

Psychotherapy for panic disorder shows positive long-term effects

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Psychotherapy for panic disorder produces good results, and the effects are lasting. That is the result from a large long-term study from Lund University in Sweden. Two years after treatment were 70 per cent of the

patients clearly improved and 45 per cent were remitted.

Panic disorder is one of the most common causes of mental illness in Sweden and worldwide. Approximately 2 per cent have [panic disorder](#). When untreated, the condition is associated with emotional distress and social isolation. Panic attacks often debut in adolescence or [early adulthood](#) and many of those affected drop out of education, jobs, and can't fulfill their life dreams.

"Many people adapt to their panic disorder by various restrictions in their [daily living](#)", says psychologist Thomas Nilsson, who conducted the study, with 221 participants over 10 years, together with research colleague Martin Svensson.

"Treatment is crucial as the disorder often leads to a downward spiral in which the margin for everyday life activities becomes increasingly narrow."

The researchers studied not only the short and long-term effects of [therapy](#) but also how treatment outcome was affected by offering the patients to choose their treatment. The options were two forms of therapy, specifically designed to treat panic disorder—a psychodynamic psychotherapy (PDT) and a cognitive behavioral therapy (CBT). One half of the patients were allowed to choose their form of therapy and the other half were randomly assigned to one or the other.

The researchers' hypothesis was that the patients offered a choice between two validated treatments would benefit from receiving their chosen form of therapy. In previous research this has been the case, and psychologists generally take patient preferences into account in treatment decision. Therefore, the researchers were surprised by the result: patients' who had chosen PDT tended to have better outcomes than those who were randomly assigned to the same treatment. However,

the exact opposite applied to patients in CBT: those who were randomly assigned to CBT tended to have better outcomes than those who had actively chosen that form of treatment. So far the researchers can only speculate on the reasons for this.

"Perhaps those who chose psychodynamic therapy had a more accurate perception of what they needed", says Svensson, while pointing out that more studies are required.

However, the most important finding from the study was that both treatments had both positive and lasting results. Two years after treatment 70 per cent of the patients was clearly improved and 45 per cent were remitted.

"The patients felt better in many ways. For instance [depressive symptoms](#), that often accompany [panic](#) disorder, were significantly reduced and quality of life improved", says Svensson.

These findings are impressive given that both treatments were as brief as 12 weeks.

More information: Martin Svensson et al, The Effect of Patient's Choice of Cognitive Behavioural or Psychodynamic Therapy on Outcomes for Panic Disorder: A Doubly Randomised Controlled Preference Trial, *Psychotherapy and Psychosomatics* (2020). [DOI: 10.1159/000511469](https://doi.org/10.1159/000511469)

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