

**MINDFUL WAY THROUGH PANIC  
TREATMENT OUTLINE  
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Each Step can be 1 to 3 sessions, depending on the needs of the patient, their level of severity/openness to change, and other challenges going on in life

**Step 1: Assessment of panic & teaching diaphragmatic breathing**

**Step 2: Explain why panic occurs through anxiety sensitivity and ironic process**

**Step 3: Teach about mindfulness, explain how it disrupts panic cycle, teach a mindfulness technique**

**Step 4: Identify avoidance behaviors and assess willingness to change**

**Step 5: Deepening mindfulness through every day living**

**Step 6. Teaching non-judgment as it applies to panic triggers**

**Step 7. Deepening nonjudgment to panic-related triggers**

**Step 8: Confronting one's fears through exposure therapy**

**Step 9. Solidifying the changes**

**Step 1: Assessment of panic & teaching diaphragmatic breathing**

Panic diagnosis

History of medical problems

Does patient have issues that could mimic panic.

Has patient had physical? Evaluated in ER? Seen cardiologist? If not, refer to primary care

Teach patient diaphragmatic breathing or mindfulness meditation.

Homework: practice diaphragmatic breathing 5 to 10 minutes/daily

**Step 2: Explain why panic occurs through anxiety sensitivity and ironic process**

Review homework practice, obstacles, successes

Identify anxiety sensitivity by giving the anxiety awareness measure (Give measure about every 5 sessions and discuss any changes)

Give anxiety awareness measure and review with patient

Explain what anxiety sensitivity is

Discuss which anxiety sensitivities affect patients the most:

About a 2 or higher on any item could be worth discussing

Where do they come up? How often? Identify examples, explore

Optional: Discuss family history, e.g., family attitudes towards health, abuse, temperament as a child

Teach about ironic process through the finger trap demonstration

Review cycle of panic handout and help patient understand the process

Homework:

Monitoring anxiety sensitivities throughout the week. Journal about them during week:  
When? Where? How?

Diaphragmatic breathing 5 to 10 minutes/daily

**Step 3: Teach about mindfulness, explain how it disrupts panic cycle, teach a mindfulness technique**

Review homework practice, obstacles, successes

Give the Mindful Attention and Awareness Scale (MAAS)

Introduce the idea of mindfulness and review (MAAS)

Teach mindful breath meditation or whatever mindfulness practice you prefer

Mindfulness practice at least 5 to 10 minutes in session

Explore how it went, clarify it's not a relaxation exercise

Homework:

Journal about anxiety sensitivities at least 1 day

Diaphragmatic breathing 3x/week

Mindfulness breath meditation 3 to 5x/week

**Step 4: Identify avoidance behaviors and assess willingness to change**

Review homework practice, obstacles, successes

Give the Avoidance Behaviors List

Explain avoidance behaviors and connection to panic

Explore why they avoid in big and small ways, monitor over coming week

Discuss how it can be gradually changed, explore alternative actions

Discuss how willing/flexible they are in changing

Homework:

Diaphragmatic breathing 3x/week

Mindfulness breath meditation 3 to 5x/week

Journal about avoidance behaviors: When? Where? How? Three days/week

**Step 5: Deepening mindfulness through every day living**

Review homework practice, obstacles, successes

Identify an avoidance behavior that could be change; keep addressing gradually and changing over the whole course of therapy.

Review what mindfulness is again, clarify concepts

Teach another mindful technique, e.g., body scan meditation, walking meditation, mindfulness to specific sensations

Teach mindfulness in everyday living

Teach mindful eating and mindfulness in daily activities

Homework:

Diaphragmatic breathing at least once per week  
Mindfulness meditation at least 3 to 5x/week  
Do mindfulness in everyday life at least 3 times/week  
Journal about avoidance behaviors: When? Where? How? Three days/week  
Continue to review avoidance behaviors to change

### **Step 6. Teaching non-judgment as it applies to panic triggers**

Review homework practice, obstacles, successes  
Do the “What do you hear?” audio demonstration. Introduce idea of judgment vs. nonjudgment as it connects to panic.  
Explore how patient judges panic triggers, e.g., thoughts, sensations, other people  
Explain idea that rumination and anticipation fuel cycle of panic  
Homework:

Diaphragmatic breathing optional  
Mindfulness meditation at least 3 to 5x/week  
Do mindfulness in everyday life at least 3 times/week  
Continue to review avoidance behaviors to change  
Have patients journal about rumination/anticipation related to panic over week: when? where? how?

### **Step 7. Deepening nonjudgment to panic-related triggers**

Review homework practice, obstacles, successes  
Discussion recognizing and learning to see anticipation/rumination as judgments  
Introduce mindfulness to panic-related triggers, i.e., mindful awareness to sensations/thoughts/images that trigger panic  
Practice in session, spend at least 30 minutes to do this and explore how it went  
Homework:

Diaphragmatic breathing optional  
Mindfulness meditation at least 3 to 5x/week  
Do mindfulness in everyday life at least once 2 to 3x/week  
Continue to review avoidance behaviors to change  
Practice mindfulness to panic-related triggers 3x/week 10 to 20 minutes

### **Step 8: Confronting one’s fears through exposure therapy**

Review homework practice, obstacles, successes  
Build exposure hierarchy with 5 situations  
Discuss how to use mindfulness during exposure  
Focus on self-efficacy not anxiety reduction

Homework:

Diaphragmatic breathing optional

Mindfulness meditation at least 3 to 5x/week

Do mindfulness in everyday life at least once 2 to 3x/week

Continue to review avoidance behaviors to change

Optional: Practice mindfulness to panic-related triggers 3x/week 10 to 20 minutes

Practice exposure at least once a week. Quality more important than quantity of exposures

**Step 9. Solidifying the changes**

Go over any areas that need further work

Help the patient to initiate their own changes, ask them to generate more and more steps on own

Space out sessions up to 1 to 2 months and then consider termination