

inhibitors (SSRIs) are commonly used. A serotonin norepinephrine reuptake inhibitor (SNRI) also has FDA approval for panic disorder. Another commonly used class of medications is benzodiazapines. Medications can be highly effective in the short-term but are not indicated for long-term treatment. All decisions should be discussed with one's doctor.

Healthy living practices can also help people to overcome panic disorder. Aerobic exercise, a proper and balanced diet and decreased use of caffeine and alcohol are all very important in decreasing symptoms. For many people, learning how to reduce stress through meditation and mindfulness are also very useful.

Peer support is a vital part of overcoming panic disorder. Family and friends can play a critical role in the treatment process and should be informed of the treatment plan and of the ways that they can be most helpful.

Recovery

Recovery does not mean that the illness has gone into complete remission. Over time, and after what for many can be a long and difficult process, individuals can come to terms with their illness by first learning to accept it and then moving beyond it.

This includes learning coping mechanisms, believing in themselves as individuals by learning their strengths as well as their limitations, and coming to realize that they do have the capacity to find purpose and enjoyment in their lives in spite of their illness. **RECOVERY IS POSSIBLE!**

How to Get Help

No insurance? Call the NAMI Southern Arizona office to help guide you to access mental health services.

If you have panic disorder:

- ◆ Seek medical care through a psychiatrist and/or your primary care physician.
- ◆ Find the right combination of treatment that works for you which may include medication, therapy, support groups, etc. **Sometimes people must try several different treatments or combinations of treatment before they find the one that works for them.*
- ◆ Take NAMI's Peer-to-Peer course and/or join the NAMI Connection support group.
- ◆ LEARN about your illness. The more you know, the more you are able to help yourself. Start with NAMI today!

If you are a family member with a loved one who has mental illness:

- ◆ Take care of yourself.
- ◆ Take NAMI's Family-to-Family course, join a Family & Friends Support Group and/or take NAMI Basics if you have a loved one who is a child or adolescent.
- ◆ Family, friends and partners of military service members and veterans can take NAMI's Homefront course.
- ◆ Learn about your loved one's illness.



PANIC DISORDER

**SHOW YOU CARE.
WEAR A SILVER RIBBON.**



- Help break down the barriers to treatment and support.
- Help reduce stigma —talk about it!



**FIND HELP.
FIND HOPE.**

Mental illness affects 1 in 5 people. We provide resources and support to all those affected by mental illness.



White Mountains

Program affiliate of NAMI Payson

Find Help. Find Hope.

Crisis Text Line – Text "NAMI" to 741-741

Crisis call lines:

Northern Arizona Crisis Line: 877-756-4090

Veterans Crisis Line: 1-800-273-8255, Press 1

For local classes and support call 928-298-1914

Visit us online at www.namiwmaz.org

Email: NAMIWhiteMountains@gmail.com

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What is panic disorder?

Panic disorder is characterized by recurrent panic attacks—an uncontrollable and terrifying response to ordinary, nonthreatening situations. There is also persistent anxiety or fear about the panic attacks and changes in behavior in an attempt to avoid further attacks.

The symptoms of a panic attack include some combination of the following:

sweating, hot or cold flashes, choking or smothering sensations, racing heart, labored breathing, trembling, chest pains, faintness, numbness, nausea or disorientation. Some experiencing an attack may feel like they are dying, losing control or losing their mind. Panic attacks typically last about five to 10 minutes but can be shorter or as long as an hour. During the attack, the physical and emotional symptoms increase quickly in a wave-like fashion and then slowly subside. A person may feel anxious and jittery for many hours after experiencing an attack.

Sometimes, panic attacks are mistaken for heart attacks or respiratory problems, as symptoms can be similar. Therefore, prior to the diagnosis of panic disorder, a thorough physical evaluation should be performed to ensure that no underlying medical condition is the cause.

What are some problems that people with panic disorder experience?

Many people with panic disorder "fear the fear," or worry about when the next attack is coming. In some people, this fear can

lead to agoraphobia, an intense fear of feeling trapped in a public place. People with panic disorder may avoid the places or things that they think trigger their panic attacks, which can cause significant occupational and social problems.

Like people with other anxiety disorders, those with panic disorder are at increased risk of developing other mental illnesses. Half of the people with panic disorder may eventually be diagnosed with major depressive disorder. Alcohol and drug abuse can also be a serious problem, both as a trigger for panic attacks and as a type of self-medication that can quickly get out of control. Panic disorder, particularly left untreated, can raise the risk of suicidal thoughts or acts.

Even people without the added difficulties of depression and substance abuse may feel very scared and ashamed of their panic attacks. The associated secretiveness and feelings of shame or low self-esteem that occur with this illness can cause some people to isolate themselves from their friends and family. Other people are unwilling to go anywhere or do anything outside their homes without the help of others they trust. This can be very concerning or confusing for loved ones who are trying to help. Therefore, it is recommended that friends and family of people with panic attacks encourage their loved ones to seek treatment for their illness.

What causes panic disorder?

Panic attacks occur frequently, and

approximately one in 20 Americans will be diagnosed and treated for panic disorder each year. Females are twice as likely to be affected than males. Chemical or hormonal imbalances, drugs or alcohol, poor sleep and other situations can cause panic attacks. People who experience high levels of stress in their lives and those with severe medical illnesses are also at increased risk of developing panic disorder.

Although scientists have not isolated a single gene in studying panic attacks, it is generally thought that there is a genetic component to panic disorder. Scientific studies have suggested that there is inappropriate activation of a region of the brain called the amygdala.

Is panic disorder treatable?

Panic disorder is generally very responsive to treatment. People who are able to remain in treatment can expect to have less severe and less frequent panic attacks as well as anxiety in between these events. Complete recovery is a reasonable goal for many people, although a significant percentage of individuals will experience further episodes later in life. This suggests that ongoing treatment may be indicated in certain situations.

Recovery from panic disorder can be achieved either by taking medications or by a form of cognitive behavioral therapy (CBT) that is specific for panic disorder. Studies suggest that medication and CBT are about equally effective, and the decision about which treatment to choose depends largely on the preference of the

individual seeking treatment. There is also evidence that the combination of CBT and medication may offer some benefits over either one alone. Some medication treatments probably work a bit faster but are likely to have more adverse side effects than CBT. Also, when successful treatment is finished, people who have had CBT tend to remain without symptoms longer than people who have taken medications only.

CBT involves exploring the connection between thoughts, feelings and behaviors. People will learn to understand the links between their bodily sensations and their emotions and how their subjective fears can increase the symptoms of panic attacks. For some people, understanding the brain's connection between fear and the physical symptoms of a panic attack can be extraordinarily helpful in decreasing symptoms. For other people, exposure therapy is useful in learning how to experience the symptoms of a panic attack without "losing control." By simulating the symptoms of a panic attack in a controlled environment, some people can learn to control their fear of future panic attacks and decrease the severity of their symptoms. Family members and friends can help a great deal in this process when they are supportive and encouraging.

Medications are most effective when they are used as part of an overall treatment plan that includes supportive therapy. Antidepressants and anti-anxiety medications are the most frequently used medications for this disorder. Medications called selective serotonin reuptake