
ARTICLE EIGHTEEN

WHEN PANIC ATTACKS

PASTOR, I THOUGHT I WAS GOING TO DIE!

Beth is a highly competent elementary school teacher—a seven-year veteran highly respected by her colleagues and the parents of her third-grade students. She and her husband, Bill, a floor manager for a local grocery store, are dependable, exemplary church members and have three elementary-age children of their own.

Beth is seriously considering giving up teaching because of increasing incidents of panic attacks at school. She relates the following to her pastor as she and Bill seek his counsel.

About three months ago, we were on a summer vacation in Alabama, visiting Bill's folks. We had gone out to eat as a couple and left the kids with the grandparents. On the way home, Bill stopped at a convenience store to buy a newspaper, and I stayed in the car. A moment or two after he left the car, my heart started racing. I couldn't catch my breath, and I felt as though I was choking. I got hot all over and was sure I was having a heart attack or something. Pastor, I thought I was going to die! Bill was gone only a couple of minutes, and I was still having a hard time breathing.

Bill didn't know what was happening and rushed me to the emergency room. He grew up in the town and knew right where it was. The doctor ordered an electrocardiogram and several blood tests, but everything was normal. The feeling passed, and I felt pretty normal again. They really couldn't find anything wrong. It was embarrassing.

The incident really bothered me, but I forgot about it after a few weeks. I was teaching one day and had just dismissed the children for recess. I was sitting at my desk counting out worksheets for math next hour when it happened again. It was just like the last time. My heart felt like it was going to jump out of my chest, and I couldn't get my breath. It passed after a few minutes.

A couple of days later, it happened again when I was grading papers after school. It happened three more times, so I set up an appointment with our family doctor. He checked me out and listened to my story. He said it sounded as though I was having panic attacks. He wrote out a prescription for an antianxiety medication and suggested I see a psychiatrist. Bill and I didn't think either recommendation was right, but we don't know what to do. If I'm going nutty, I don't know why. All I know is that I am afraid that I'll have one of these attacks while I'm teaching. I dread going to school. I can't go on like this.

Beth's experiences are not uncommon, and thankfully, there is something Beth and others like her can do to reverse the downward spiral.

Panic attacks are the result of an overstimulated stress response. Some ongoing fear—fear of failure, fear of losing control, fear of not measuring up, and so forth—keeps the stress hormones flowing, which in turn generate certain discomforting physical sensations.

They occur when anxiety triggers hyperventilation (rapid and shallow breathing), which results in too little carbon dioxide in the lungs. This changes the pH level of the plasma and leads to the tingly, light-headed, unreal, panicky feelings previously described. Because the subjects of attacks do not understand what is happening, they become frightened, and this further accelerates their hyperventilation. Eventually their bodies' natural mechanisms will compensate for this, and persons will momentarily stop inhaling or the rate of respiration will be slowed by fainting, yawning, or sighing.

An old and widely used technique for rapidly stopping hyperventilation is to have hyperventilating persons breathe into a paper bag whose top has been crumpled about the person's mouth. In a few moments this will increase the amount of carbon dioxide inhaled and thus eliminate some of the unusual and frightening symptoms. While very frightening, the attack itself will not injure the person.⁴⁹

⁴⁹David G. Brenner, ed., *Baker Encyclopedia of Psychology* (Grand Rapids: Baker Book House, 1895), 787.

Eventually, the person experiencing anxiety attacks begins to avoid all situations in which he imagines that he may have an attack. He may stop driving, sit only near the door on the aisle in the last row of any meeting he attends, or avoid going out in public altogether. As his life goes increasingly out of control, his anxiety builds and his attacks are more frequent. What can be done?

