

What is Panic and What are Panic Attacks?

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Panic Attack Symptoms

Pounding heart

Chest pains

Lightheadedness or dizziness

Nausea or stomach problems

Flushes or chills

Shortness of breath or a feeling of smothering or choking

Tingling or numbness

Shaking or trembling

Feelings of unreality

Terror

A feeling of being out of control or going crazy

Fear of dying

Sweating

People with panic disorder have feelings of terror that strike suddenly and repeatedly with no warning. They can't predict when an attack will occur, and many develop intense anxiety between episodes, worrying when and where the next one will strike. In between times there is a persistent, lingering worry that another attack could come any minute.

When a panic attack strikes, most likely your heart pounds and you may feel sweaty, weak, faint, or dizzy. Your hands may tingle or feel numb, and you might feel flushed or chilled. You may have chest pain or smothering sensations, a sense of unreality, or fear of impending doom or loss of control. You may genuinely believe you're having a heart attack or stroke, losing your mind, or on the verge of death. Attacks can occur any time, even during nondream sleep. While most attacks average a couple of minutes, occasionally they can go on for up to 10 minutes. In rare cases, they may last an hour or more.

Panic disorder strikes between 3 and 6 million Americans, and is twice as common in women as in men. It can appear at any age – in children or in the elderly – but most often it begins in young adults. Not everyone who experiences panic attacks will develop panic disorder – for example, many people have one attack but never have another. For those who do have panic disorder, though, it's important to seek treatment. Untreated, the disorder can become very disabling.

Panic disorder is often accompanied by other conditions such as depression or alcoholism, and may spawn phobias, which can develop in places or situations where panic attacks have occurred. For example, if a panic attack strikes while

you're riding an elevator, you may develop a fear of elevators and perhaps start avoiding them.

Some people's lives become greatly restricted â€” they avoid normal, everyday activities such as grocery shopping, driving, or in some cases even leaving the house. Or, they may be able to confront a feared situation oÂ¬nly if accompanied by a spouse or other trusted person. Basically, they avoid any situation they fear would make them feel helpless if a panic attack occurs. When people's lives become so restricted by the disorder, as happens in about oÂ¬ne-third of all people with panic disorder, the condition is called agoraphobia. A tendency toward panic disorder and agoraphobia runs in families. Nevertheless, early treatment of panic disorder can often stop the progression to agoraphobia.

Studies have shown that proper treatment â€” a type of psychotherapy called cognitive-behavioral therapy, medications, or possibly a combination of the two â€” helps 70 to 90 percent of people with panic disorder. Significant improvement is usually seen within 6 to 8 weeks.

Cognitive-behavioral approaches teach patients how to view the panic situations differently and demonstrate ways to reduce anxiety, using breathing exercises or techniques to refocus attention, for example. Another technique used in cognitive-behavioral therapy, called exposure therapy, can often help alleviate the phobias that may result from panic disorder. In exposure therapy, people are very slowly exposed to the fearful situation until they become desensitized to it.

Some people find the greatest relief from panic disorder symptoms when they take certain prescription medications. Such medications, like cognitive-behavioral therapy, can help to prevent panic attacks or reduce their frequency and severity. Two types of medications that have been shown to be safe and effective in the treatment of panic disorder are antidepressants and benzodiazepines.