



TYPES OF ANXIETY:  
PANIC

# Panic

Anxiety can come on very quickly; sometimes in response to a specific cause, but other times for no identifiable reason at all. For people who have high anxiety to begin with, this can feel like their anxiety is “bubbling over” or quickly rising to an “anxiety peak”. These periods of intense anxiety—which are very unpleasant and frightening—are called panic attacks. Panic attacks are not uncommon, but when they reoccur they can cause a great deal of distress and begin to affect our lives in very negative ways. In this chapter, we discuss what panic attacks are and how to deal with them. Although panic attacks can be a very unpleasant, and often terrifying experiences, they actually tend to be very responsive to treatment. With consistent practice, the tools outlined in this chapter can be used to effectively reduce the frequency and severity of panic attacks.

## Danielle’s Story

Danielle is a third year student in Film and Media studies. Danielle has always been an anxious person, but she felt that she had it under control. Recently, however, Danielle has started experiencing regular panic attacks. The first panic attack happened when Danielle was in a lecture; it was terrifying. She started to feel her heart beat fast and hard in her chest, her palms began to sweat, she started shaking, and she became afraid that she would faint or vomit. Danielle’s anxiety became so severe so quickly that she thought she was having a heart attack or maybe going crazy. Although the panic attack only lasted about 10 minutes, it was a very traumatic experience for her, and she remained more anxious than usual the rest of the day. Since the first attack, Danielle has started having panic attacks on an increasingly regular basis; they are now happening about 3 times a week. At first they would only happen in lecture, but they have started happening at other times, too. Danielle is quickly becoming preoccupied with worries about when and where the next panic attack will happen.

## *What is a Panic Attack?*

We have already discussed the physiological reactions that happen in the body as a result of the fight-or-flight response getting turned on by stress (page 4). Anxiety is when the fight-or-flight response stays activated over a long period of time; it is **chronic**. A panic attack is also an activation of the fight-or-flight response, but it tends to be **acute** (usually 5-10 minutes) and **severe**. In other words, if you think of anxiety as someone placing enough pressure on the gas pedal of stress to keep you at a leisurely pace down the highway, a panic attack would be someone stomping down on the gas pedal in a street race.

A panic attack is a **sudden** onset of **high anxiety**. It can be very unpleasant, uncomfortable, and frightening; it is not uncommon for someone's first panic attack to be viewed as a traumatic event. Although very unpleasant, panic attacks are actually very common. It has been estimated that 1 in 3 people will experience a panic attack in a year, so if you have had a panic attack, you are certainly not alone. It's important to remember that panic attacks are simply the body's fight-or-flight response kicked into gear very quickly; they are a **completely natural response** and you **cannot** be hurt or die by one.

## *What do Panic Attacks Look Like?*

Panic attacks involve a number of unpleasant symptoms. According to the most recent version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), a panic attack is a short period of fear or discomfort that peaks within a 10-minute window. At least four (but possibly more) of the symptoms listed in a table on the next page are present in a panic attack. Note that these symptoms have been separated into physiological symptoms (body reactions), and cognitive symptoms (thoughts).

Use the table on the next page to start understanding **your** panic attacks better. Place a checkmark in the box beside each symptom that **you have experienced**. Next to that, **rate** how bad the symptom is for you, or how anxious each symptom makes you on a scale of **0** (*not at all upsetting/anxious*) to **10** (*most upsetting/anxious possible*). Note that this table is also available in Appendix B (Worksheet 4.1 What Do My Panic Attacks Look Like?). The first step to treating panic attacks is to understand what they look like for you, since panic attacks can look different in different people. But more on this later...

