Don’t Panic: COPD and Panic Attacks

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COPD and Panic Attacks: Stopping an Attack Before It Starts

I'm sure most people at some stage of their lives have experienced what they might describe as a panic attack — forgetting to pay a bill, missing an appointment or running late are just some of the reasons people may panic.

However as chronic obstructive pulmonary disease (COPD) patients, panic attacks are one of the most frightening experiences you can have, as many times it is caused by not knowing where your next breath is coming from. While these episodes are frightening to deal with they can often give outsiders some insight into the life of a COPD patient.

Try breathing through a straw and you'll feel how hard it is to get air in and out. Then have someone give you a bear hug, restricting your chest even more — now you have some idea of why a COPD patient might have a panic attack. You can remove the straw and breathe normally, but a COPD patient's breathing will stay the same.

What Causes Panic Attacks?

Quite often, panic attacks in COPD patients are caused by breathlessness. Then, the panic attack only makes it worse! Being aware of how to avoid breathlessness is an important part of preventing these attacks. So ask yourself the question — why did I become more breathless?

Sometimes it can stem from an exacerbation in symptoms, or maybe you've forgotten to take your medication. Was there a trigger or something else in the air that has caused a reaction? Trying to trace back what has caused your breathlessness can often help you not only to avoid the trigger, but deal with it better if it happens again.

For me it can be as simple as a drop in temperature, smoke from a fireplace, or even having too much to eat.

Identifying the Signs

Getting to know your body is an important skill in dealing with panic attacks before and after they hit. Remember what you have learned if you took pulmonary rehabilitation classes — your triggers, breathing techniques, and coping mechanisms.

The following symptoms can be signs that a panic attack could be imminent and it's important to notice them quickly:

- Tightness of your chest
- Increased heart rate
- Shallow breathing
- Redness in the face

If you notice these symptoms it's time to take action to lessen their impact. Anyone with a respiratory disease should have a management plan to deal with episodes. This can be done in consultation with your doctor and designed so you can follow through simple steps without panicking.

Next page: planning and preventing panic attacks.

The Plan

This is where a good management plan can make all the difference, and while good plans will all be similar in their objectives it's the implementation that can make the difference. So where do we start?

If becoming breathless is the trigger, having your rescue inhaler in close proximity is a must. Mine never leaves my side.

Considering what is going to make you feel more comfortable is important, as is how the people around you will react and their role. What's your thought process when the symptoms are becoming worse and what will you do if your symptoms don't subside?

Having experienced plenty of panic attacks myself, my plan is as follows as soon as I start to experience symptoms:

- Ensure I have my rescue inhaler and pulse oximeter
- Have a phone close by if nobody is around
- Sit down on a chair rather than lying down on a bed, as I can control my breathing better sitting.
- Check oxygen levels
- Focus on techniques that help me relax and control my breathing (pursed lips breathing)
- Try to stay calm and not become worked up
- Take my rescue inhaler if I feel I can't get my breathing under control
- If symptoms continue to worsen with no sign of reversing, contact my doctor or hospital immediately.

Never be afraid to call for assistance if you need to, as it's better to be safe than sorry. I always make sure that if people are around, they don't make conversation, as it is near impossible to get my breathing under control if I have to talk as well.

While my plan works for me, you may do it differently. The main thing is that you have a plan in place so rather than having a panic attack you just take some time out to get that breathing under control.

Prevention is Always Best

I haven't suffered panic attacks for a while. The last one I had was while swim training with a wetsuit on. My chest was restricted and my wetsuit was making it worse. Fortunately I was able to get my breathing under control.

If you ask me why I haven't suffered from panic attacks for some time, I'd tell you it's because of the way I look after my body. It really doesn't matter at what stage of COPD you’re at — keeping your body in the best shape possible from the inside out will help.

When you think about how your body works and the role of oxygen in that process then it makes sense — whether you have respiratory disease or not — that the more efficiently your body uses oxygen the better you'll feel. This leads to the two most important things you can do for your body outside of taking your medication: keeping the weight off and regular exercise.

Be aware of what you’re eating and drinking, as too much of either can cause breathlessness that can take time to subside. You should also determine whether your COPD is well managed, as often patients who suffer panic attacks have COPD that is not under control.

Have you had pulmonary function tests, seen a pulmonary specialist or been to pulmonary rehabilitation classes? Check to make sure you're taking your medication at the right dosage and sequence, as this can make a noticeable difference on how breathless you are. Taking your long-acting inhaler (preventer or controller) regularly rather than just using your rescue inhaler when you need it is far more effective. If you're unsure about the order or dosage, then contact your doctor to discuss.

All these steps will help you not only manage your COPD better, they will also help you deal with exacerbations and related panic attacks. A well-managed well-educated COPD patient is always going deal with what this disease dishes out better than a patient with their head in the sand.