

# Panic Attack? Here's What To Do

Provided to you by the OBU Counseling Center

**Anxiety is the #1 reason** students seek help from the Counseling Center at OBU and in university counseling centers nation-wide. According to the American College Health Association Fall 2018 National College Health Assessment, 63% of college students in the US felt overwhelming anxiety at some point during the past year, and 23% reported having been diagnosed with or treated for an anxiety disorder during that same period.

What seems to be provoking such anxiety in college students today? There are a number of factors impacting this situation: Academic stress, financial stress, family challenges, excessive social media use rather than face-to-face interpersonal relationship building, separation from former friends and family members and an associated loneliness, intense personal expectations, inadequate sleep, too much caffeine and poor eating habits, concerns about one's personal and vocational future, the global pandemic, and rising violence and political turmoil in the news, just to name a few!

The symptoms associated with a panic attack episode occur as the person's fight or flight (human stress response) system is ignited, triggering a cascade of neurological system reactions. As this occurs, the person's breathing becomes more rapid as they try to "catch their breath", and this condition can evolve into what's been called, *over-breathing* (a precursor to hyperventilation) where the person is breathing out too much carbon dioxide. This then begins to create a reduction of carbon dioxide in the bloodstream, bringing a subsequent reduction of the release of oxygen in the blood, causing the person to feel light-headed, tingly, dizziness, and more frightened as they begin to sense that they can't get enough oxygen.

It is a common notion that a person beginning to panic needs to breathe into a paper bag. However, while headed in the right direction (to conserve carbon dioxide), this is not the best advice after all. We suggest you follow the simple **three steps** proposed by Inna Khazan, PhD of Harvard Medical School:<sup>1</sup>

1. **Hold.** Pause your breathing as you count slowly to 10. (A deep big breath first is not necessary.) Take another small inhalation and exhale as slowly as you can. Then, pause and count to 10 again. Repeat this 5-6 times.
2. **Breathe.** Breathe "low and slow", by turning your attention to breathing from your belly (this is called diaphragmatic breathing), rather than from your chest and shoulders, taking in only a normal size breath, and exhaling as slowly as you can comfortably through your nose or a small opening in your mouth. Continue this low and slow breathing for the next few minutes.
3. **Observe.** Focus on your senses. What can you see? What can you hear? What can you smell? What can you taste? What can you feel with your hands (feel a few items nearby – your pen, paper, pants, drink bottle, etc.) Allow yourself to notice anything else you're feeling without trying to push the discomfort away. Observe your panic symptoms as they subside on their own.

The goal during this exercise is NOT to magically stop the panic episode, but to slowly regain control and help you tolerate whatever symptoms you may be experiencing. If you're too frantically working to stop or interrupt the panic you feel, this will serve to exacerbate the situation, like "throwing gas onto a fire", and feeding the panic instead with your emotionally desperate effort. Remember, it is actually one's fear of the symptoms that ends up fueling an escalation of panic symptoms. It's better to practice the above steps, repeatedly, when you're calm and can think clearly, to prepare yourself to respond to any future panic attacks in a more productive manner. **It may also be helpful as well to begin telling yourself a few important facts: "I'm actually safe right now. This may be uncomfortable, but it can't hurt me. This is just my fight-or-flight system flaring up unnecessarily. It won't likely last very long, and I'll be feeling better soon."**

1. Khazan, Inna. 3 Steps to coping with a Panic Attack, Psychology Today, July 16, 2020.  
(Dr. Khazan is a psychologist and instructor with the Boston Center for Psychology and Biofeedback, Harvard School of Medicine.)

## If Someone is Having a Panic Attack:

Please read carefully all of the information and suggestions below to help someone who seems to be having a panic attack.

Symptoms of a panic attack may include:

- Feeling of dread, intense fear or terror
  - Shortness of breath
  - Sweating, chills, hot flashes
  - Heart Palpitations, pounding heart
  - Fear of “going crazy” or dying
  - Feeling of choking
  - Stomach discomfort, nausea
  - Dizziness or shaking
  - A “tight chest”, or chest heaviness
  - Numbness or tingly feelings in fingers, hands, or feet
  - Chest pain (w/no left arm numbness)
- Stay Calm Yourself.** Remaining calm and reassuring is essential. Don't tell them to “Calm down!”
- Maintain a non-judgmental (& non-irritated) tone.** Next to the fear of having a panic attack, the student's second biggest fear is being judged negatively by someone that doesn't understand the problem. Just hearing you say “it's okay” can be reassuring.
- Help them slow their breathing.** Patiently assist them with following the three steps on the reverse side of this page. Remind them to “breath low and slow.”
- Assure them they're safe,** that they're not in any danger of harm, and that panic attacks usually don't last very long, with the most intense feelings lasting only about 5-15 minutes. Tell them you'll stay with them. Give them space if they request it, but don't go so far as to be out of sight
- Ask them how you can help.** They may have something helpful to tell you. Their response may be short and curt. Don't take this personally.
- Help redirect their focus** away from why they might be feeling anxious, and onto their senses and surroundings (see step #3 on the reverse side). Offer them something to drink. It may be helpful, if they're willing, to introduce a few “grounding techniques” such as:
- Naming everyone in their family
  - Naming a few of their friends,
  - Counting backwards from 100 by 7s,
  - Naming all the states that begin with the word *New*, or
  - Identifying a favorite activity, why they enjoy it, when, where and with whom they last did it
- Ask** the person if they have a **history** of significant anxiety or past panic attacks. If so, ask them if this feels similar to their former panic episodes (a true heart attack is often experienced or felt as something quite unique or different than their previous panic attacks). If they ask or prefer to be seen by a medical professional, ALWAYS do so. Call 911 or take them to the ER right away. **(If they report pain or numbness to their left arm, this may or may not indicate a heart malfunction is occurring, take them immediately to the hospital ER or call 911.)**

**Encourage them to seek counseling** with a mental health professional with specialized skills in the treatment of anxiety and panic disorders. Such providers are available, without charge, in the OBU Counseling Center. A medical appointment with Dr. Kluck or their PCP may be wise as well.