**WORKSHEET 4.1 What Do My Panic Attacks Look Like?**

		<b>Have I experienced this?</b>	<b>How anxious did it make me (0-10)?</b>
<b>Body Reactions:</b>	1. Palpitations, pounding heart, or accelerated heart rate		
	2. Sweating		
	3. Trembling or shaking		
	4. Sensations of shortness of breath or smothering		
	5. Feeling of choking		
	6. Chest pain or discomfort		
	7. Nausea or abdominal distress		
	8. Feeling dizzy, unsteady, lightheaded, or faint		
	9. Numbness or tingling sensations (paresthesias)		
	10. Chills or hot flushes		
<b>Thoughts:</b>	11. Feelings of unreality (derealization) or being detached from oneself (depersonalization)		
	12. Fear of losing control or going crazy		
	13. Fear of dying		

## *What's the Difference Between a Panic Attack and Panic Disorder?*

You should be aware that panic attacks and panic disorder are not the same thing. Panic attacks are a relatively common body reaction that a large portion of people will experience at least once in their life. Having a panic attack does not mean that you have panic disorder. A diagnosis of panic disorder is given by a health care professional (e.g., clinical psychologist, psychiatrist) if you have **frequent panic attacks**, if these attacks seem to be **unrelated** to any one specific situation, if you are experiencing a great deal of **worry** about having another panic attack, or if you or people in your life have noticed a **change in your behaviour**, usually in order to avoid having future panic attacks (e.g., avoiding places where panic attacks have occurred in the past). For example, if you have a panic attack every time you are faced with a clown, this would be considered a phobia, *not* a panic disorder, because there is a specific trigger for the panic (the clown). Or if you sometimes have panic attacks, but your daily functioning is not affected because you don't worry too much about having another attack, this would also *not* warrant a medical diagnosis of panic disorder. Instead, this is just an unpleasant part of being a human being. If the above description of panic disorder sounds like you, you may want to **make an appointment with a health care professional** such as a doctor or psychologist, as they are the only ones who are able to provide a diagnosis of panic disorder.

## *What is Agoraphobia?*

Agoraphobia is the **fear** and **avoidance** of places or situations where one feels they **would not be able to escape easily** in the event of a panic attack. Agoraphobia often—but not always—develops as a result of panic attacks. That means that not everyone who experiences panic attacks will go on to develop agoraphobia, and not everyone with agoraphobia experiences panic attacks. Examples of situations that people with agoraphobia typically try to avoid include:

- Being alone (without someone they consider safe, who could help in the event of a panic attack)
- Being in a new or unfamiliar environment (e.g., leaving the house; visiting a new city)
- Crowded or noisy (public) spaces (e.g., shopping mall, concert hall)
- Driving (either as a passenger, as a driver, or both)

Panic attacks are very unpleasant; nobody *wants* to have one. People often believe that the best way to stop panic attacks from happening is to avoid whatever might have brought on the panic attack in the first place. People who experience regular panic attacks will often avoid **situations** where an attack has happened (e.g., standing in a crowded room), **places** where an attack has happened (e.g., the library), or **activities** that they were doing when an attack has happened (e.g., running, exercise). Really, agoraphobia is meant to be a coping strategy (e.g., “I don't want another panic attack, so I will avoid anything I think is likely to make me have another one”). Unfortunately, like other strategies discussed in previous chapters, this is an example of an unhealthy coping strategy; one that actually makes matters worse in the long-term. Read on as we discuss what's going on when a panic attack is happening,

and how you can use this information to work towards the goal of reducing—and ultimately eliminating—panic attacks from your life.

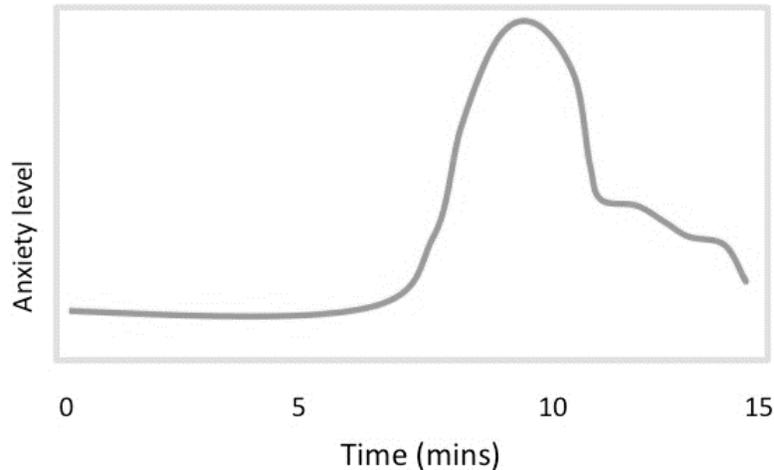
## *What's Happening When I Have a Panic Attack?*

