

The National Institute of Mental Health: <https://www.nimh.nih.gov/health/publications/panic-disorder-when-fear-overwhelms>

Panic Disorder: What You Need to Know

[En español](#)

What is panic disorder?

People with panic disorder have frequent and unexpected panic attacks. These attacks are characterized by a sudden wave of fear or discomfort or a sense of losing control even when there is no clear danger or trigger. Not everyone who experiences a panic attack will develop panic disorder.

Panic attacks often include physical symptoms that might feel like a heart attack, such as trembling or tingling in the body or a rapid heart rate. Panic attacks can occur at any time, sometimes even during sleep. Many people with panic disorder worry about the possibility of having another attack and may significantly change their lives to avoid having another attack. Panic attacks can occur as frequently as several times a day or as rarely as a few times a year.

Panic disorder often begins in the late teens or early adulthood. Women are more likely than men to develop panic disorder. With the right treatment and support, people with panic disorder can manage their symptoms and improve their quality of life.

What are the signs and symptoms of panic disorder?

People with panic disorder may have:

- Sudden and repeated panic attacks of overwhelming anxiety and fear
- A feeling of being out of control
- A fear of death or impending doom during a panic attack
- An intense worry about when the next panic attack will happen
- A fear or avoidance of places where panic attacks have occurred in the past

Physical symptoms during a panic attack may include:

- Pounding or racing heart
- Sweating
- Chills
- Trembling
- Difficulty breathing
- Weakness or dizziness
- Tingly or numb hands
- Chest pain
- Stomach pain or nausea

A panic attack can last from a few minutes to an hour or sometimes longer. While these feelings can be distressing, panic attacks themselves are not life-threatening, and the physical symptoms usually resolve with time. However, for some, the fear of future attacks may lead to ongoing anxiety.

What is the difference between a panic attack and panic disorder?

A panic attack is a one-time or occasional episode of intense fear with physical and emotional symptoms. An isolated panic attack is not a mental disorder.

Panic disorder may be diagnosed when a person experiences recurrent and unexpected panic attacks, along with ongoing worry or behavioral changes due to the fear of future attacks, often interfering with daily life.

What causes panic disorder?

Panic disorder sometimes runs in families, but no one knows for sure why some family members have it while others don't. Researchers have found that several parts of the brain and certain biological processes may play a crucial role in fear and anxiety. Some researchers think panic attacks are like "false alarms," where our body's typical survival instincts are active either too often or too strongly, or some combination of the two. For example, someone with panic disorder might feel their heart pounding and assume they're having a heart attack. This may lead to a vicious cycle, causing a person to experience panic attacks seemingly out of the blue, the central feature of panic disorder. In addition, researchers are looking at the ways stress and environmental factors play a role in the disorder.

How is panic disorder diagnosed?

To be diagnosed with panic disorder, a person must experience recurrent, unexpected panic attacks. They must also spend at least 1 month worrying about having more panic attacks, feeling scared about what the attacks mean, or changing their behavior to try to avoid future attacks.

If you think you're experiencing symptoms of panic disorder, talk to a health care provider, such as a primary care doctor, psychiatrist, psychologist, or clinical social worker. During the visit, the provider may ask when your symptoms began, how long they have lasted, how often they occur, and their impact on your life. After discussing your history, the provider may conduct a physical exam to ensure that an unrelated physical problem is not causing your symptoms.

What other illnesses can co-occur with panic disorder?

Some people with panic disorder have other mental and physical health disorders or conditions, including depression, other anxiety disorders, post-traumatic stress disorder, obsessive-compulsive disorder, bipolar disorder, cardiovascular disease, respiratory disorders, irritable bowel syndrome, or thyroid problems. Panic disorder is also commonly associated with alcohol and substance misuse.

Agoraphobia can sometimes develop as a co-occurring condition of panic disorder. People with agoraphobia have an intense fear or anxiety of certain places or situations where escape or obtaining help might be difficult or unavailable if they were to experience a panic attack or panic-like symptoms. Learn more about [agoraphobia](#).

The presence of multiple disorders can make treatment more complex, and people with panic disorder and co-occurring mental disorders may benefit from a comprehensive treatment plan that addresses all aspects of their mental health.

How is panic disorder treated?

Treatment for panic disorder typically involves psychotherapy, medication, or both. Choosing the right treatment plan is based on a person's needs, preferences, and medical situation, as well as consultation with a mental health professional or a health care provider. Finding the best treatment may take trial and error, and both psychotherapy and medication can take some time to work.

