ANXIETY AND PANIC HANDOUT

(See below for information on anxiety in general, with or without panic attacks)

A panic attack (or “anxiety attack”) is a sudden surge of intense fear or discomfort which may be unexpected (out of the blue), often with a sense of danger, which may be more common in a crowded place (or when feeling trapped, stressed or unable to escape), often 5 – 20 minutes, in discrete episodes, associated with some of the following:

1. Palpitations, pounding heart, or accelerated heart rate.
2. Sweating.
3. Trembling or shaking.
4. Sensations of shortness of breath or smothering. [or not getting enough air]
5. Feeling of choking.
7. Nausea or abdominal distress.
8. Feeling dizzy, unsteady, lightheaded or faint.
9. Chills or heat sensations.
10. Numbness or tingling.
11. Derealization (feelings of unreality) or depersonalization (being detached from oneself). [Do you feel out of your body, strange or unreal?]
12. Fear of losing control or “going crazy.”
13. Fear of dying. (These 13 items are from the DSM-V; Also common are feeling of being in danger or the need to get to a safe place, fear of fainting, fear of causing an embarrassing scene, and others).

It is actually the fear of panic attacks, and attempts to control, avoid, or escape them, which keep them going. If you react as if the attacks are dangerous, they get worse. They trick you into feeling that you are in danger when you are not. When you continue going about your business, without giving in to them, they lose their power. If you are anticipating problems or planning your escape, your anxiety level increases.

You can tell yourself: “I will accept this anxiety and do what I need to do.” ”It is okay to be anxious,” “It is OK not to feel in control.” ”It’s just what-ifing!” “It will pass, just accept.” “This is uncomfortable but Discomfort is not Danger.” “It is an adrenalin surge.”

If you want you can practice trying to make anxiety symptoms worse on purpose (which is not possible) as a way of learning to do the opposite of fighting, controlling or escaping.

ANXIETY WITH OR WITHOUT PANIC ATTACKS:

If you avoid places or situations because of anxiety, you do not need to figure out how to feel less anxious! It is only when you give up these efforts that you begin to recover! You simply need to practice going places (or putting yourself in situations) that you typically avoid due to anxiety. So “Bring your anxiety with you” while resuming activities, and symptoms will improve and resolve on their own. During anxiety you may (if you want) simply notice your surroundings, feel your feet on the ground, and remain more in the present than in the future, or you may simply just go about your business. You can practice shopping when you don’t need to buy anything, or walking to your mailbox, or whatever is New for you.

You will not feel ready. This is fine. This is a “Leap of Faith” which takes courage at first. You will notice rapid improvement when you practice several times a week or more. Write down your own goals and new activities, and review these regularly with your therapist, provider, or counselor.

Anxiety cannot be vanquished with effort. Anything done to suppress, fight, distract, analyze, get rid of, keep at bay, or avoid these feelings will ultimately fall short. Techniques to relax and calm oneself can increase anxiety if the goal is to turn off the anxious feelings. Attempts to banish anxious thoughts tend to bring them back stronger. Relying on distractions can worsen anxiety in the long run.

Most people experience sudden worrisome thoughts and physical symptoms seemingly out of nowhere. This is a normal function of the amygdala, the part of the brain that looks for danger and it acts quickly. Most of these
thoughts and symptoms are false alarms. People without an anxiety disorder simply notice them, recognize them as unhelpful, and let them go. But people with anxiety may have developed a habit of trying to resist, escape, avoid or control the thoughts and symptoms, causing new symptoms (like an increased heart rate) which the amygdala then interprets as more evidence of danger, a vicious cycle. Learning to accept means you no longer need to give symptoms your attention, and feel better naturally. Practice over time will “re-train” this part of the brain.

‘Acceptance’ does not mean tolerating symptoms, but becoming free of the problems they used to cause. With practice you can learn to be aware of anxious thoughts and feelings (without giving them too much attention) as if from an outside observer's perspective, with curiosity, non-judgmentally, with kindness to yourself, and with the knowledge that thoughts and feelings are not necessarily “true” or helpful, and that they come and go.

Even after you improve, sudden anxious thoughts, symptoms or attacks, may occur, but will be infrequent, brief, and disappear naturally on their own, just as a car stops when you take your foot off the gas. They will no longer be a problem. Do not be concerned if you suddenly feel symptoms as strong as ever; this does not mean there is a problem. Just remember not to pay too much attention to unhelpful thoughts and symptoms.

Medications are very important for some mental health disorders, but are typically not needed for anxiety. High quality therapy is the treatment. Along with practicing new skills, it is extremely effective. Some non-addicting medications may help anxiety somewhat but are usually optional. Especially for people with a history of substance use disorder, or people on opioid medicines, benzodiazepines (clonazepam, alprazolam, diazepam etc.) are not recommended. They can be hard to come off and stopping quickly can be dangerous. Taking benzodiazepines “PRN” (“AS NEEDED,” when you are anxious) tends to perpetuate anxiety because it a form of escaping and avoiding. If you cannot stop these medications, in order to improve you will need to learn to take them BY-THE-CLOCK (WHEN IT’S TIME), Not when you are anxious.

The purpose of mindfulness exercises is not to become relaxed or to get rid of anxiety, but to learn to observe thoughts and sensations in a new way, with acceptance, curiosity, and kindness to oneself. Problems and stress are usually not as much of a problem as our reactions to them.

RESOURCES based on reliable, evidence-based strategies. The key to recovery is to regularly practice the recommended exercises over time. Individual therapy (psychotherapy) is also important. See YouTube videos of the below authors listed in bold. Beware: some books and sources online may not provide the best advice.

- [https://mindfulwaythroughanxiety.com](https://mindfulwaythroughanxiety.com) Produced by two psychologists, leaders in anxiety research, Lizabeth Roemer, Ph.D. and Susan Orsillo, Ph.D. includes free audio files & other references.
- [https://stevenhayes.com/](https://stevenhayes.com/) Steven C. Hayes, Ph.D. founded ACT, Acceptance & Commitment Therapy, Includes important resources. Dr. Hayes has many useful talks on YouTube.
- The Mindfulness & Acceptance Workbook for Anxiety’ by John Forsyth PhD and Georg Eifert PhD, New Harbinger Publications. Worksheets and audio exercises are free to all: [www.newharbinger.com/33346](http://www.newharbinger.com/33346). This book was validated in a published randomized trial.
- ‘CBT for Anxiety’ by Kimberly J. Morrow & Elizabeth DuPont Spencer: (An easy-to-read training manual for therapists for Fear, Panic, Worry & OCD; also very useful for patients). $18 new. The authors operate [www.anxietytraining.com](http://www.anxietytraining.com) for therapists, which may also be helpful for patients.
- The Worry Trick’ by David Carbonell “The best book on worry” per Sally Winston PsyD; For people who unsuccessfully try to control worrying about things they should not be worrying about.
- One of David Carbonell’s YouTube videos is on ‘belly breathing’ which may be practiced while not having anxiety, at least initially. (FYI it is not necessary to breathe a certain way during anxiety).
- ‘What Every Therapist Needs to Know About Anxiety Disorders’ by Martin N. Seif PhD and Sally Winston PsyD. More technical, may be useful for patients. ($31; as low as $10 as e-book)
- Conquering Post-Traumatic Stress Disorder by Beckner & Arden. ($23 or $10 as e-book).
- The Anxiety & Depression Association of America: [www.adaa.org](http://www.adaa.org)