Imagine for a moment that you were about to skydive out of a plane. Picture yourself in as much detail as you can. What would you be feeling? You would likely feel your heart pounding hard against your chest, you might feel shaky or like your legs are made of rubber, you may have sweaty palms, feel unable to catch your breath as your thoughts race. Your mouth might feel dry, you might fear that you will throw up, or you might feel like you're watching yourself from outside of your body because there's no way you're about to jump out of an actual plan oh my gosh! But now imagine at the moment right before you jumped from the plane—when all of those feelings are at their very peak—you were instantly transported into an exam room, or a restaurant, or your bedroom. How would you feel then?

A panic attack is just the body's normal response to fear, but it happens **out of context**. Experiencing those feelings before jumping out of a plane may be exhilarating and an exciting part of the skydiving experience—in fact many people choose to skydive *in order to* experience those intense feelings—but facing those feelings with no easily identifiable cause can be just plain terrifying.

In order to understand panic, there are a few things that you need to understand about anxiety and the body. First, be sure to read the section of this workbook about Anxiety in the Body (page 4). As we know, anxiety is a physiological reaction in the body, typically in response to a stressor, like a threat to our safety. It was **adaptive** for our ancestors to feel anxious because it acted as a security system to help keep them from getting killed in the face of danger. Think about it: if you were faced with real, imminent danger, like an angry bear rushing at you, you need to have an instantaneous reaction in response to that threat in order to keep you safe. That is, your body really needs to “step on it!” in order to keep you out of danger. Our body “steps on it” by releasing a big dose of adrenaline, which triggers the fight-or-flight response and all of the physiological symptoms that come along with it in. This is the fuel your body needs to help you escape the threat. But sometimes that security system is set off by a false alarm, and our stress peaks with no real threat present. This is when a panic attack happens.

It is important to understand how panic attacks work in order to take some of the fear out of them, as fear about having future panic attacks is one of the core features of panic disorder. Take a look at the graph below:



This graph depicts the course of a panic attack over approximately 15 minutes (some are shorter, some are longer, but none last for very long). Anxiety levels start out relatively low but they peak very rapidly. After anxiety peaks, it may take some time for anxiety to come all the way back to the pre-attack levels; sometimes even hours. But pay special attention to the *peak*. This is when anxiety is at its absolute worst. Now, how long does the *peak* last? What's very important message here is that if you understand how anxiety works in the body, then you know acute panic is **only sustainable for 5-10 minutes, maximum**. Certainly some of the symptoms of panic may take a while to fully subside (we know that general anxiety can last for a very long time), but **acute panic** is simply **not sustainable in our body for longer than a few minutes**. One of the reasons why panic attacks are so scary is because we *forget* that panic is not sustainable. We think (irrationally), that the curve of that graph will never stop rising once it has started and it will continue to go up and up and up until we die or go crazy. This is neither true nor is it even possible.

