



Donna Pincus leads patients in exercises that bring on anxiety.

Don't Panic

INTENSIVE TREATMENT FOR TEENS WITH PANIC DISORDERS SHOWS SIGNS OF SUCCESS

BY VICKY WALTZ

At sixteen, Lindsay Lanouette appeared to have it all. Tall and lithe, with long blonde hair and striking blue eyes, she had lots of friends, got along well with her parents and sister, earned good grades, and played varsity soccer.

But sometimes, while wandering the aisles of a shopping mall or eating in a dimly lit restaurant, things would start to go wrong. She'd become dizzy, her heart would race, and before long, she could barely breathe. "It just felt as if the walls were closing in," the Falmouth, Massachusetts, teenager recalls, "and I couldn't do anything to stop it. Sometimes I thought I was dying."

Lanouette is one of six million Americans who suffer from anxiety

and panic attacks. She learned to control her symptoms through an innovative, short-duration treatment plan devised by Donna Pincus at Boston University's Center for Anxiety and Related Disorders.

Pincus, a College of Arts and Sciences associate professor of psychology, is conducting a five-year, \$1.8 million study funded by the National Institute of Mental Health on the efficacy of an intensive treatment method for adolescent panic disorder and agoraphobia. She offers an eight-day program of cognitive-behavioral therapy for children aged twelve to seventeen, designed to help them overcome serious impairments and return to everyday activities more quickly than traditional methods do. The results, she says, have been strikingly successful — and can happen relatively quickly. "People typically begin to experience some changes during the first few days of treatment," she says.

The program administers no mood-altering medications. Instead, Pincus places patients in the very situations that cause them to panic. She also leads patients in exercises to bring on anxious feelings. "It's a symptom-inducing method called interoceptive exposure," she explains. "In order to overcome anxiety, adolescents have to actually experience the physical sensations that are caused by panic."

For Lanouette, that meant shaking her head from side to side to induce dizziness, running in place to make her heart race, breathing through a cocktail straw to make her feel light-headed, and staring at a bright light to cause disorientation.

"The first time it's scary — terrifying, even," Pincus says. "But by the second or third time, habituation occurs. By allowing patients to experience sensations of panic in a controlled setting, they learn that it takes only a few minutes for those sensations to dissipate, because our bodies like to stay at

homeostasis" — a state of relative equilibrium. "And once a patient stops responding to the sensations with fear, the sensations go away."

Researchers don't know exactly what causes anxiety and panic disorder. "We know that some people are biologically predisposed to experience anxiety — we don't inherit anxiety disorders, but we inherit that vulnerability to experience anxiety," Pincus says. "There's also a psychological component that might come from influences in the environment, such as parenting. And finally, there's the specific psychological vulnerability, when the anxiety becomes focused on one specific thing, like a phobia."

As part of the study, Pincus follows her patients for a year after the intensive treatment has ended. Thirty-three patients have completed the program thus far, and "results have been very positive," Pincus says. "Adolescents have shown significant decreases in both the number of weekly panic attacks they are experiencing and the severity of their panic from pretreatment to post-treatment." And families have reported many positive changes, she adds, such as improved interactions within the family, improved teen-mother relationships, stronger academic performance, and increased levels of participation in normal teen activities.

The intensive treatment may be particularly beneficial to adolescents with limited access to therapy near their homes, she says, and it has the bottom-line result of minimizing distress quickly, which, to a person with debilitating panic, is all that matters.

The Intensive Treatment of Adolescent Panic Disorder and Agoraphobia Program at BU's Center for Anxiety and Related Disorders is free for adolescents who qualify. For additional information, contact the center at 617-353-9610 or visit www.bu.edu/card.