

CHAPTER 1

What Are the DSM Criteria for Panic Disorder?

Chapter Review

1. What is the defining feature of panic disorder?

- The defining feature of panic disorder is an onset characterized by recurrent, unexpected panic attacks. Recurrent refers to more than one. Unexpected means there is no obvious external provoking stimulus.

2. What are the criteria for a panic attack?

CRITERIA FOR A PANIC ATTACK

Discrete period of intense fear, reaching peak within 10 minutes, and involving four or more of the following symptoms:

1. Palpitations, pounding heart, or accelerated heart rate
 2. Sweating
 3. Trembling or shaking
 4. Sensations of shortness of breath or smothering
 5. Feelings of choking
 6. Chest pain or discomfort
 7. Nausea or abdominal distress
 8. Feeling dizzy, unsteady, lightheaded, or faint
 9. Feelings of unreality (derealization) or of being detached from oneself (depersonalization)
 10. Fear of losing control, going crazy
 11. Fear of dying
 12. Numbness or tingling sensations (paresthesias)
 13. Chills and hot flushes
- *Situational* panic means that the panic attacks occur reliably upon exposure to a phobic object or situation. Specific phobias are characterized by situational panic.

- *Situationally predisposed* means that the attack is likely upon exposure but may not occur every time. This type of relationship characterizes social anxiety.
- Of course, *unexpected* panic attacks are what characterize the onset of panic disorder.

In diagnosing panic disorder, it is important first to rule out that the panic attacks are not due to the direct physiological effects of a substance, for example a drug of abuse or use of a medication, or due to a general medical condition such as hyperthyroidism.

3. What additional features are common in panic disorder?

ADDITIONAL FEATURES OF PANIC DISORDER

Panic disorder involves recurrent unexpected panic attacks and one or more of the following features:

1. Persistent concern about additional attacks
2. Worry about the implications of the attack or its consequences
3. A significant change in behavior reflecting fear of the attacks or their implications

4. What is agoraphobia?

- Many individuals who suffer from panic disorder develop agoraphobia, and hence, receive a diagnosis of panic disorder with agoraphobia. Agoraphobia refers to anxiety about being in places or situations from which escape might be difficult (or embarrassing) or in which help may not be available in the event of having a panic attack or panic-like symptoms.

5. What are common themes of agoraphobic fear and avoidance?

COMMON THEMES OF AGORAPHOBIC AVOIDANCE

1. Escape is not readily available (e.g., restaurants, theaters, stores, public transportation).
2. Help is not immediately available (e.g., being far away from home, being without someone who can help).
3. Places where danger or embarrassment could be a consequence of suffering a panic attack (e.g., driving or social gatherings).

These situations are avoided or else endured with great distress, endured with anxiety about having a panic attack, or require the presence of a companion.

Chapter Review Test Questions

1. Which of the following meets the criteria for a panic attack, assuming the symptoms peak within 10 minutes:

- A. Chest pain, shortness of breath, fear of dying, and calling for help
- B. Chest pain, shortness of breath, fear of dying, and avoidance of help
- C. Fear of dying, losing control, going crazy, or embarrassment
- D. Palpitations, chest pain, sweating, and fear of dying

Answer: D

2. Susan has had several unexpected panic attacks. Now she has begun avoiding several situations, such as using public transportation, driving, and shopping for fear that she might have another panic attack, become incapacitated, and embarrass herself. The most likely diagnosis in the case is which of the following?
- A. Agoraphobia
 - B. Panic disorder
 - C. Panic disorder with agoraphobia
 - D. Social anxiety disorder

Answer: C

Talking Points

Clients with panic disorder often develop agoraphobic fear and avoidance. If a diagnostician sees the client for the first time after agoraphobia is established, the clinical picture can look like several specific phobias (e.g., of enclosed places, bridges, planes, etc). How would the diagnostician differentiate panic disorder from the diagnosis of other phobias?

- This is a discussion of differential diagnostics that highlights a key diagnostic feature of panic disorder.

CONSIDERATIONS FOR DISCUSSION

- Panic disorder is characterized by unexpected panic attack at the onset of the disorder. Other anxiety disorders are not, and typically involve situational anxiety or panic (as with specific phobias) or situationally predisposed anxiety or panic (as with social anxiety, but including agoraphobia).
- The presence of unexpected panic at onset helps differentiate panic disorder from other anxiety disorders. Of course, comorbidity (having more than one diagnosis) is not uncommon, so looking at factors such as the symptoms, temporal relationships regarding onset and course, and the functional relationship of symptoms to distress and disability are always important.

Chapter Reference

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revised). Washington, DC: American Psychiatric Association.