So what sets people who experience reoccurring panic attacks apart from those who do not? Well, research has shown us that there is **some genetic component** (e.g., twin and family studies have shown a strong heritable component to panic attacks). **Environment** has also been shown to impact the likelihood of an individual experiencing panic attacks (e.g., panic attacks often follow a recent stressor, such as the loss of a loved one, or a major change in one's life, like moving away from home for the first time). But one of the most important differences between people who do and those who do not experience regular panic attacks is that people who do experience reoccurring panic attacks tend to be much more **introspective** about their bodily reactions. In other words, these people tend to be very in-tuned with even small changes that go on inside of their body. So when the sympathetic nervous system is activated and their body starts to experience some normal responses to stress (e.g., increased heart rate), these people tend to interpret these normal and healthy changes as a catastrophic sign of something horrible (e.g., a heart attack). These **thoughts** and **interpretations** of normal responses lead to increased anxiety, which in turn leads to a stronger physiological reaction, and this feedback loop can easily cause anxiety to spiral up into a full blown panic attack, sometimes very quickly.

## *Misreading the Signs of Stress*

We have now discussed three very important things about panic attacks: (1) Our body cannot physically sustain acute panic for a very long period of time; (2) panic attacks are the result of the fight-or-flight response getting kicked into high gear when no real threat is present; and (3) high levels of introspection

## Chapter 4 – Panic

cause a normal stress response to be misread as something dangerous or something going wrong (e.g., “I’m dying!”). Below we will look at typical ways that the stress response is misread, and by doing so, begin to understand how this feeds into panic. Be sure to refer to the section anxiety in the body, found in the Introduction (page 4) for an explanation of *why* these reactions are happening, and how they are normal.

At this stage, we are only going to be practicing **recognizing** our reactions or thoughts in response to stress. Managing panic attacks starts by learning to recognize the thoughts behind the panic, because you can’t fight against something if you don’t know it’s there, and oftentimes our anxious thoughts have a special way of creeping below the surface without us knowing it.

**Example:**

Danielle experiences regular panic attacks. She uses this Worksheet to document what reactions she has to stress, whether they are body reactions or thoughts, and how she interprets these experiences.

### WORKSHEET 4.2 My Panic Interpretation

Body reaction or thought?	Feeling in your body:	Your panic interpretation:
Body	I can feel my heart pounding really hard in chest; I get bad chest pains	“I’m having a heart attack!”
Body	I feel very dizzy, lightheaded	“I’m going to pass out right here, and everyone is going to see it and make a big deal about it.”
Body	It feels hard to catch my breath; It’s like there is a heavy weight on my chest	“I’m going to stop breathing and I will suffocate.”
Thought	It feels like I’m watching myself from outside of my body	“I’m going to lose control of myself and just go crazy.”
Thought	I feel like something terrible is happening, or like I am dying	“I think I am going to die.”

Use the example on the previous page to fill out your own Panic Interpretation. Note that you can also find this Worksheet in Appendix B (Worksheet 4.2 My Panic Interpretation).

WORKSHEET 4.2 My Panic Interpretation

Body reaction or thought?	Feeling in your body:	Your panic interpretation:
Body		
Body		
Body		
Thought		
Thought		

## *How do I Deal with My Panic Attacks?*

In this section, we will outline techniques that you can use in order to manage your panic attacks. At this point it is important to do a personal check-in and make sure that you are reading this section with **realistic expectations**. We've already mentioned that panic attacks are a very normal part of being human, and most people will experience at least one attack in their lifetime. So know that if you are having regular panic attacks now, a goal of never having another panic attack may not be realistic. However, if you are willing and able to dedicate **hard work** and **time** to develop a **regular practice** of the evidence-based techniques outlined in this chapter, in combination with regular practice of the Basic Skills, then you can expect a **drastic reduction** in the **frequency** and **severity** of your panic attacks.

# 1. *Becoming a Pro at the Basic Skills*

The very first step to managing panic happens long before a panic attack is even close to happening. This is practicing your Basic Anxiety Management Skills. Like with any of the anxiety issues discussed in this book, it is very important that you practice the Basic Skills first, in order to set the foundation for your work with panic. The likelihood of a panic attack can be increased by heightened anxiety overall, so by keeping your **baseline anxiety levels lower**, it will be **harder** for your gas pedal of stress to hit the floor. Other things to consider include staying away from stimulant drugs, like caffeine, which can induce a panic attack. In rare cases, panic attacks can be a symptom of an ongoing medical condition, such as a thyroid problem. Be sure to **check with your doctor first** to rule out biological causes of panic attacks.