1. A physical workup by a medical doctor is the place to start.

Sometimes panic attacks are precipitated by a genuine physical problem but then are exacerbated by worry and fear. “Some physical problems that can produce panic attacks include hypoglycemia, hyperthyroidism, a variety of drugs and medications, heart valve disorders, and excessive intake of caffeine.”⁵⁰

When a legitimate physical cause, such as those listed above, is not found, be very cautious. Most medical doctors at this point will not deal with the underlying issues of fear and anxiety but will prescribe psychiatric medications.

2. If you are experiencing panic attacks and are just beginning the program, you need not start with session 1. You should jump ahead and listen to or view sessions 17–19, following along in the Seminar Syllabus.

You can wait to do all the exercises in this study guide for those sessions when you progress week-by-week through the study guide. By going through the recorded seminar sessions and the Seminar Syllabus outlines for sessions 17–19, you will gain an overview of why you are experiencing these feelings and why you do not want to treat them with medication.

3. When you experience a panic attack . . .

- a. Remind yourself, “This will soon pass and it will not hurt me.”
- b. Slow down your breathing. Breathe into a paper bag. If one is not handy, do the following:
 - 1) Inhale slowly through your nose for two seconds, counting one one-thousand, two one-thousand.
Be sure to fill up your lungs from the bottom by taking deep breathes; don’t just breathe from your chest. If you place your hands on your stomach, you should feel them rise and fall with each deep breathe.
 - 2) Exhale slowly for four seconds counting one one-thousand, two one-thousand, three one-thousand, four one-thousand.
Completely empty your lungs by contracting your stomach muscles.
 - 3) Repeat this slow inhale and slow exhale about ten times.
- c. While you are slowing down your breathing, thank God that He is in control even if you feel that *you* are out of control and . . .
- d. Use a *STOP-Think* card (see session 19, page 47 of the Seminar Syllabus) to refocus your thinking on God’s promises to you and on something true about God. You must meditate upon certainties not possibilities.
- e. As soon as possible, get back to doing the thing you were supposed to be doing when the panic attack struck—driving, shopping, working, and so forth.
- f. Use the panic attack as a reminder that you have much work to do in finding that God is more than enough so that you do not have to be overcome by anxiety.

Highly analytical, perfectionistic people will try to find a direct cause-and-effect relationship between their current panic attack and what they were thinking just moments before. This will only increase their frustration because there is not likely to be any immediate cause.

Think of it this way. Usually a new car does not break down as soon as we drive it off the dealership lot. Only after miles of use does something fail—unless a part was defective.

⁵⁰*Ibid.*

Eventually the vibration of the road, the heat of the engine, and the disintegration of a part builds up to the point that we are sitting on the side of the road calling a tow truck.

A good mechanic can usually trace the path of disintegration that resulted in the failure. Perhaps a worn-out thermostat caused the engine to overheat, thus cracking the engine block, or a brake line rubbing on some part of the chassis eventually caused the brakes to fail. The mechanic can replace the failed part, but he also needs to remedy the underlying condition that caused the part to fail.

In a similar fashion, panic attacks are the uncomfortable feelings generated by stress hormones that have built up from extended worries and the intense “push” to keep life in control. The breathing exercises above and the *STOP-Think* technique can get your body calmed down fairly quickly. But you also need to take the time to seriously consider all the truths presented in this seminar so that your underlying worry and fear—generated by unbelief and discontent—can be addressed.

When they are addressed, panic attacks are completely “curable.” You will experience them less and less. If you have been having several a week, you will notice at first that you are having only a couple. Then you will have only one a week and then one every other week or so. Eventually, you will not experience one for months.

Occasionally, one will recur out of the blue even though you haven’t had one for several months. The attack may indeed be an indication that you have slipped back into your old ways of worry and fear. However, there may be no explanation whatsoever for the attack in light of the spiritual growth you have made in those months. Consider it a reminder from the Lord of how far you have come. On such occasions the worst thing you can do is to begin worrying that they are starting up again. Use the occasion to review what you have learned and to thank the Lord for what He has delivered you from. Then get back to doing the thing you were supposed to be doing at the moment the attack came.