PHOTOCOPY FOR YOUR PATIENTS

PATIENTS AS PARTNERS

Brought to you by The South African Depression and Anxiety Group



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Agoraphobia – the risk of untreated panic disorder Panic Awareness Day, 10 July 2012

by Dessy Tzoneva

Many of us know what it's like not to want to get out of the house... especially now that the temperatures are dropping and it's so much cosier indoors. Sometimes, even going to the garage up the road seems like a huge task, even if it's for something we really need. But what if it was an intense fear and not convenience that kept you from stepping outside the comfort of your home? What if the thought of going outside was petrifying enough to keep you housebound for years?

This is the reality for some people living with panic disorder – an anxiety disorder characterised by short periods of unexpected terrifying fear together with physical symptoms like a racing heartbeat, nausea, sweating, dizziness and breathlessness. These panic attacks occur for no reason and some people come to fear them so much they begin to avoid places they believe may trigger the attacks.

Agoraphobia refers to a condition in which people have reached a stage where they desperately fear even going to the shops or to restaurants; in fact they avoid any spaces from which they feel it would be difficult to escape or find help in case they have a panic attack. This often means not moving outside the safety of their home, which can continue for years.

Jolene knows the feeling all too well and has been living with agoraphobia since she was 16: "I've been having panic attacks for years and am so scared of having one when I go out and not being able to get help that I haven't left the house for years." At 34, Jolene does not have a driver's licence, doesn't work and says she has not yet had a serious romantic relationship. She also mentions that it's easier making friends with older people, as they seem to be more understanding of her condition.

Clinical psychologist and Cognitive Behaviour Therapy (CBT) therapist, David Rosenstein, says that as in Jolene's case, agoraphobia is generally experienced by someone who has panic disorder and as a result begins to fear having a panic attack in public. "It is, however, also possible although less common to have agoraphobia without a diagnosis of panic disorder," explains Rosenstein. "In such instances, people feel generally anxious about public places and fear that they aren't safe outside their home."

For Sheridene, fighting with her partner is what she says brought on her panic attacks at the age of 19. A year later, she began fearing leaving the house, as well as being left alone at home: "At first I had no idea what was happening to me... I put it all down to stress, until a friend of mine who was diagnosed with panic disorder told me what I was describing are panic attacks." Soon she became housebound, too scared to even go to the shop just one kilometre away. "I used to be so outgoing and all of a sudden I didn't want to do anything! The thought of having a panic attack in public, losing control and possibly embarrassing myself by screaming or crying frightened me so much that I couldn't force myself to leave the house." Sheridene was also afraid be away from people she trusted and always wanted to keep her daughter close to her, restricting what she was allowed to do.

Between 50% and 75% of people with panic disorder will avoid certain places and activities. This can lead to social impairment greater than that of major depression. Panic Awareness Day is on 10 July 2012 and it's vital to highlight that treating panic disorder early on can help to prevent agoraphobia, although it can sometimes take years for people to receive the correct care. Before receiving a diagnosis of panic disorder, South Africans will on average visit 11 doctors and spend over R20 000 on medical investigations.

Another potential problem is that some people with agoraphobia refuse to leave the house and get into a car in order to seek treatment. "If the thought of leaving the house is completely overwhelming for you, you can contact your house doctor and discuss medication that could help to reduce your anxiety enough to allow you to attend psychotherapy," advises Rosenstein. He adds that certain CBT therapists do offer house calls due to the nature of the condition and this option can always be discussed with a psychologist in your area. "Remember that avoidance of all the things you fear only serves to reinforce your anxiety, which perpetuates the problem. I know it's difficult, but it's important that you try to find a way to take that first step towards recovery." This is vital because according to Rosenstein, remission rates are very good and people can recover fully from agoraphobia!

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Furthermore, panic disorder itself is also highly treatable and with the right combination of therapy, 90% of people recover fully, while the remaining 10% improve significantly.

The South African Depression and Anxiety Group (SADAG) receives many calls from people like Jolene and Sheridene on its toll-free helpline – 0800 20 50 26 – open 7 days a week from 8am to 8pm. SADAG helps by providing them with information on the disorder, discussing self-help tips as well as treatment options, and getting them in touch with relevant mental healthcare professionals in their area.

