



Mental Health Association of Tarrant County
3136 West 4th Street
Fort Worth, TX 76107
817-335-5405

Panic Disorder

Panic disorder is characterized by unexpected and repeated episodes of intense fear accompanied by physical symptoms that may include chest pain, heart palpitations, shortness of breath, dizziness, or abdominal distress. These sensations often mimic symptoms of a heart attack or other life-threatening medical conditions. As a result, the diagnosis of panic disorder is frequently not made until extensive and costly medical procedures fail to provide a correct diagnosis or relief.

Many people with panic disorder develop intense anxiety between episodes, worrying when and where the next one will strike. Fortunately, through research supported by the National Institute of Mental Health (NIMH), effective treatments have been developed to help people with panic disorder.

How Common Is Panic Disorder?

- In a given year 1.7% of the U.S. population (2.4 million Americans) experiences panic disorder.
- Women are twice as likely as men to develop panic disorder.
- Panic disorder typically strikes in young adulthood. Roughly half of all people who have panic disorder develop the condition before age 24.

What Causes Panic Disorder?

Heredity, other biological factors, stressful life events, and thinking in a way that exaggerates relatively normal bodily reactions in catastrophic events are all believed to play a role in the onset of panic disorder. Some research suggests panic attacks occur when a "suffocation alarm mechanism" in the brain erroneously fires, falsely reporting that death is imminent. The exact cause or causes of panic disorder are unknown and are the subject of intense scientific investigation.

What Treatments Are Available for Panic Disorder?

Treatment for panic disorder includes medications and a type of psychotherapy known as cognitive-behavioral therapy, which teaches people how to view panic attacks differently and demonstrates ways to reduce anxiety. NIMH is conducting a large-scale study to evaluate the effectiveness of combining these treatments. Appropriate treatment by an experienced professional can reduce or prevent panic attacks in 70% to 90% of people with panic disorder. Most patients show significant progress after a few weeks of therapy. Relapses may occur, but they can often be effectively treated just like the initial episode.

Can People with Panic Disorder Also Have Other Physical and Emotional Illnesses?

Research shows that panic disorder can coexist with other disorders, most often depression and substance abuse. About 30% of people with panic disorder use alcohol and 17% use drugs, such as cocaine and marijuana, in unsuccessful attempts to alleviate the anguish and distress caused by their condition. Appropriate diagnosis and treatment of other disorders such as substance abuse or depression are important to successfully treat of panic disorder. Approximately 20% of people with panic disorder attempt suicide.

It is not unusual for a person with panic disorder to develop phobias about places or situations where panic attacks have occurred, such as in supermarkets or other everyday situations. As the frequency of panic attacks increases, the person often begins to avoid situations where they fear another attack may occur or where help would not be immediately available. This avoidance may eventually develop into agoraphobia, an inability to go beyond known and safe surroundings because of intense fear and anxiety.

People with panic disorder may also have irritable bowel syndrome, characterized by intermittent bouts of gastrointestinal cramps and diarrhea or constipation, or a relatively minor heart problem called mitral valve prolapse. In fact, panic disorder often coexists with unexplained medical problems such as chest pain not associated with a heart attack or chronic fatigue.

The content of this fact sheet was adapted from material published by the National Institute of Mental Health.

For additional resources, please call 1-800-969-NMHA.