT is a practical treatment, and involves teaching practical skills to deal with anxiety symptoms. CBT helps people understand how their problems, thoughts, feelings, and behaviours affect each other, as well as strategies to gain more control over their anxiety. CBT helps people to question their negative and anxious thoughts, and to do things that would normally be avoided due to anxiety. CBT helps people to begin to change these behaviours, and reduce their anxiety. For Panic Disorder, this involves challenging anxious thoughts about the symptoms of anxiety and panic, and learning how to face situations and feelings that cause anxiety.

Online treatment programs for some anxiety disorders, including Panic Disorder have recently been developed. Online treatment programs are based on CBT. Online treatment programs may involve some contact with a therapist over the Internet. Recent research has shown that online treatment programs can be effective in reducing anxiety symptoms.

Medication

A type of anti-depressant medication known as selective serotonin reuptake inhibitors (SSRI) has been found to be effective in treating Panic Disorder over the short-term and the long-term. If the medication does not help, a different SSRI may be offered. If this does not help, a different type of medication called a serotonin-noradrenalin reuptake inhibitor (SNRI) may be offered. Your GP or psychiatrist will need to prescribe this medication to you.

Self-help

Self-help has been shown to be an effective treatment for Panic Disorder. Self-help treatment should include books or other written material based on CBT; access to support groups (sometimes run by people who have experienced Panic Disorder); and advice from a GP on using exercise to improve mood. It is recommended that a person using self-help as a form of treatment for Panic Disorder should see their doctor (GP) regularly (every 4 to 8 weeks).

How family and friends can help

- Try to understand the person with Panic Disorder's anxiety, and remember that although you may not find them worrying, to the person with Panic Disorder the worries will cause intense anxiety
- Avoid telling a person with Panic Disorder to just snap out of it or get over their worries
- Encourage the person with Panic Disorder to seek professional treatment and encourage them to persist with it



Where do I go for help?

The WayAhead Directory

is an online resource providing a comprehensive list of mental health related services in NSW.

www.WayAhead.org.au

Phone Lines

WayAhead Mental Health
Information Line

1300 794 991

Contact your doctor or Local GP

Local community Mental Health
Service

Useful Websites

WayAhead

understandinganxiety.org.au

information about anxiety, and links to anxiety support groups

BeyondBlue

beyondblue.org.au

information about anxiety

Australian Psychological Society

psychology.org.au

1800 22 4636

Information about anxiety and contact details for psychologists who treat anxiety disorders

The Virtual Clinic - online treatment programs for anxiety

www.virtualclinic.org.au



Translating & Interpreting Service
(TIS) 131 450

Please call the Mental Health Information Line through the Telephone Interpreter Service (TIS). Free to Australian citizens or permanent residents.

References:

Cochrane review www.cochrane.org

NICE guidelines www.nice.org.uk

Disclaimer

This information is for educational purposes. As neither brochures nor websites can diagnose people it is always important to obtain professional advice and/or help when needed.

This information may be reproduced with an acknowledgement to the Mental Health Association NSW.

The Association encourages feedback and welcomes comments about the information provided.

Last reviewed by Emma Pinn 2016

**“ I found people who
understood exactly what I
was going through ”**