***Example:***

Danielle developed a plan to practice her Basic Skills on a daily basis. She started by making new, healthier eating habits; she made sure she was not skipping meals, and became careful about having three balanced meals a day. Danielle had always gone to the gym on and off, but she started going more regularly, and even arranged to go with a “workout buddy” to keep her motivated and on task. Danielle made realistic goals to practice at least one Basic Skill for 30 minutes each day; usually in the late afternoon when she knew her anxiety tended to be highest.

In the space below, develop a game plan for practicing the Basic Skills. Be sure to keep your plan **realistic**, and include **measurable** and **timely** goals:

*My plan for practicing the Basic Anxiety Management Skills is...*

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## 2. Personalize Your Panic

Above, we spoke about the signs and symptoms of a panic attack. It is important to learn to recognize your own, personal signs of panic, both before and during a panic attack. Be sure to fill out the earlier activities in this chapter to help familiarize yourself with your own flavor of panic, as many of the symptoms often go unnoticed (Worksheet 4.1 What Do My Panic Attacks Look Like? and Worksheet 4.2 My Panic Interpretation, also available in Appendix B). It's important to be able to recognize the individual symptoms of a panic attack so that you have specific behaviours, feelings, and thoughts to target with your panic attack management skills.

### **Example:**

After completing earlier sections of this chapter (“What do my panic attacks look like?” and “Panic Interpretation”), Danielle has a better grip on her anxiety attacks, and what they look like for her.

**Before a panic attack:** Danielle’s panic attacks feel like they come out of nowhere; they do not come with much warning, so this part was tricky for her. After monitoring herself for a few weeks by paying attention to her body’s reactions to stress, she was able to recognize that, right before a panic attack, she will often experience racing thoughts, and her palms will sweat.

**During a panic attack:** While Danielle is having a panic attack she noticed that she tends to focus her attention on her racing heart (in “What do my panic attacks look like?” she rated this as an 10 out of 10 for the amount of anxiety this causes her), and feeling dizzy or lightheaded (she rated this 8 out of 10). She also worries that she is going crazy or that she will lose control (9 out of 10). Other symptoms cause less anxiety for her, like her sweating palms (1 out of 10), and shaking (3 out of 10).

## WORKSHEET 4.3a Managing My Panic Attacks

Use the spaces below to document what your panic attacks look like for you:

What I feel before a panic attack:	What I feel during a panic attack:

### *3. Time to Stop Hiding!*

As we discussed above, one of the core features of panic attacks—and anxiety in general—is the desire to **avoid**. Avoid what might make us anxious. Avoid what might cue a panic attack. Avoid. Avoid. Avoid! But avoidance does nothing more than **maintain** the fear, and **limit** what we can do in our lives (in the case of agoraphobia, avoidance can be very debilitating). It is important to reduce and eventually eliminate avoidance behaviours. Some of these behaviours may be very obvious (e.g., steering clear of situations, places, or activities), but some of these behaviours may be very subtle (e.g., always sitting near an exit, bringing medication with you just in case). Make a plan to reduce and eventually eliminate these avoidance behaviours. Don't forget that you have your Basic Skills to help deal with any anxiety that may come up by facing these situations.

***Example:***

Danielle has stopped attending the class where her first panic attack took place. She also refuses to drive in a car unless her boyfriend—who she feels safe with—is driving.

Danielle makes a plan to start reducing her avoidance, slowly. She starts by going to the lecture hall after hours with a friend. Next, she walks to class during class time and leaves without staying the entire lecture. Finally, she is able to attend the entire class with no panic attacks. She makes a plan for the same gradual process for driving. First, she sits in a stationary car with a trusted friend behind the wheel. Next, she lets her friend drive around but only in a parking lot. Eventually, Danielle gets in the car with a friend to drive to the mall. Danielle practices Deep Breathing, and Grounding techniques while she tries to reduce and eventually stop her avoidance behaviours.

