Panic Attacks Treatment

Self-Care at Home

Taking care of panic attacks at home is possible, but be careful not to mistake another serious illness (such as a heart attack) for a panic attack. In fact, this is the dilemma that doctors face when people experiencing panic are brought to a hospital's emergency department or the clinic.

- If a person has been diagnosed with panic attacks in the past and is familiar with the signs and symptoms, the following techniques may help the person stop the attack. You may also try this for yourself if you are experiencing the symptoms of a panic attack.
  - First, relax your shoulders and become conscious of any tension that you may be feeling in your muscles.
  - Then, with gentle reassurance, progressively tense and relax all the large muscle groups. Tighten your left leg with a deep breath in, for example, hold it, then release the leg muscles and the breath. Move on to the other leg. Move up the body, one muscle group at a time.
  - Slow down your breathing. This may best be done blowing out every breath through pursed lips as if blowing out a candle. Also, place your hands on your stomach to feel the rapidity of your breathing. This may allow you to further control your symptoms.
  - Tell yourself (or someone else if you are trying this technique with someone) that you are not "going crazy." If you are concerned about not being able to breathe, remember that if you are able to talk, you are able to breathe.

- If a person is diagnosed with any medical illness, especially heart disease, home treatment is not appropriate. Even if the person has a history of panic attacks, home care is not appropriate if there is any new or worrisome symptom.
Medical Treatment

Generally, panic attacks are treated with reassurance and relaxation techniques. By definition, panic attacks last less than an hour, so many times a person already feels much better by the time he or she makes it to the doctor's office. Nevertheless, because the diagnosis is made by excluding more dangerous causes, people may be given medications during their attack.

Often doctors prescribe lorazepam (Ativan) under the tongue to treat an acute attack.

- If the doctor is suspicious of a cardiac (heart) cause, then the person may be given aspirin and various blood pressure medicines. An IV line may be started and fluids given. Some doctors will prescribe various antianxiety medicines such as diazepam (Valium) or lorazepam (Ativan) during the evaluation.
- Once the diagnosis of panic attack is made, however, the person may be surprised that no medicines are prescribed. Before medications are started, the person requires further evaluation by a mental health professional to check for the presence of other disorders. These may include anxiety disorders, depression, or panic disorder (a different diagnosis than panic attack).
- If medications are prescribed, several options are available. Selective serotonin reuptake inhibitors (SSRIs) such as sertraline (Zoloft), fluoxetine (Prozac), paroxetine (Paxil), and fluvoxamine (Luvox) are often the first choice. Clinical trials have shown SSRIs reduce the frequency of panic attack up to 75-85%. SSRIs must be taken 3-6 weeks before they are effective in reducing panic attacks and are taken once daily.
- Other choices of drug treatment include benzodiazepines such as alprazolam (Xanax), clonazepam (Klonopin), lorazepam (Ativan), or diazepam (Valium). They effectively decrease panic attacks by up to 70-75% almost immediately; however, they must be up to 4 times per day. Additional drawbacks include sedation, memory loss, and after several weeks, tolerance to their effects and withdrawal symptoms may occur.
- Tricyclic antidepressants such as imipramine (Tofranil) and MAO inhibitors such as phentolamine (Nardil) have also been used, but many individuals experience side effects that are difficult to tolerate.

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