

Panic Attack

A **panic attack** is a sudden episode of intense fear or discomfort that reaches a peak within minutes and is often accompanied by physical and cognitive symptoms. It can occur in response to stress, psychological conditions, or specific triggers, including medical procedures such as awake craniotomy.

□ Clinical Features

Typical symptoms include:

- Palpitations or accelerated heart rate
- Sweating
- Trembling or shaking
- Sensations of shortness of breath or smothering
- Chest pain or discomfort
- Nausea or abdominal distress
- Dizziness, lightheadedness, or feeling faint
- Chills or heat sensations
- Numbness or tingling sensations
- Derealization or depersonalization
- Fear of losing control or “going crazy”
- Fear of dying

□ Diagnostic Criteria

According to DSM-5, a panic attack is characterized by **at least 4 of the above symptoms** peaking within **10 minutes**.

□ Differential Diagnosis

- Acute coronary syndrome
- Seizure
- Hyperventilation syndrome
- Pheochromocytoma
- Adverse drug reaction

⚠ Relevance in Awake Surgery

In the context of **awake craniotomy**, panic attacks are:

- A **predictor of awake surgery failure**, especially in anxious or poorly prepared patients.
- A reason for possible **conversion to general anesthesia**.

- Manageable with adequate **preoperative counseling**, anxiolytics, and a trained anesthesia team.

Management

- Reassurance and calm environment
- Breathing control techniques
- Short-acting anxiolytics (e.g., midazolam)
- Cognitive behavioral strategies
- Avoiding overstimulation (lights, noise, crowd)

References

- American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, 5th ed. (DSM-*

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