**WORKSHEET 4.3b Managing My Panic Attacks**

In the space below, write out some of the things that you are avoiding, whether they are situations, places, or activities. Don't forget to include some of the more subtle avoidance, or "safety" behaviours. Next to each point write out 3 or 4 steps that you can take to reduce your avoidance behaviour, with the eventual goal of eliminating it all together.

<b>Things I am avoiding because of anxiety:</b>	<b>My plan to reduce my avoidance:</b>

## *4. Facing Your Fears*

By this point in the chapter, you are now well aware that—although very unpleasant—the feelings and sensations that come with a panic attack are not at all dangerous. In fact, they can actually be quite helpful if we need to get away from imminent danger. The symptoms of a panic attack are nothing more than the fight-or-flight response getting ramped up into high gear; they just feel so awful and frightening during a panic attack because they are happening out of context. Remember that if you were about to jump out of a plane, the exact same feelings of panic wouldn't be nearly as frightening. But when panic symptoms (1) happen with no context, (2) happen to someone who is very introspective, *and* (3) are accompanied by catastrophizing thoughts... well this is the perfect recipe for a panic attack.

One of the most important steps towards managing panic attacks is to **reduce how frightening the physical sensations of panic are to you**. If panic attacks weren't so frightening, well, they wouldn't be panic attacks at all, right? Recall that panic attacks are the result of a feedback loop that happens when someone is very sensitive to the physiological responses to stress. These people feel anxiety in their body and as a result they have very frightening and upsetting thoughts about those reactions; thoughts such as "I'm doing to die", "This isn't right", or "I'm going to vomit or faint and everyone will stare at me". Now, if anxiety is natural and we can't get rid of the effect anxiety has on our body, how do we deflate the fear attached to those nasty sensations, or get used to those feelings? The answer is in the form of another natural aspect of our human wiring: something called **habituation**.

Have you ever had the experience of working in an office or library with a big, droning air conditioner? At first the noise is really loud and distracting, but after a time you forget about it. That is, until the air conditioner clicks off and suddenly you realize how quiet it is! This is the process of **habituation**; your nervous system **desensitizes**, or **becomes numb** to a new stimulus after repeated or continuous exposure to it. After a while, the new stimulus (e.g., the drone of the AC) just fades into the background.

## Chapter 4 – Panic

We use this natural principle of habituation to **get used to** the otherwise frightening reactions in our body when we experience stress.

In order to begin desensitizing yourself to an unpleasant feeling, you need to **expose yourself** to that unpleasant feeling. This important step involves inducing a symptom of panic (e.g., pounding heart) in a safe, controlled environment, and using your Basic Skills to keep your anxiety under control so that you can practice coping with the feeling. With enough practice your body becomes desensitized and the sensation that was once very distressing becomes less and less so until it is not frightening at all. Although this may not sound like fun at first, it's important to remind yourself that this step is **necessary** for getting panic attacks under control. Remember, too, that this can—and in fact *should*—be done in small **baby steps**.

Look back at Worksheet 4.1 What Do My Panic Attacks Look Like? and rank your feared panic sensations from the least to the most anxiety provoking. Starting with the sensation that is least anxiety provoking, come up with a plan to induce this feeling. Practice this multiple times until it is no longer frightening (that is, your body has habituated to it). This should take at least a few days. Remember to focus on only one step at a time; don't move onto your next highest step until the step you are on is causing you very little anxiety on multiple occasions. This isn't a race! Below is a list of common anxiety symptoms that cause fear along with ways to artificially and **safely** induce these feelings:

**Pounding heart:** Run on the spot, or run up and down stairs as fast as you can for 30 – 60 seconds

**Dizziness:** Spin around on the spot (standing or in a chair) for 30 – 60 seconds

**Shortness of breath:** Breathe through a straw for 30 – 60 seconds

**Faint/lightheadedness:** Hyperventilate (breathe in and out very rapidly) for 30 – 60 seconds while seated, and stand up very quickly when you're done

