

CBT as an Adjunct in Panic Disorders



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Submission: April 25, 2018; **Published:** May 01, 2018

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Abstract

This article is being written to review Cognitive Behavioral Therapy (CBT) use as an adjunct in panic disorders. Panic disorders are episodic, unexpected panic attacks occurring without a specific trigger. CBT is a form of psychotherapy which is used to treat anxiety by changing patterns of thinking or behavior.

Introduction

This research is being conducted to assess the effectiveness of cognitive behavioral therapy as an adjunct to traditional medications in panic disorders. According to previous researches individuals receiving CBT focused on panic disorders meet high end-state functioning at post-treatment in a large amount of cases [1]. We assess whether treating panic disorders with traditional methods along with Cognitive Behavioral Therapy has more benefits.

Discussion

Panic disorders are classified as episodic and unexpected panic attacks which occur without any specific trigger [2]. Expected panic attacks to a known trigger are also seen in patients [3]. Panic attacks are defined to have a sudden onset of intense fear or discomfort which peaks within minutes accompanied by at least four of the physical and psychological symptoms in DSM-5 diagnostic criteria [2]. To diagnose panic disorders the patient must also worry about further attacks or modify their behavior in flawed ways to avoid them [4]. Palpitations are the most common accompanying symptom in panic attacks [3]. Panic disorders cause disability and impairment in quality of life [5-7]. They mostly occur with at least one other psychiatric disorder such as anxiety, mood or substance use disorders [8]. Selective serotonin reuptake inhibitors (SSRIs) are mostly considered to be the first line medications for panic disorders [9-12]. Tricyclic antidepressants (TCAs) are also used to treat panic disorders and are as effective as SSRIs, but adverse effects limit the use of TCAs [13].

Cognitive Behavior Therapy (CBT) is an intervention which is considered to be useful in treating anxiety disorders. CBT uses applied relaxation, exposure, cognitive restructuring, or education. The cognitive part helps in changing thinking patterns which support fears, the behavior part trains patients to relax deeply, helping desensitize patients to triggers which provoke anxiety. Behavior desensitization may cause mild temporary increases in anxiety [14]. Therapy should be directed towards the specific reasons causing the patient's anxiety and must be adjusted according to their needs. Structured CBTs have proven to be effective in primary care setting as treatment for anxiety [15-17]. It is said that any psychotherapy needs to be performed weekly for at least eight weeks to assess its effect. Psychotherapy can be used alone or it may be given along with medication as first line treatment for panic disorders [18].

Conclusion

As we keep previous researches under consideration, it can be concluded that Cognitive Behavioral Therapy (CBT) is a good adjunct to traditional medications as treatment for panic disorders. Although patients need to be given CBT this is tailored to their needs and targets their specific anxieties.

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DOI: [10.19080/PBSIJ.2018.09.555755](https://doi.org/10.19080/PBSIJ.2018.09.555755)

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