

Other problems commonly treated by C.B.T.

SPECIFIC PHOBIAS

SOCIAL PHOBIA

OBSESSIVE COMPULSIVE DISORDER

IMPULSE CONTROL DISORDERS

GENERALISED ANXIETY DISORDER

PANIC DISORDER

BI-POLAR DISORDER

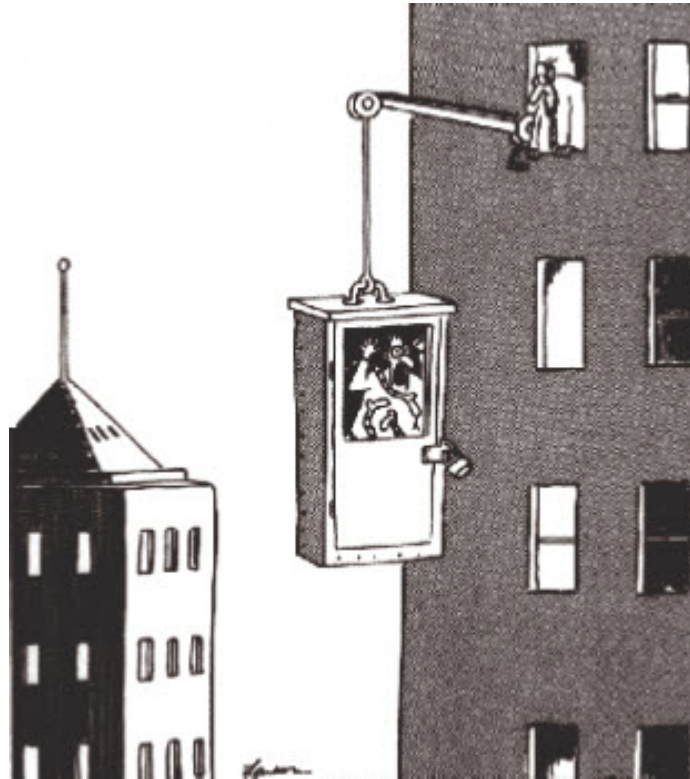
HEALTH ANXIETY

POST TRAUMATIC STRESS DISORDER

SEXUAL DYSFUNCTION

MARITAL & RELATIONSHIP THERAPY

DEPRESSION



Professor Gallagher and his controversial technique of simultaneously confronting heights, snakes, enclosed spaces and the dark



Anxiety & Panic

“Cognitive Behavioural Therapy can empower an individual to manage and transform their feelings -and thus their life”

Professor Lord Richard Layard
“Mental Health—Britain’s Biggest Social Problem?”

Phone: 01934 550087

Mob: 07859 316445

www.astconsultancy.co.uk
E-Mail: adrian@astconsultancy.co.uk

COGNITIVE BEHAVIOURAL PSYCHOTHERAPY

Anxiety and Panic

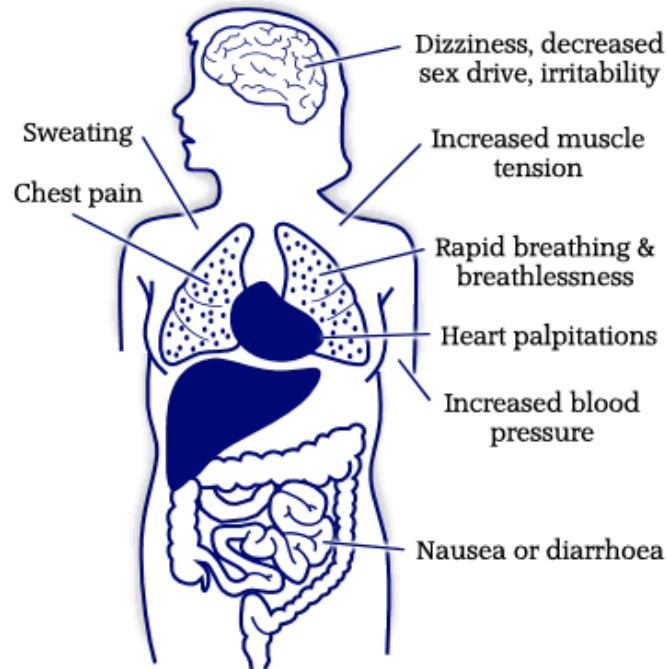
Anxiety is a normal reaction to stress and danger and it serves a very important purpose in protecting the organism to which it occurs. Certain changes take place in order to increase the efficiency, strength and stamina of the body. When required by the circumstances these changes prove invaluable.

More often than not though we become anxious for reasons that are not life threatening. This is where anxiety becomes problematic.

The following are common symptoms of anxiety and panic attacks:

- Pounding heart
- Sweating
- Trembling or shaking
- Shortness of breath
- Sensation of choking
- Nausea or abdominal pain
- Dizziness or light-headedness
- Feeling unreal or disconnected from oneself
- Fear of losing control
- Fear of "going crazy" or dying
- Numbness
- Chills or hot flushes
- Tingling in the fingers and/or toes
- Physical symptoms that mimic a heart attack and/or chest pain

Physical Effects of Anxiety Disorders



People will behave in such a way that earns them rewards, prevents dreadful incidents and/or maintains their safety. For example when someone who is scared of spiders encounters a spider, they become anxious. To manage their anxiety they may flee, avoid spiders or get others to check for spiders and/or seek reassurance.

This behaviour may work in the short term (it may reduce anxiety felt at the time) but it *preserves the fear of spiders*. Others whom worry about their health are more likely to panic if they mistake sensations of anxiety for other physical problems, (e.g. the pounding heart & chest pains may be misinterpreted as a sign of impending heart attack).

Sometimes people do not even need to be in the presence of the trigger for their anxiety to feel anxious—it may be the threat of contact is enough to start the anxiety response so they may avoid people or places because they may encounter that of which they are afraid. This is called "Anticipatory Anxiety".

Treatment

The type of interventions utilised by a Behavioural Psychotherapist will vary by which anxiety problems the patient displays. The first steps, following a full assessment, are to construct an individual formulation of the problem and how it is maintained.

The interventions employed will be guided by this formulation and may include Graded Exposure, Response Prevention, Verbal Reattribution, Thought Action Diffusion, Self instructional training, Doubt reduction techniques, Challenging of specific thoughts and misinterpretations and Behavioural experimentation.

A Professional and Confidential service, provided by a fully Qualified and Experienced Psychotherapist.

Adrian Soden.
BA (Hon's); RMN Dip. H.E.
Adult Behavioural Psychotherapist

Tel: 01934 550087

E-Mail: adrian@astconsultancy.co.uk