Treatment for agoraphobia often involves a combination of CBT – a psychotherapy that targets the thoughts and behaviours that play a role in maintaining the condition – and medication. Rosenstein says: "CBT has been linked to fewer relapses and is the principal treatment for agoraphobia and panic disorder. Traditional psychodynamic therapy is not as suitable for these two specific conditions, so when looking for a psychologist make sure you ask whether they practice CBT." He adds that generally, around 12 to 14 sessions of CBT should be sufficient for treating agoraphobia, although it could be even less.

Jolene is currently on medication and undergoing CBT, and says that she tackles small tasks one by one until her anxiety with each one eases. At the moment, she is taking walks around her neighbourhood with very little discomfort: "With each task my anxiety gets less and less, and I am feeling so much better. I would encourage others with agoraphobia to get help as soon as possible – it's not worth being housebound and not living a normal life. Try to do something every day to help you get better." Sheridene agrees: "Don't let agoraphobia rule your life, no matter how scared you are! Try to force yourself to go out and talk to yourself, rationalising through the fear." Sheridene can now leave her daughter with a loved one but is still too nervous to leave the area completely, which she is now working on.

If left untreated, agoraphobia can have dangerous consequences. "Depression is more likely in people with agoraphobia and the longer it's left untreated, the higher the risk," says Rosenstein. He explains that other anxiety disorders, psychiatric conditions and health problems are also more likely. Due to lower activity levels, lethargy and unhealthier eating, weight gain is also a possibility. In addition, people experiencing agoraphobia face work problems, relationship difficulties and even thoughts of suicide.

Rosenstein advises loved ones to encourage but not force a person with agoraphobia to leave the house: "It's very important for people with this disorder to feel that they are in control, so using force is not a good idea! Rather reinforce their behaviour by praising them when they do manage to go for a walk outside or come with you to the shop or even to the doctor."

To find a CBT therapist, call SADAG on 0800 20 50 26. For more information on anxiety disorders and other mental illnesses, visit www.sadag.org

AGORAPHOBIA SYMPTOMS

Fear of:

- · leaving the house
- places from which escape may be difficult
- places where help may not be easily available
- being left alone
- losing control in public
- embarrassing yourself in public

SELF-HELP TIPS

Rosenstein suggests that it's helpful for people with agoraphobia to:

- Be aware of their avoidance behaviours and how they contribute to the disorder
- Recognise how isolating themselves can lead to depression
- Remember that agoraphobia is a psychiatric disorder that can be treated
- Remind themselves that a panic attack is a false alarm and that they can manage it and will not die from it
- Make time for exercise, which helps in treating panic disorder
- Avoid suppressing symptoms with alcohol and/or drugs
- Work on getting out of the house slowly by first walking around in the garden, then the street, then the neighbourhood, and after that riding in a car as a passenger, then driving, etc.
- Praise themselves for any achievement, no matter how small, even if just to congratulate themselves on their effort

IMPORTANT NUMBERS TO REMEMBER

Suicide Crisis Line: 0800 567 567 or SMS 31393

Pharmadynamics Police and Trauma Line: 0800 20 50 26

AstraZeneca Bipolar Line: 0800 70 80 90

Sanofi Aventis Sleep Line: 0800-SLEEPY (0800 753 379)

Dept. of Social Development Substance Abuse Line: 0800 12 13 14 or SMS 32312

Dr Reddy's Helpline: 0800 21 22 23

Office Lines: 011 262 6396

Website: www.sadag.co.za

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Introducing Facebook Fridays SADAG answers your questions on mental health

As part of its Bipolar Awareness Day campaign in May this year, the South African Depression and Anxiety Group (SADAG) ran a series of live chats on its Facebook page, giving South Africans the opportunity to connect with mental healthcare experts. Following the success of these online discussions and the widespread positive response, SADAG will be running one-hour online chats on its Facebook page twice a month on various mental health topics, including depression, anxiety, panic disorder and trauma. The chats will allow South Africans who live all over the country, to have their questions related to symptoms, treatment, medication and self-help tips answered by psychiatrists, psychologists and SADAG counsellors.

