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The Role of Psychological Factors in the Acquisition and Maintenance of Panic Disorder Panic disorder is defined as a “ heterogeneous disorder” whichis associated with a number of somatic, cognitive and physiological symptoms characterized by “ unexpected”, persistent panic attacks (Roberson-Nay & Kendler, 2011, 2411). Since PD is classified as heterogeneous in nature, its symptoms are manifested in ways that vary from one patient to another (Kircanski, Phil, Craske, Epstein, and Wittchen, 2009). Panic disorders are typically understood by reference to the interaction between biological and psychological factors (Barlow & Durand, 2011). Nevertheless, research studies have been conducted demonstrating the psychological factors contributing to the acquisition and maintenance of panic disorder (Rapee, 1993). This paper examines some of the theories and assumptions relative to the psychological factors implicit in panic disorders by reference to the empirical evidence substantiating these theories and assumptions.   
The main theories and assumptions explaining the acquisition and maintenance of panic disorder are cognitive, anxiety sensitivity and conditioning theories (Bouton, Mineka, & Barlow, 2001). Cognitive theory of panic disorder assumes that associated panic attacks take place in response to a persistent “ tendency to misinterpret bodily sensations” as detrimental cues (Salkovskis, Clark, Gelder, 1996), p. 453). Thus catastrophic cognitions are the main psychological factors contributing to the acquisition of panic disorder. As a result of these catastrophic cognitions, patients will typically develop “ within-situation safety seeking behaviours” which is marked by a tendency to either flea or stay away from situations that might bring on a panic attack (Salkovskis, et. al., 1996, p. 453). Salkovskis, et. al., (1996) conducted a study of 147 patients with panic disorder and determined that catastrophic cognitions are linked to within-safety behaviours and not only explain the acquisition of panic disorder but also behaviours that maintain the disorder.   
Anxiety sensitivity theory argues that anxiety sensitivity, which is the fear of anxiety and its corresponding sensations, is a contributing psychological factor to panic disorder (Kashdan, Zvolensky, & McLeish, 2008). Kashdan et. al., (2008) conducted a study of identifying and examining the “ interactive influence” of anxiety sensitivity with 248 adults in their early 20s (p. 432). The participants completed Penn State Worry Questionnaire which measures 16 items relative to pathological worry in three areas: generally, excessively, and uncontrollably. The participants also completed an Agraphobic Cognitions Questionnaire which measures catastrophic interpretations, and also completed the Mood and Anxiety Symptom Questionnaire. Results indicated that anxiety sensitivity was more commonly linked to generalized patterns of anxiety and were more intense when coupled with difficulties regulating affect (Kashdan, et. al., 2008).   
Bouton, et. al., (2001) explain that conditioning theories assume that when “ stimuli, events, or situations (conditioned stimuli)” are accompanied by a panic attack, the individual experience permits conditioned stimuli to characterize future similar experiences by the same heightened sense of panic and anxiety (Bouton, et. al., 2001). Michael, Blechert, Vriends, Margraf, and Wilhelm (2007) tested the conditioned stimuli aspect of conditioning theory on 39 panic disorder patients and 33 normal individuals. The test was an experiment in which the participants were subjected to an electrical stimulus as unconditioned stimuli and two impartial photographs coupled with conditioned stimuli. Results indicated that panic disorder patients and non-patients have vastly similar conditioned reactions at the acquisition stage. However, panic disorder patients exhibited a greater degree of maintenance (Michael, 2007).   
Panic disorder involves a complex interaction of physical and mental reactions in circumstances where the corresponding panic and anxiety attacks are usually unexpected. Psychologists have made significant progress in identifying the psychological factors that contribute to the acquisition and maintenance of panic disorders. As a result, a psychological understanding of the sources of acquiring and maintaining panic disorder are useful for diagnosing and treating patients with panic disorder.   
  
  
  
  
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