WHEN PANIC ATTACKS

Senior YOU journalist Pieter van Zyl describes what’s it like being incapacitated by anxiety

Google’s definition of an anxiety attack is “a sudden overwhelming feeling of acute and debilitating anxiety”. But I don’t need to read the definition; these attacks became part of my own reality 15 years ago.

How well I remember that first time in the intensive care unit of Johannesburg’s Milpark hospital. A friend had to fetch me at home in the middle of the night and take me to hospital because I thought I was having a heart attack.

A cardiologist was called in from home. I was immediately connected to a heart monitor and a ventilator was placed over my nose to force oxygen into my rigid lungs. The doctor couldn’t find anything wrong with my heart. It was a nurse who realised I was having a panic attack, because she had experienced them herself.

After that I went for cognitive therapy and took medication to keep the problem under control.

Until just the other day. Ironically I happened to be in Johannesburg to attend a mental health conference.

It came out of the blue – that fist in the middle of my chest that keeps tightening its grip as I feel my heart beating in my throat. I struggle to breathe and there’s cold sweat on my forehead. My left arm becomes numb and I feels as if I’m dying. My mouth is so dry I can’t talk to the taxi driver.

I moved to Cape Town many years ago but suddenly, there in central Johannesburg, I was overwhelmed by memories. Was it a flashback to the early 2000s when I covered murder cases, or the Ellis Park tragedy of 11 April 2001 in which 43 people died in a stampede? A father and son breathed their last right in front of me.

Whatever it was, I no longer keep tranquilisers with me because they’re addictive. I don’t even have the paper bag I used to carry around so I could blow in it to regulate my breathing. I had to sit in the car and wait until my heart stopped fluttering.

There are many people in the same boat. Panic attacks affect 16-23 percent of adult South Africans, according to a report published in the South African Journal of Psychiatry.

Nearly two decades ago Zane Wilson (67) from Johannesburg started a support group for sufferers of anxiety disorders after she was diagnosed with the condition.

Since then the group has become part of the South African Depression & Anxiety Group and grown to more than 200 support groups countrywide.

“People who suffer from anxiety attacks need to regain control over their lives,” Wilson explains.

Here’s what you need to know if you or a loved one suffers from this debilitating condition.
HOW DOES A PANIC ATTACK PRESENT?

“It varies from person to person,” says Zane Wilson, founder of the National Depression and Anxiety Support Group. “Some experience hot flushes and start to sweat. Others shake as if they’ve witnessed a car crash. During an attack you might experience chest pain, struggle to breathe and feel dizzy.”

Usually there are no warning signs. Many people with the condition are so scared of having an attack the fear can cause one.

There’s a difference between panic attacks and panic disorder, Cape Town psychologist David Rosenstein says. An attack is one episode of panic, which can happen again. Panic disorder is when you experience more than one episode a month (although it could also be more than one episode over a longer period).

The most terrifying thing about panic attacks is that they come out of the blue, Rosenstein says.

The brain learns that certain sensations experienced by your body might be dangerous. It responds by producing adrenaline which prepares you to tackle the apparent danger with a fight-or-flight response. The problem is, you can’t run away from yourself. There’s no dog chasing you but there’s enough adrenaline in your blood to make you jump over a high wall.

Because you fear a panic attack you avoid malls, lifts, buses and anywhere people might see you having an attack, Rosenstein says. Eventually your world gets smaller. Other symptoms include:

- An overwhelming feeling of fear which can last for several minutes.
- A surreal feeling.
- Heart palpitations.
- Fear that you might lose control, that you’re “going crazy” or that you might do something to embarrass yourself.
- Fear that you’re dying.

WHY DOES IT HAPPEN?

- The first attack might come after a traumatic experience such as the death of a loved one or the first day at a new job.
- It’s hereditary – if a direct family member suffers from panic attacks the chances of you being affected is five times greater.
- Certain drugs and medication, too much coffee, dentists’ injections, some weight loss drugs and certain malaria medications can trigger a dormant panic attack, says Zane Wilson, founder of an anxiety support group.

HOW TO KEEP PANIC AT BAY

There are medications and therapies that can effectively treat anxiety disorder and panic attacks, but these conditions are often missed or wrongly diagnosed.

“You don’t have to accept that it will always be like this,” says Sandton psychologist Colinda Lindé. “Anxiety is triggered by something and you can do something about it.”

- If you suspect you have anxiety issues, fill in the anxiety/panic questionnaire on sadag.org.
- Talk to your GP says Johannesburg psychologist Bradley Daniels. Your doctor can then refer you to a psychologist or psychiatrist.
- “A psychologist can help you gain insight into the cause of your anxiety while a psychiatrist can prescribe medication. A combination of conversational therapy and medication is often the best way to treat an anxiety disorder,” Daniels says.
- With cognitive behavioural therapy, the patient spends an hour or two a week with a therapist to determine which thoughts and feelings precipitate an attack. Patients are taught to stop these thought patterns before they get out of control.
- The longer the attacks continue before treatment and the stronger the family history of the condition, the more important medication becomes to make the sufferer susceptible to cognitive therapy.
- Try non-addictive tranquillisers that can bring the condition under control in six months to a year.
- Tranquillisers should be taken only until other anti-anxiety medication starts to take effect.

TRYED AND TESTED TIPS

- Tell yourself over and over that you will be fine and that you’re not dying.
- Walk briskly so the adrenaline can work through your muscles.
- If you’re driving, slow down. Keep moving until the attack is over, even if you have to drive in the emergency lane.
- Slow down your breathing.
- If you’re not driving, close your eyes and visualise a calming image – imagine you’re sitting on a beach.
- Distract yourself to restore healthy thoughts. Focus on something entirely different – a song on the radio, your breathing or memories of something pleasant.
- Focus on objects around you the building across the street, the jacket the person next to you is wearing or your ring.
- Count backwards from 20 and with each count try to think of a moment you enjoyed.
- Keep your thoughts busy during the attack. Devise a menu or list the movies you’ve seen recently.
- Yawn and stretch from head to toe.
- Get angry at the anxiety and shake your fist at it. If you’re alone shout, “Leave me alone! You won’t win!”
- For help call the Sadag Mental Health helpline on 011-234-4837 or toll free on 0800-70-80-90.
- Pieter van Zyl is a 2015/2016 fellow of the Pfizer Mental Health Prize for reporting on mental health.