SADAG invites anyone with a question related to below-mentioned topics to go onto the NGO's Facebook page – The South African Depression and Anxiety Group – and post their questions. The chats planned for July and August 2012 are:

JULY

- 6 July Panic Disorder and Cognitive Behaviour Therapy (CBT)
- 20 July Stress in the workplace

AUGUST

- 10 August Postnatal Depression
- 24 August Cutting/Self-mutilation

On each of these days, people can participate in two live chats, one at 13:00 and one at 19:00. SADAG has decided to run two chats a day to accommodate both those who only have Internet access during the day and those who prefer to connect with SADAG from the privacy of their own homes. People who feel nervous about posting their questions on the page are welcome to start a private chat with the group instead during the one-hour discussion.

"We are very excited about Facebook Fridays! Our aim is to make mental healthcare professionals more accessible and to expose people to accurate information about mental illness," says SADAG Operations Director, Cassey Chambers. "It's time that South Africans begin to accept that mental illness is every bit as real and important as diabetes or heart disease, and it deserves the same attention and respect," says Chambers.

Earlier this year, SADAG partnered with Facebook and became the official suicide prevention agency for South Africa. This means that if any suicidal content is posted on Facebook in South Africa, concerned loved ones or even strangers can report this content via Facebook, which will ensure that SADAG's contact details are sent to the person identified and the NGO is also made aware of the posting. "We have had a very positive response to this new suicide prevention tool and regularly contact South Africans who may be in crisis," says SADAG Founder, Zane Wilson.

For those who are unfamiliar with Facebook, SADAG will have a button on the landing page of its website – www.sadag.org – that will take people directly to the Facebook chat page where they can connect with the experts.

SADAG can also be contacted toll-free on 0800 20 50 26 between 8am and 8pm 7 days a week with any queries related to mental health.

SADAG Since 1994



making mental health matter



- Over 400 calls a day
- 15 Helplines
- Open 365 days a year
- 8 am to 8 pm
- 100 Volunteer counsellors
- Free telephone counselling
- 22 suicides a day
- 220+ attempted suicides daily
- 1 in 5 South Africans have Mental Health problems



www.sadag.org has over 600 000 hits a month

- Online video's, local & international articles, brochures, discussions etc
- Newsletter mailed out to 20 000+ patients monthly
- 100+ Patients e-mails daily



SUBSTANCE ABUSE

- 24 Hour help Line 0800 12 13 14
- Schools outreach education N. Cape. Mpumalanga, Limpopo, North West Province
- 48,000 youth and over 2,000 teachers
- Community workshops on Alcohol, Dagga and Substance Abuse
- Powerful link between Mental Health and Substance Abuse



Over R8 Million worth of FREE advertising monthly includng press, media awareness, newspaper, internet, radio, V and magazine

FUNDING



- Books income 43.23%
- Projects 21,96%
- Training income 2.77%
- Call Centre & Drug trials 14,77%
- Donetions 5.74%
- Pharmaceutical Sponsorship 10,72%
- Memberships 0.81%

TEEN SUICIDE prevention



- Teen suicide and substance abuse prevention, bullying, self mutilation, exam stress
- Workshops in all provinces in 2011
- Youngest Suicide in South Africa 7 Years old
- 120 000+ students and teachers participated in awareness programs in 2011



CONTACT SADAG

011 262 6396 | SMS 31393 | www.sadag.org

SPEAKING BOOKS

- SADAG innovation = income
- 6 National and International awards
- Low Literacy voice recorded and 16 pages with health messages.
- 46 Titles in 11 Languages.
- Sponsored by De Beers. Pfizer, USAID, Merck, EU. Dept of Health, Sanofi. Swaziland Govt.





SUPPORT GROUPS

- over 160 FREE support groups in all 9 provinces
- Supporting Depression, Bipolar, Trauma, Panic and Suicide



RURAL OUTREACH PROGRAMMES

- FREE workshops to: Home based care workers, nurses, social workers, lay counsellors, church leaders, women associations. traditional healers and other NGO's
- Capacity building in rural communities
- Janssens Counselling Centre in Diepsloot