Panic Attacks Fact Sheet

What are panic attacks?

Panic attacks are sudden periods of intense anxiety or fear, where four (or more) of the following symptoms develop abruptly and peak within 10 minutes:

- Pounding heart
- Sweating
- Trembling or shaking
- Shortness of breath
- Feeling of choking
- Chest pain or discomfort
- Nausea, abdominal pain
- Feeling dizzy, unsteady, faint or lightheaded
- Numb or tingling feelings
- Hot flushes or chills
- Feelings of unreality or of being detached from oneself
- Fear of losing control or going crazy
- Fear of dying

See also www.crufadclinic.org for an online treatment course.

You will notice that the last two symptoms mentioned are different to all the others because they are fears rather than physical sensations. One of the most frightening things about a panic attack is that the person does not know what is happening to them or why. Because there doesn't seem to be any reason for these sudden and intense physical symptoms, most people interpret them to mean that they are about to lose control, have a heart attack, die, or go crazy. In other words, they take the symptoms as a sign that something dangerous and terrible is happening. As you will see in the treatment section, this interpretation is very important because it can inadvertently contribute to the cycle of panic.
What is Panic Disorder?

Panic Disorder occurs when the person has both recurrent panic attacks and either a fear of having another panic attack or a fear of losing control, having a heart attack, or "going crazy". If the person also avoids situations for fear of these attacks they may have Agoraphobia as well as Panic Disorder.

What is Agoraphobia?

Agoraphobia occurs when the person is anxious about being in places or situations where they might have a panic attack. Hence they either:

- avoid these situations, or
- only go places with a companion, or
- endure these situations despite severe anxiety

Most commonly agoraphobia involves a fear of going into places where it might be difficult or embarrassing to escape quickly if they have a panic attack and need to get away, or places where there would be no quick access to medical help. Click here for a list of situations typically avoided in agoraphobia.

Primary vs secondary: depression occuring independently, or as a manifestation of another psychiatric illness (eg bipolar disorder) or medical problems (eg thyroid illness, infections, anaemia, neurological illness eg. after a stroke, as a side effect of medications for other medical conditions, or secondary to substance use (alcohol, cannabis, cocaine, amphetamines etc).

How common is Panic Disorder and Agoraphobia?

Recent surveys of the general population have found that about 2% of adults have had Panic Disorder or Agoraphobia in the last twelve months. That is approximately one out of every fifty adults. Panic Disorder occurs at the same rate in men and women, whereas Agoraphobia is twice as common in women than it is in men. Studies have also shown that as many as 40% of people have had spontaneous panic attack at some stage in their life, but have not gone on to develop Panic Disorder or Agoraphobia.
Treatments for Panic Disorder And Agoraphobia

Two kinds treatment have been proven to help people overcome Panic Disorder and Agoraphobia. One is Cognitive Behaviour Therapy (also called "CBT"), and the other is medication using either Tricyclic or Serotonin Reuptake Inhibitor Antidepressant drugs.

Choosing treatments that work: CBT or medication?

The majority of people show a positive response to CBT or medication, so choosing the best treatment for you may depend on other factors such as the financial and emotional costs of treatment, the side effects, and the availability of treatments in your local area. Most medications have some side effects although these vary depending on which medication you take, and from person to person.

What are my chances of getting better?

For every three people treated with CBT, one will be completely free of panic attacks following treatment (the other two may still be improved, but not completely panic-free). For every six people treated with medication, one will be panic free for as long as they remain on medication (the other 5 may be improved, but not completely panic free). Hence, you have a greater chance of mastering your panic attacks with CBT than with medication. With CBT the improvement continues after treatment is over, simply because you have learnt new ways of coping.

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