Psychotherapy

Psychotherapy (also called talk therapy or counseling) can be effective when delivered in person or virtually via telehealth. A provider may support or supplement therapy using digital or mobile technology, like apps or other tools. Different therapies work for different types of people.

Cognitive behavioral therapy (CBT), a research-supported type of psychotherapy, is commonly used to treat panic disorder. CBT teaches a person different ways of thinking, behaving, and reacting to the feelings that happen during or before a panic attack. The attacks can become less frequent once a person learns to react differently to the physical sensations of anxiety and fear during a panic attack. CBT has been well studied and is the "gold standard" choice for psychotherapy.

Exposure therapy is a common CBT method that focuses on confronting the fears and beliefs associated with panic disorder symptoms to help a person engage in activities they have been avoiding. Interoceptive exposure is a CBT technique that involves exposure to bodily sensations associated with panic attacks and panic disorder symptoms. Exposure therapy may be used along with relaxation exercises and breathing training techniques.

Learn more about [psychotherapy](#).

Medication

Health care providers may prescribe medication to treat panic disorder. Different types of medication can be effective, including:

- Antidepressants, such as selective serotonin reuptake inhibitors (SSRIs) and serotonin-norepinephrine reuptake inhibitors (SNRIs)
- Beta-blockers
- Anti-anxiety medications, such as benzodiazepines

SSRI and SNRI antidepressants are commonly used to treat depression, but they also can help treat the symptoms of panic disorder. They may take several weeks to start working. These medications also may cause side effects, such as headaches, nausea, or difficulty sleeping. These side effects are usually not severe, especially if the dose starts off low and is increased slowly over time.

Beta-blockers can help control some of the physical symptoms of panic disorder, such as rapid heart rate, sweating, and tremors. Although health care providers do not commonly prescribe beta-blockers for panic disorder, the medication may be helpful in certain situations that precede a panic attack.

Benzodiazepines, which are anti-anxiety sedative medications, can be very effective in rapidly decreasing panic attack symptoms. However, some people build up a tolerance to these medications and need increasingly higher and higher doses to get the same effect. Some people even become dependent on them. Therefore, a health care provider may prescribe them only for brief periods of time.

Learn more about [mental health medications](#). Read the most up-to-date information on medications, side effects, and warnings on the [U.S. Food and Drug Administration \(FDA\) website](#).

Healthy habits

Practicing a healthy lifestyle can also help combat panic disorder, although this alone cannot replace treatment. Make sure to get enough sleep and exercise, eat a healthy diet, and turn to family and friends you trust for support. Learn more ways to [take care of your mental health](#).

How can I support myself or a loved one with panic disorder?

Educate yourself

A good way to help yourself or a loved one who may be struggling with panic attacks or panic disorder is to seek information. Research the signs and symptoms, learn about treatment options, and keep up to date with current research.

Communicate

If you are experiencing panic disorder symptoms, have an honest conversation about how you're feeling with someone you trust. If you think a friend or family member may be struggling with panic disorder, set aside a time to talk with them to express your concern and reassure them of your support.

Know when to seek help

If your anxiety, or the anxiety of a loved one, starts to cause problems in everyday life—such as at school, at work, or with friends and family—it's time to seek professional help.

Practice compassion

Be kind and patient with yourself and others. Acknowledge progress, no matter how small, and recognize that managing panic attacks or panic disorder may involve setbacks along the way.

How can I find help?

If you have concerns about your mental health, talk to a primary care provider. They can refer you to a qualified mental health professional, such as a psychologist, psychiatrist, or clinical social worker, who can help you figure out the next steps. Find [tips for talking with a health care provider](#) about your mental health.

You can [learn more about getting help](#) on the NIMH website. You can also learn about [finding support](#) and [locating mental health services](#) in your area on the Substance Abuse and Mental Health Services Administration (SAMHSA) website.

If you or someone you know is struggling or having thoughts of suicide, call or text the [988 Suicide & Crisis Lifeline](#) at **988** or chat at [988lifeline.org](#) . In life-threatening situations, call **911**.

What are clinical trials and why are they important?

Clinical trials are research studies that look at ways to prevent, detect, or treat diseases and conditions. These studies help show whether a treatment is safe and effective in people. Some people join clinical trials to help doctors and researchers learn more about a disease and improve health care. Other people, such as those with health conditions, join to try treatments that aren’t widely available.

NIMH supports clinical trials across the United States. Talk to a health care provider about clinical trials and whether one is right for you. Learn more about [participating in clinical trials](#).

For more information

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U.S. Department of Health and Human Services
National Institutes of Health
Revised 2025