**Depersonalization/feelings of unreality:** Stare at your hands for 2 – 3 minutes

### **Example.**

Danielle practiced facing her feared sensations every day. It wasn't always easy, especially in the beginning, but with time she started to get used to some of the sensations that had been very distressing to her previously. She made sure that she built these skills up slowly. For example, when it was time to face her fear of dizziness, she tried just shaking her head for 30 seconds, which brought her anxiety up to a 6 out of 10. She practiced this a few times every day, until eventually it only brought her anxiety up to 2 out of 10. Danielle was sure to practice this step 3 or 4 more times, and each time her anxiety went up to a 2 or 3 out of 10. At this point, she started to practice spinning in a circle for 20 seconds, which brought her anxiety up to 6 out of 10. Her next planned step is to spin for 45 seconds.

## Chapter 4 – Panic

Use the worksheet on the next page to write out your plan for facing your feared body reactions. Make sure to include the following:

- Ranking of feared bodily sensations, in increasing order
- How will you induce each fear?
- When will you practice it each day of the week? For how long?
- Remember to keep note of how much anxiety the sensation causes each time you try to induce it. What happens with repeated practice? (Hint: if you are a human being, then your nervous system will habituate, meaning that it will become easier with time!)

**WORKSHEET 4.4 Facing Your Fears**

List of exposures:

Ranked order	Sensation	Amount of anxiety it causes me
1		
2		
3		

*My plan for exposure:*

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**Exposure 1:**

*The symptom I am inducing is:*

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My anxiety ratings:

Date of practice	Pre-inducing anxiety (out of 10)	Post-inducing anxiety (out of 10)

See Appendix B (Worksheet 4.4 Facing Your Fears) for a full Worksheet on Fear Exposures. Filly this sheet out and keep it somewhere you can look at if often (e.g., in your wallet, under your pillow, on your bathroom mirror).

## 5. *Practice Realistic Thinking*

The previous step (“Facing your Fears”) focuses on working with **behaviours** to help manage—and ultimately reduce—the frequency and severity of panic attacks. The second side to the same coin is our **thinking**. As we’ve discussed, there are many anxious thoughts that exacerbate panic attacks. For example, when Danielle starts to become anxious, she immediately begins to have thoughts, such as “I’m dying”, “I can’t breathe”, “This is so embarrassing! Everyone can tell I’m having a panic attack”, or “I’m going to pass out right here!”

When panic attacks occur—or anxiety in general, for that matter—our otherwise rational thoughts are suddenly over-taken by anxiety. If you’ve read the Thought Record section of this workbook (page 36), then you already have a pretty good understanding of how these anxious Thought Filters can severely alter the way you interpret your surroundings. Panic attacks are usually associated with two specific thought filters: **overestimating probability** (just because something *could* happen doesn't mean it *will* happen), and **catastrophizing** (focusing on the *worst* possible outcome instead of a *likely* outcome). Take Danielle’s thoughts, for example. She overestimates the probability of dying or passing out, while she catastrophizes about how bad it would be if everyone knew she was having a panic attack.

In order to fight panic attacks, you will need to practice fighting these Thought Filters. A very useful tool for this is one that we have already introduced: Thought Records (page 36). In this chapter, we have adapted the Thought Record to help you specifically challenge the panic attack thinking filters overestimating probability and catastrophizing. First, see Danielle’s sample Thought Record, then use the blank Thought Record template (see Appendix B Worksheets 2.5ab) to complete your own.

