



Panic Disorder: **When Fear Overwhelms**

Do you sometimes have sudden attacks of fear that last for several minutes?

Do you feel like you are having a heart attack or can't breathe? Do these attacks occur at unpredictable times causing you to worry about the possibility of having another one at any time?

If so, you may have a type of anxiety disorder called panic disorder.

Panic Disorder

What is panic disorder?

People with panic disorder have sudden and repeated attacks of fear that last for several minutes or longer. These are called **panic attacks**. Panic attacks are marked by a fear of disaster or of losing control even when there is no real danger. A person may have a strong physical reaction during a panic attack. It may feel like having a heart attack. Panic attacks can occur at any time, and many people with panic disorder worry about and dread the possibility of having another attack.

A person with panic disorder may become discouraged and feel ashamed because he or she cannot carry out normal routines like going to the grocery store or driving. Having panic disorder can also interfere with school or work.

Panic disorder often begins in the late teens or early adulthood. More women than men have panic disorder. But not everyone who experiences panic attacks will develop panic disorder.

What are the signs and symptoms of panic disorder?

People with panic disorder may have:

- Sudden and repeated attacks of fear
- A feeling of being out of control during a panic attack
- An intense worry about when the next attack will happen
- A fear or avoidance of places where panic attacks have occurred in the past
- Physical symptoms during an attack, such as a pounding or racing heart, sweating, breathing problems, weakness or dizziness, feeling hot or a cold chill, tingly or numb hands, chest pain, or stomach pain.

What causes panic disorder?

Panic disorder sometimes runs in families, but no one knows for sure why some people have it, while others don't. Researchers have found that several parts of the brain are involved in fear and anxiety. Some researchers think that people with panic disorder misinterpret harmless bodily sensations as threats. By learning more about fear and anxiety in the brain, scientists may be able to create better treatments. Researchers are also looking for ways in which stress and environmental factors may play a role.

How is panic disorder treated?

First, talk to your doctor about your symptoms. Your doctor should do an exam to make sure that an unrelated physical problem isn't causing the symptoms. The doctor may refer you to a mental health specialist.

Panic disorder is generally treated with psychotherapy, medication, or both.

Psychotherapy. A type of psychotherapy called cognitive behavioral therapy (CBT) is especially useful for treating panic disorder. It teaches a person different ways of thinking, behaving, and reacting to situations that help him or her feel less anxious and fearful.

Medication. Doctors also may prescribe medication to help treat panic disorder. The most commonly prescribed medications for panic disorder are anti-anxiety medications and antidepressants. Anti-anxiety medications are powerful and there are different types. Many types begin working right away, but they generally should not be taken for long periods.

Antidepressants are used to treat depression, but they also are helpful for panic disorder. They may take several weeks to start working. Some of these medications may cause side effects such as headache, nausea, or difficulty sleeping. These side effects are usually not severe for most people, especially if the dose starts off low and is increased slowly over time. **Talk to your doctor about any side effects you may have.**

It's important to know that although antidepressants can be safe and effective for many people, they may be risky for some, especially children, teens, and young adults. A “black box”—the most serious type of warning that a prescription drug can have—has been added to the labels of antidepressant medications. These labels warn people that antidepressants may cause some people to have suicidal thoughts or make suicide attempts. Anyone taking antidepressants should be monitored closely, especially when they first start treatment with medications.

Another type of medication called beta-blockers can help control some of the physical symptoms of panic disorder such as excessive sweating, a pounding heart, or dizziness. Although beta blockers are not commonly prescribed, they may be helpful in certain situations that bring on a panic attack.

Some people do better with CBT, while others do better with medication. Still others do best with a combination of the two. Talk with your doctor about the best treatment for you.



What is it like to have panic disorder?

“One day, without any warning or reason, I felt terrified. I was so afraid, I thought I was going to die. My heart was pounding and my head was spinning. I would get these feelings every couple of weeks. I thought I was losing my mind.”

“The more attacks I had, the more afraid I got. I was always living in fear. I didn’t know when I might have another attack. I became so afraid that I didn’t want to leave my house.”

“My friend saw how afraid I was and told me to call my doctor for help. My doctor told me I was physically healthy but that I have panic disorder. My doctor gave me medicine that helps me feel less afraid. I’ve also been working with a counselor learning ways to cope with my fear. I had to work hard, but after a few months of medicine and therapy, I’m starting to feel like myself again.”

Where can I find more information?

To learn more about panic disorder, visit:

MedlinePlus (National Library of Medicine):

<http://medlineplus.gov>

(En Español: <http://medlineplus.gov/spanish>)

For information on clinical trials, visit:

ClinicalTrials.gov: <http://www.clinicaltrials.gov>

For more information on conditions that affect mental health, resources, and research, go to **MentalHealth.gov** at <http://www.mentalhealth.gov>, the **NIMH website** at <http://www.nimh.nih.gov>, or contact us at:

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