

► YOU DON'T NEED A PILL FOR THAT

Everyone gets anxious from time to time. A healthy dose of anxiety motivates us to challenge ourselves or to stay away from dangerous situations. However, normal anxiety sometimes goes haywire and, rather than helping, starts to cause problems. Anxiety disorders are the most common mental health issue in the United States, affecting more than 40 million people every year. Although anxiety disorders are highly treatable, very few people receive effective treatment. Most often, they end up relying on various medications to help manage their anxiety, because they don't know there are other options.

A review of the current research in the 2008 *Journal of Clinical Psychiatry* found that one of the most effective alternatives to medication is cognitive-behavioral therapy (CBT). A large body of the research supported the consistent finding that CBT is as effective—or more effective—than medications alone for treating most anxiety disorders.

Why CBT?

Cognitive-behavioral therapy is a very specific type of psychotherapy that focuses on identifying how particular patterns of thinking and behaving influence how a person feels and reacts to certain situations or people. CBT is often referred to as an evidence-based treatment. This means the interventions used in CBT have been rigorously tested and determined effective in treating specific problems people are faced with when seeking therapy. As a result, CBT aims to develop practical tools and resources people can use to create the desired change. CBT is a brief therapy approach. When specific problems such as anxiety are being targeted, significant improvement can be seen in as few as 12 to 22 sessions.

A CBT therapist works in much the same way a coach would work with an athlete. Coaches first identify athletes' strengths and weaknesses, then develop a plan that will help them meet their goals. The CBT therapist does the same with his or her clients, identifying problem areas and setting goals. Together, they develop a treatment plan that involves learning and practicing skills, challenging unhelpful and inaccurate ways of thinking and learning new ways to behave. The therapy is very active and requires practice both during and outside of actual sessions.

Case study

Andrea is a 36-year-old businesswoman and mother of two. She came into therapy because she'd been having panic attacks since a recent promotion at work. She'd gone to the emergency room twice convinced she was having a heart attack. She'd been told both times that there was absolutely nothing wrong with her heart and that she was having a panic attack. Her primary care doctor prescribed Xanax, a powerful anti-anxiety drug with a variety of possible side effects. She didn't like the idea of having to use medication the rest of her life, nor how it might affect her work. The Xanax didn't stop the panic attacks, only helped her cope with them in the moment, never really getting to the bottom of why they occurred. She'd gone to a traditional therapist, and while talking was somewhat of a comfort, it also didn't reduce the attacks.

When Andrea first came to CBT, she was concerned about when the next panic attack might hit, especially during the workday. She'd begun to avoid going to certain places, like large malls and busy areas, for fear the crowds or stuffy air might trigger an attack. She was also concerned she might have a problem during an important meeting or when driving her family around, fearing she'd lose control of her car.

Her first step was to fill out a questionnaire that helped determine how often she was having panic attacks and how afraid she was that one would occur. Questionnaires are commonly used in CBT to objectively measure

change during treatment. We identified the physical sensations that Andrea had and how they triggered thoughts that something was wrong.

People often try to manage their anxiety-related symptoms with avoidance. Andrea had begun avoiding scenarios she otherwise would have liked to participate in, because she thought she might have an attack. She also avoided things she thought might trigger physical sensations that scared her. She stopped drinking coffee and exercising, because both made her heart beat faster. In other words, her world was becoming smaller and smaller.

When we treat anxiety, we must help clients move toward what they fear instead of away from it. In doing so they learn that the physical symptoms aren't dangerous and that they can cope. In helping Andrea move toward her fears, we had her do specific exercises that would bring on scary sensations, like running up and down the stairs to get her heart beating. We then had her identify her catastrophic fear that if her heart beat faster it would trigger a heart attack. After several practice sessions, she began to see that her heart beating fast was normal. Homework included purposely doing activities to make her heart beat faster in different situations, from least to most scary.

We developed a number of these types of "exposures" during the next several weeks. The more she practiced, the more confident she became that the symptoms were harmless. Within 12 weeks, she was no longer fearful of having a panic attack and left the Xanax at home for good.

Finding a CBT therapist

When looking for a CBT therapist, it's vital to find someone who's highly trained in CBT and specializes in treating the specific problems with which you're struggling. Many therapists incorporate CBT interventions into their work with clients. However, to get the maximum benefit, it's important that the therapist use a complete CBT approach rather than just a few of the interventions. Don't be afraid to ask a lot of questions of prospective therapists, including those about their training in CBT and experience, as well as specifics regarding how they'd work with you and their overall success rate in treating other clients.

Jennifer Shannon, MFT, and Litsa Tanner, MFT, are the co-founders of the Santa Rosa Center for Cognitive-Behavioral Therapy and have more than 35 years of combined experience treating children, adolescents and adults. To learn more about anxiety disorders and treatments, visit www.SRCBT.org or call (707) 545-4600.