## Adapted Panic Thought Record

Anxious/Negative Thoughts:	Thinking Errors:	Challenge Yourself:	Balanced/Realistic Alternative Thought:
<p><i>I'm dying</i></p> <p><i>This is so embarrassing! Everyone can tell I'm having a panic attack</i></p>	<p>Overestimating probability</p> <p>Catastrophizing</p>	<p>- How many times have I had this thought during a panic attack? How did it turn out? → Many times! But it turned out fine...</p> <p>- How many times has this actually happened? → Never</p> <p>- Realistically, what is the likelihood this will happen next time I have this thought? → Very low</p> <p>- What's the WORST that could happen? → Everyone in lecture will turn to look at me. I will be so embarrassed I'll just sit there and look dumb</p> <p>- Will it make a difference in my life in a week from now? In a year from now? → A week? Probably! But maybe not in a year</p> <p>- What could I do to cope if this did happen? → I could excuse myself and leave the lecture hall</p> <p>- Have I been embarrassed in the past? How did it turn out? → Yes! Once I slipped on ice on the way to class! I was embarrassed but I just got up and brushed it off. I didn't even hear anyone laugh, and no one stared at me when I walked to class the next day like I feared they would.</p>	<p>If I did have a panic attack in class, it's unlikely anyone would notice. But if they did, I could cope with it.</p>
<p><b>Anxious/Negative Thoughts:</b></p> <p>Write down Anxious/Negative Thoughts</p> <p>Circle your Hot Thought or group of related Hot Thoughts</p>	<p><b>Thinking Errors:</b></p> <p>Overestimating probability – of bad things happening</p> <p>Catastrophizing</p> <p>–focusing on the worst possible outcome</p>	<p><b>Challenge Yourself:</b></p> <p>Ask yourself:</p> <p><b>For overestimating:</b></p> <ul style="list-style-type: none"> <li>- How many times have I had this thought during a panic attack? How did it turn out?</li> <li>- How many times has this actually happened?</li> <li>- Realistically, what is the likelihood this will happen next time I have this thought?</li> </ul> <p><b>For catastrophizing:</b></p> <ul style="list-style-type: none"> <li>- What's the absolute WORST that could happen?</li> <li>- Will it make a difference in my life in a week from now? In a year from now?</li> <li>- What could I do to cope if this did happen?</li> <li>- Have I been embarrassed in the past? How did it turn out?</li> </ul>	<p><b>Balanced/Realistic Alternative Thought:</b></p> <p>Use the information from the previous column to rethink your original hot thought. Repeat this new, healthier thought next time the Hot Thought comes up.</p>

## 6. Coping Statements

Challenging your panic attacks can be really hard work. It isn't easy making yourself sit through physical sensations that are usually terrifying, or challenging thoughts that have been with you for as long as you can remember. One tool that is often helpful getting through the more challenging tasks is the use of coping statements. It's easy to do! Come up with a few simple coping statements—you can even use your balanced, realistic thoughts from Thought Records you've completed. Write the statement(s) down on a cue card, a small piece of paper you can carry with you, or on a note app on your phone. Every time you feel anxiety start to kick up, or you feel overwhelmed, simply look to this coping card and remember that **you can do this**.

Some examples of coping statements are as follows:

Panic can't last forever!  
I have the tools to do this. I can fight my panic.

Use the space provided to write 2 or 3 coping statements of your own:

*My coping statements...*

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## 7. Practice. Practice. Practice!

Develop a plan to practice addressing your anxiety **every single day**. Make sure your plan is **realistic** so that you aren't setting goals impossibly high and getting discouraged when you can't meet them. If you're ever unsure whether your goal is realistic, always err on the side of caution and make it *easier* than you think you should. At worst, you just meet the goal. At best, you surpass the goal by a wide margin and feel *even better* about your progress! Make yourself **accountable** by confiding with someone close to you who can act as your cheerleader. Make **clear, measurable** goals that you can constantly work towards, and **adapt** these goals as needed. Working with panic is a lot of hard work, but the payoff is certainly worth it!

Use the space below to write out your plan for practicing:

*My plan for practicing skills to manage my anxiety...*

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Finally, don't forget to **reward** yourself for your bravery and your strength. Write out some possible rewards below:

*My rewards for facing my anxiety will be...*

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