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Panic Attack or Heart Attack?

Reid Wilson, PhD, and Mark Pollack, MD

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Panic attacks and heart attacks can feel frighteningly similar: shortness of breath, palpitations, chest pain, dizziness, vertigo, feelings of unreality, numbness of hands and feet, sweating, fainting, and trembling. Some people describe this experience as feeling as if they're losing control or going to die.

A panic attack occurs spontaneously or a stressful event can trigger it, but it poses no immediate danger. A heart attack is dangerous, and it requires prompt medical attention. In women, though, heart disease symptoms are sometimes mistaken for a panic attack. Panic disorder is diagnosed in people who experience panic attacks and are preoccupied with the fear of a recurring attack. Like all anxiety disorders, this one is treatable.



Reid Wilson, PhD, offers this advice: For someone who has had a heart attack and also has panic attacks, together we identify, along with their physician, the symptoms that should trigger an immediate trip to the emergency room. Whether it turns out to be another panic attack or not, this person should treat those symptoms as a possible heart attack. He or she is to treat all other symptoms as signs of anxiety or a panic attack, even though they may feel like a heart attack.

Those who have never had a heart attack—but have been diagnosed with panic disorder and are fearful of a heart attack—should get a thorough physical evaluation to determine their heart health. If they are not at risk of a heart attack, then we begin the psychological work: They must be willing to be uncertain whether they are having a panic attack or a heart attack.

Their first goal is to respond to their typical anxiety or panic symptoms as anxiety or panic. Their position should be to say, 'I want to recover from panic disorder strongly enough that I am willing to have a heart attack and miss it.' That is how they will confront their need to be 100 percent certain.

Recent research suggests that people who have received a diagnosis of panic attacks or panic disorder under age 50 have an increased risk of developing heart disease or suffering a heart attack. The conclusions in this study are not definitive, and reasons for the increase in heart disease and heart attack were not established. More studies must be conducted to find out whether panic disorder is a risk factor for developing heart disease.



Mark Pollack, MD, says the findings of this research offer some value. The study does suggest the possibility that, like other modifiable cardiac risk factors such as poor diet, sedentary lifestyle, or hypertension, treatment of panic and anxiety may have a beneficial effect on reducing the likelihood of developing heart disease.”

Whenever you're in doubt about your symptoms, seek care without delay. Only medical tests can rule out the possibility of a heart attack. Once a heart attack is ruled out, seek effective treatment such as talk therapy and medication.

Reid Wilson, PhD, is the Director of the Anxiety Disorders Treatment Center, Chapel Hill, North Carolina, and the Associate Clinical Professor of Psychiatry at the University of North Carolina School of Medicine .

Mark H. Pollack, MD, is the Chairman of the Psychiatry Department at Rush University Medical Center in Chicago, Illinois. He is the President of the ADAA Board of Directors.

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